SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

	ACCIDENT STATEMENT
Date Of Report	04/03/2019 11:13
Date Of Accident	02/03/2019 16:15
Exact Location Of Accident	BUKIT TIMAH EXIT TO CTE (AYE)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMG4264M
Insured/Policyholder	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	2017935055D
Email Address	BERNARDTHH57@GMAIL.COM
Mobile Phone No	
Alternative Phone No	Office-98532445
Vehicle Particulars	
Manufacturer	KIA
Model	CARENS SX
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
lf No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994322
Cover Note Number	
Driver	
Name of Driver	ENG GUAN YONG
NRIC No	S7814330D
Date Of Birth	11/05/1978
	CUTDOOD

OUTDOOR

21/05/2014

4 YEARS AND 9 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-96653421

Fax Number

Contact Number

EMail Address ENGGUANYONG@GMAIL.COM

BLK 10D BEDOK SOUTH AVENUE 2 Address

08-570

Postcode 463010 NO

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : GRAB PASSENGER

> Gender: : Male

Passenger 2 Name: : GRAB PASSENGER

> Gender: : Male

Passenger 3 Name: : GRAB PASSENGER

> Gender: : Female

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO NO

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Remarks/ Reasons:

YES YES

VIDEO WITH DRIVER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKT3308H
Vehicle Make/Model/Colour AUDI

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver FANG CHAO YING

NRIC/Passport Number S8274971C Contact Number 92266618

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of .
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) Investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the Information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder)

Date & Time:

-4 842 2019

Reporting Centre Personnel's Signature

Name: p. NRIC/FIN No.:

Poh Kwee Choo S6840583A

11-13 pm

STARKIE STÄCHFLOSFÖRN 7/3

1

SKETCH PLAN	/ PD	
		A-SKT 3308H
	1 1 4 1/	B-SMG-4264
	[24]	5° 5MQ 1201
	1810	
	1711	
	1V /g+	
DESCRIBE CIRCUMSTANCES		
		To la Bolf laws
	CTE(AYE) at BT. I left lane to turn	
Rt. Timah Rd	. Other Andy was	twing to filter
right.		
My Speed	was about 30 20-	30km/h. as 1
	our to all	
	in the front car	
	of as I trhed to	1 '0 /
	plate stop. and as	1 -
There was	is only scrates	on the the bumpor
and no	dents-was visible	or felf.
Very min	or inclosent.	
	*	
	40-200-	
DECLARATION		
I/We declare the foregoing parti	culars are true in every respect.	.)
	(LXb-X	\geqslant
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature Name: Dob Kwee Ch00
Date & Time:	(If driver is not the policyholder) Date & Time: -4 MAG 2019	Name: Poh Kwee Choo NRIC/FIN No.: S6840583A

ESSESC State-Planfern, VS.



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1967 (MALAYSIA)

MOTOR VEHICLES (THRO-PARTY RISKS) RULES, 1959 (MALAYSIA)

COMPREHENSIVE CERTIFICATE NO. POLICY NO. COMMERCIAL MOTOR SMG4264M 999994322 POLICY EXCESS
WINDSCREEN EXCESS

(The below excess is subject to GST)
ESS S\$1500.00 (Sect I & Sect II)

W Z 400

S\$100.00

SUM INSURED Mark
INSURING WITH COE/PARF YES

Market Value

SMG4264M

BIS MOTORING PTE LTD

26 December 2018 25 December 2019

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission

Authorised driver must be between age 23 to 65 with at least 2 years driving experience.

Accident repair can be carried out at Munich Auto Care in the condition that all repairs have to be surveyed, appointed by AIG surveyors before proceeding with repair.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

6) LIMITATION AS TO USE*

- Use for social, domestic, pleasure purposes and business purposes of insured
- Use for social, domestic pleasure purposes and business purposes of any person whom the vehicle is fined.
- Use for the carriage of passengers for hire or reward by any person to whom the vehicle is firred.

The Policy does not cover: it is use for tustion, driving test, racing, pace-making, reliability trial or speed testing, 2) Use whist drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. It use for any purpose in connection with the Motor Traile.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

HONG LEONG FINANCE

*Limitabons rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

17 We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles. (There- Party Risks and Compensation) Act. Chapter 189, and Part IV of the Road Transport Act. 1987. Maraylia.

Issued in Singapore 28 Dec 2018

500656-000 Cowell Insurance (Agency) Pte. Ltd. 8 Burn Road #09-09 Trivex Singapore 369977 AIG Asia Pacific Insurance Pte Ltd.

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7814330D



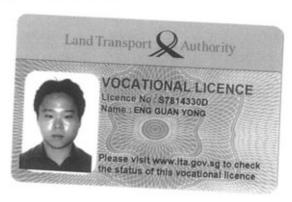
ENG GUAN YONG

翁 源荣

CHINESE 11-05-1978 M SINGAPORE

878143300







IC No. S7814330D

15-09-2008

APT BLK 10D BEDOK SOUTH AVENUE 2 #08-570 SINGAPORE 463010

4279417

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 21 May 2014 of the driver; and other motor vehicles =< 2500kg

NP 428A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.
 Type
 Description
 Issue Date

 12
 TAXI VL
 01/08/2018







Accident Photo











CHASSIS NUMBER



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO

