

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly 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 withholding 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 aforesaid.

ACCIDENT STATEMENT

Date Of Report	05/03/2019 12:04
Date Of Accident	04/03/2019 21:00
Exact Location Of Accident	SLIP ROAD OF UBI AVENUE 2 TOWARDS PAYA LEBAR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GM8980S
Insured/Policyholder	
Name Of Registered Owner	FAMILIAR STATIONERY SUPPLIER
Co Reg No	41076300D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62254853

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100436120-03
Cover Note Number	

Driver

Name of Driver	TAN KEE LAI
NRIC No	S0091844Z
Date Of Birth	18/07/1948
Occupation	OUTDOOR
Date Of Driving Pass	08/07/1974
Driving Experience	44 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98290518
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 49 HUME AVENUE
 #04-03
 Postcode 598749
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles (including own vehicle) involved in the accident 2
 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. NO
 Number of Passengers (Including Driver) 2
 Passenger 1 NAME: : TAN TING LIK
 GENDER: : MALE

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC61M
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category TAXI
 Name of Driver TAN YONG HEA
 NRIC/Passport Number
 Contact Number 92278489
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly 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 withholding 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. 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.
7. 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 :
 - (i) 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:

- 5 MAR 2019

[Signature]

GIA/MS Sketch Plan Form 1/13

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

- 5 MAR 2019

[Signature]

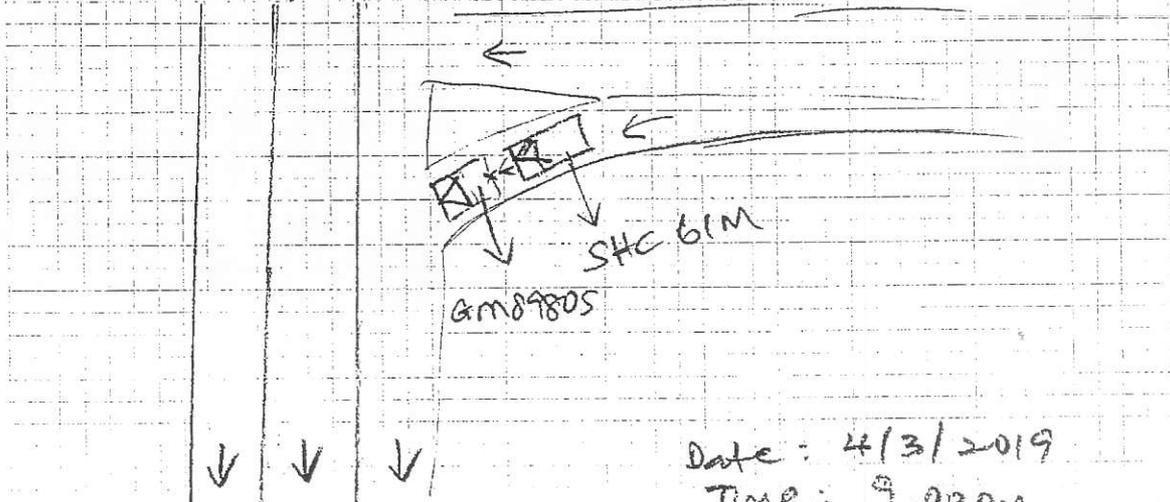
Reporting Centre Personnel's Signature
Name:

NRIC/FIN No: *Roh Kwee Choo*
S2040593A

SKETCH PLAN

Paya Lebar Road

UBI Avenue 2



Date: 4/3/2019
Time: 9.00pm

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The incident happened on 4/3/2019 about 9.00pm.

I was driving my company van along UBI Avenue 2 into Slip Road towards Paya Lebar Road. Suddenly, the back vehicle SHC 61M knocked onto my company van back.

The impact of my company van GM 89805 back portion dented and damaged.

The impact of the vehicle SHC 61M front portion number plate slightly damaged.

DECLARATION

I declare the foregoing particulars are true in every respect.



Policyholder's Signature

Date & Time:

- 5 MAR 2019

CIARANIC Street Insurance, S.S.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

- 5 MAR 2019

Reporting Centre Personnel's Signature

Name: Poh Kwee Choo

NRIC/FIN No.: S6940583A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0091844Z




Name
TAN KEE LAI

Race
CHINESE

Date of birth
18-07-1948

Sex
M

Country of birth
SINGAPORE

S0091844Z

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S0091844Z**

Name:
TAN KEE LAI

Birth Date: **18 Jul 1948**

Issue Date: **02 Mar 2004**



001146090F



3 9 6 5 3 9 6




NRIC No. **S0091844Z**

Date of issue
09-11-2006

Address
**49 HUME AVENUE
#04-03
SINGAPORE 598749**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	04 Feb 1981
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	08 Jul 1974

NP 428A

Licence No: S0091844Z





CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Familiar Stationery Supplier
 Period of Insurance : 29 Oct 2018 To 28 Oct 2019
 Engine No. : 1KD2557611
 Chassis No. : JTFHT02P900178646

Vehicle No. : GM8980S
 Policy No. : 2100436120-03
 Endorsement No. :
 Issued Date : 28 Sep 2018

ABOUT THE COVER

Make/Model : TOYOTA HIACE 1 ton [Van]
 Engine Capacity/Tonnage : 1 Tonnage Sum Insured : Market Value First Year of Registration : 2015
 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

- a) Any person who is driving on the Policyholder's order or with their permission.
- b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

- 1) Use in connection with the Policyholder's business.
- 2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.
- 3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle. c) use for any purpose in connection with Motor Trade.

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

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
 For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0692897000

ONG AH KHIM GERLYN
 8 JALAN RUMAH TINGGI #05-473
 SINGAPORE 150008 SP-MARGE-MARKLIM
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Janile

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

SSPVMG

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business

Owner ID: 6300D

Vehicle Details

Vehicle No.: GM8980S

Vehicle to be Exported: No

Intended Deregistration Date: 05 Mar 2019

Vehicle Make: TOYOTA

Vehicle Model: TOYOTA HIACE VAN TURBO 5 DR
MANUAL

Primary Colour: Silver

Manufacturing Year: 2015

Engine No.: 1KD2557611

Chassis No.: JTFHT02P900178646

Maximum Power Output: -

Open Market Value: \$27,741.00

Original Registration Date: 29 Oct 2015

First Registration Date: 29 Oct 2015

Transfer Count: 0

Actual ARF Paid: \$1,388.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 28 Oct 2025

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

PQP Paid: \$46,556.00

COE Rebate Amount: \$30,937.00

Total Rebate Amount: \$30,937.00

The information contained herein is correct as at 05 Mar 2019

OK

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SHC61M	04 Mar 2019 / 21:00:00	Successful	F03	MS FIRST CAPITAL INSURANCE LIMITED

[Previous](#)

[OK](#)



Thank you

Lai Mei Ling Deborah has successfully logged out.

Your last login date and time was 05 Mar 2019, 12:16:49.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No.	Asset Type	Asset ID	Asset Owner ID	Transaction Type
1	Vehicle	SHC61M	-	18.32 Insurance Enquiry (GIRO Payment)