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Owner / Driver: (		Tel:	
Policy No: ( )	Period: (	) Cover Type: (	)
Confirmed by : (	· Date:		)
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# 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 witholding of material facts may allow insurance companies to
- 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. 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 ladgement 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

DESCRIPTION OF THE PARTY OF THE	to sopies of the report being made available
<b>一种"经验"的</b>	ACCIDENT STATEMENT
Date Of Report	14/03/2019 16:43
Date Of Accident	
Exact Location Of Accident	13/03/2019 16:30
	AYE TOWARDS CITY EXIT LOWER DELTA ROAD
Country/State of Loss	SINGAPORE
<b>2017年第19日</b> 2015年1月1日	DETAILS OF OWN VEHICLE
Vahiala Danta di di	

Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBG4830J
Insured/Policyholder	00040000
Name Of Registered Owner	CAR COVE LEAGUE DATE
Co Reg No	CAR COVE LEASING PTE LTD
The state of the s	201602573M
Email Address	EDWIN@CARCOVE.COM.SG
Mobile Phone No	**************************************

and riddless	EDWIN@CARCOVE.COM.SC
Mobile Phone No	(LOCAL) +65-87818338
Alternative Phone No	
Vehicle Particulars	OFFICE-93850715

Manufacturer	MICCAN
Model	NISSAN
Event D.	NV200

Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	

for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	THIND I AILLI
- omole category	COMMERCIAL VEL

Vahiola Catanan	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	COMMENCIAL VEHICLE
modrance company	

- Company	
Name of Insurance Company	AIG ASIA BACIFIC INC.
Type Of Coverage	AIG ASIA PACIFIC INSURANCE PTE, LTD.
Fleet Policy	THIRD PARTY FIRE AND/OR THEFT
	NO
Policy Number	999994245
Cover Note Number	999354243

Driver	
Name of Driver	ANDV SIG DAR HIT
NRIC No.	ANDY S/O RADAKRISHNAN

NIPIC NI-	AND 1 3/0
NRIC No	S8501110C
Date Of Birth	15/01/1985
Occupation	OUTDOOR
Date Of Driving Pass	04/01/2008
Driving Experience	04/01/2008

Driving Experience	04/01/2006
Driving Experience	11 YEARS AND 2 MONTHS
Gender	TEMIS AND 2 WONTHS
	MALE

Driving Experience	11 VEADS AND SAIGHTHE				
Gender	11 YEARS AND 2 MONTHS				
Mobile Number	MALE				
	(LOCAL) +65-87818338				
Fax Number					
Contact Number	OTHERS				
EMail Address	OTHERS-93850715				
	EDWIN@CARCOVE.COM.SG				

Address

BLK 93B TELOK BLANGAH STREET 31

#03-177

Postcode

102093

Was driver an employee of the Insured's Company NO

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 - 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?

NO

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)

#### **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

SKU8549R

Vehicle Make/Model/Colour

CITROEN

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

THONG SAI KIAT LEWIS

NRIC/Passport Number

S7625117G

Contact Number

97473981

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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:

- 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre

Name:

NRIC/FIN No.:

VEH A: 63648305

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature Date & Jime:

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

Name:

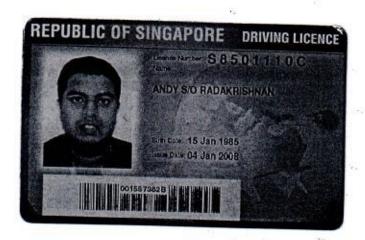
NRIC/FIN No.:

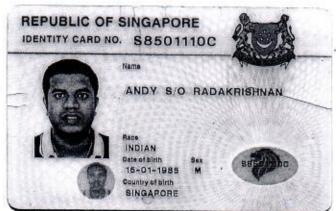
# ACCIDENT STATEMENT

ACCI	DENT DATE: 13 / 03 / 2019 1(DD/MM/YYYY), TIME: ( 16 , 30 ) (HH:MM)
LOCA	TION: ATE> DA CITY EXT LOWER DELTA ROAD
1.	DETAILS OF VEHICLE  a) VEHICLE NUMBER: 48301
	DINSURANCE COMPANY: A)G
	DIPOLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE STHEFT)
	O)MAKE & MODEL: NISSAN NV-DO
	gIVEHICLE CATEGORY: [PRIVATE / COMMERCIAL / MOTORCYCLE]
	HIPURPOSE OF USING AT ACCIDENT TIME: HIRE
	I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
	IF NO, PLEASE STATE (THIRD PARTY CHAIM / REPORTING ONLY)
2.	ANAME CAR COVE LEASING PIE LID (MALE / FEMALE)
	A)NAME: CAR COVE LEASING THE LIB (MALE / FEMALE)  b)NRIC/FIN/PASSPORT: 301603543M CONTACT: 84818338
	CIADDRESS: 1557 MERTEL ROAD BLOCK ( # 01-03 (3) 089 CKG.
	· CONTINUE TO 3.4 IF DRIVER ALSO POLICY HOLDER
to of personger	DRIVER ANDY SO RADAKRISHNAN MALE FEMALE
actualing driver)	diname:
115	CIADDRESS: BLU 93B TELON BLANGAH STREET 31 # 03-177 (5) 100
	CIADDRESS: But 190 LEFTING CHANGE AND ALL STORY
	"d)DATE OF BIRTH: (_ 15 / ON / 1 M85 )(DD/MM/YYYY)
	FIDATEL OF DRIVING PASS - 204 01 2008
4,	WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HIRER
5.	b) ROAD SURFACE: ORY / WET / OTHERS
6	WAS ANYBODY INJURED (YES / NO)
	a) REPORTED TO POLICE (YES /(NO)
	IF YES, PLEASE STATE WHICH POLICE STATION:
8.	THIRD PARTY VEHICLE SKU 8549 MODEL CTANEN
of fulltinger	a) VEHICLE NUMBER: MODEL! CITAGEN
checking district	C) NRIC/FIN/PASSPORT: 376351174 CONTACT: 94473981
	D) VEHICLE NUMBER: SAU 0549R MODEL: CHROEN  (b) DRIVER'S NAME: THONG SAI KINT ENTS  (c) NRIC/FIN/PASSPORT: 376351174 CONTACT: 97473981  THIRD PARTY VEHICLE
γ,	CI VEHICLE VILVABER WODEL:
a which and the	d) VEHICLE NUMBER: MODEL:  O) DRIVER'S NAME: CONTACT:
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EMPH =

VI080 =











#### 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, 1987 (MALAYSIA)

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

M.Z.400 (The below excess is subject to GST)

THIRD PARTY FIRE & THEFT COMMERCIAL MOTOR

CERTIFICATE NO. POLICY NO.

GBG4830J

999994245

**POLICY EXCESS** 

S\$2500.00 SECT II

WINDSCREEN EXCESS

CAR COVE LEASING PTE LTD

NA

SUM INSURED INSURING WITH COE/PARF

GBG4830.I

YES YES

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

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

12 February 2019 11 February 2020

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.

S\$1,500.00 Section I & S\$2,500.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore. An additional Section II excess of \$500.00 per accident is applicable in the event of an accident occurring outside Singapore.

The policy does not cover drivers who are below 22 years old and/or with less than 2 year driving experience.

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\*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing, 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

Heritage Auto Enterprise Pte Ltd

\*Limitations 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.

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

Issued in Singapore 04 Mar 2019

691991-000 Moh Kok Heng 3 Tampines Grande, AIA Tampines #02-38 SINGAPORE 528799

AIG Asia Pacific Insurance Pte. Ltd.

**AUTHORISED REPRESENTATIVE** 

SSPOEC

ORIGINAL