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TP Particulars: Veh No:	MA 20851	. INC(	.)/Non-INC(	)				
Owner Driver: (	0152		Tel:		)			
Policy No: ( ) P	eriod: (	)	Cover Type: (		)			
Confirmed by : (	- 2	Dates,	Timer					
Insured/Driver Liability: ( %)	[Note-Est Status (W		0%; P: 21-79%. I	P: 80-100%	<u> </u>			
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### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

EMail Address

- 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 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.

HOLDINATIO.	
	ACCIDENT STATEMENT
Date Of Report	22/05/2019 18:09
Date Of Accident	18/05/2019 07:30
Exact Location Of Accident	138D YUAN CHING ROAD
Country/State of Loss	SINGAPORE
TANK BOOK TO BE TO	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SDJ2131S
Insured/Policyholder	
Name Of Registered Owner	MARIC & PARTNERS PTE.LTD.
Co Reg No	201620701N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92216576
Alternative Phone No	OFFICE-92216576
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC-1.8 (A)
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE, LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	999994147
Cover Note Number	
Driver	
Name of Driver	DAVID KOK TUCK WHYE
NRIC No	S7628140H
Date Of Birth	17/09/1976
Occupation	OUTDOOR
Date Of Driving Pass	19/12/2002
Driving Experience	16 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92216576
Fax Number	
Contact Number	OTHERS-92216576

NOEMAIL

Address

BLK 138D YUAN CHING ROAD

#03-151

Postcode

614138

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO 2

involved in the accident

NO

Was any body injured in the Accident?

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)

1

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?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SMD3885T

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

## 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.
- Any false reporting may be referred to the Police for investigation.
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- 7. By the ladgment 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 t
  - (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
- 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:

(If driver is not the policyhalder)

Date & Time:

Reporting Centre Personne

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	$\top$	A B	-	-

1380 YUAN CHING ROAD
CARPARK UWTJ 39

VEHICLE 'A' SOJ 2131 S

VEHICLE 'B' SMO 3885T

# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

Palicyholder's Signatote

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Person

Name:

NRIC/FIN No.:

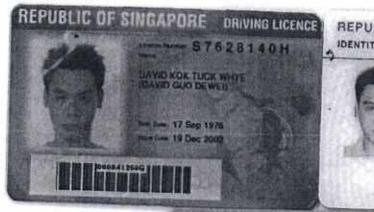
Reported O-19

Email: sm@idac.com.sg Tel no: 6555 6888 Fax no: 6454 3279

# Personal Particulars of Owner & Driver (Vehicle A)

Dute of Accident: 18/05/2019(do	I/mm/yy) Time of	Accident:	1 50	( 24-HR-FORMAT)	
Vehicle No : 507 1131 2	Vehicle Make & Mode	1401	JOA C	TIVIC 1-8	
Exact location of Accident:13	NAUY CIS	CHING	ROAD	TO TECHNOLOGY	
Policyholder's Name / IC No. : MAF	RIC & PARTNE	RS PTE.	LTD.	201620701N	
Driver's Name / IC No. : KOK	TUCK WHYE	DAVID	5763	18 140 H (As Above)	
Driver's Contact No.:	6576Comp	any Contact No	l <u></u>		
Driver's Address: 9 TAGORE LA	NE #03-04 9 @ T	AGORE S(	787472)		
Insurance Company: AIG	Email ad	dress (if any): _			
Relationship between Owner & Dri	ver: Hirer		or Oth	ers specify:	5-54-74
What do you wish to claim? (Please			ton Years		
Own Insurance / Other Vehic	de (The one you want to	o claim against	/ Repo	rting (For Record Purpose)	
Exact purpose for which the vehicle Was being used at time of accident?	Осси	pation (nature	of job)	Indoor/ Outdoor	
Private use / Work purpose	No.	of Passengers	Including D	river):	
Passenger Name : Passenger Name :			Gende Gende		
Weather condition & Road condition					
Clear & Dry / Raining & W				/ Others:	
Was there any video captured by yo					
Any Injuries: Yes / No	(If YES) Injured Person	1' Name:			
Injuries Sustain:		Injured Pe	erson in Whiel	Vehicle:	
Police Report filed: Yes /	No (If YES) Which	Police Station			
	The Other	Party(s) D	etails:		
1. Driver's Name / IC No:				Vehicle No: SMD	3885 T
Driver's Contact No:	Ins	urance Compan	ny (If any);		-
2. Driver's Name / IC Not				Vehicle No:	
Driver's Contact No:					
*Independent Witness (If Any):					
Preferred Workshop Name:			Cont	act No:	

<sup>\*</sup>If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week



REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7628140H





DAVID KOK TUCK WHYE (GUO DEWEI)

徳

CHINEBE 17-09-1976

SINGAPORE

57529140H

3934040



Please visit www.ita.gov.sg to check the status of this vocational licence



Class 3 Motor Cars and Motor Tractors the weight of which unlader door not accord 2500 billograms



S7628140H

D4/12/2014 (R)

Date of Issue 19-09-2006

Date:

APT BLK 1380 YUAN CHING ROAD #03-151 SINGAPORE 814138

NP 426A



This card is not trensferable 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.

Description

Isrue Date

- 37628140H

13

PRIVATE HIRE CAR VL 17/12/2018



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HOTEHER THE 1919 6415-2023

# CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THERO-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 188) NOTOR VEHICLES ITHIRD PARTY RISKS AND COMPENSATION PLACE. 1966 ROAD TRANSPORT ACT, 1887 (MALAYELA)

MOTOR MEMOLES (THROUGH ANTY RESES) MULES, 1965 MALAYSIA

THIRD FARTY FIRE & THEFT

CERTIFICATE NO. POLICY NO.

COMMERCIAL MOTOR

86331318 999994147

(The being excess is subject to GST) POLICY EXCESS

WINDSCREEN EXCESS

SS 1888 NO (See 1)

SUM INSURED

Market Value

INSURING WITH COLPARE YES

50,21315

MARIC & PARTNERS FTE LTD

25 April 2019 24 April 2020

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 EXPINY OF INSURANCE

S | PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE

151 500 00 Section II Excess to applicable for occurs who is between 22 sears to 70 years old with minimum 2 years from a source of a minimum. An additional section is excessed \$1,000.00 per accident is applicable in the event of an accident accurring outside impaction Accident repair can be named out at AKI appointed but of workship or Manufactural workship within 3 years watterly

Provided that the person dening is printed in soon dame with the training in other same or reputation in the the Many hands or by scales of a Court of Lewise by presson of any enactiment is regulation in that benefit turn driving the Motor refuse.

#### S | LIMITATION AS TO USE

- 1) Use for social, defreship pressure purposes and business purposes of majors.
  2) Else for social showards pressure purposes and business purposes of any potation artists the version is form.
- 2) Like he the carriage of passengers for him or securil by any person to when the variable is been

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LOSS OF USE

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HERE PURCHASE COMPANY

TAI THONG LEE THADING PTELTO

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leased in Bingspore 26 Apr 2019

500056-000<sup>6</sup>\* Consil Insurance (Agency) Ple. 118 8 Data Scott 8/20-03 France Singapory 368977

AIG Asia Pacific Insurance Pte. Ltd.

MATERIAL REPORT MATERIAL

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CHICINAL