

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	03/08/2019 14:42
Date Of Accident	02/08/2019 16:20
Exact Location Of Accident	11 TOA PAYOH LOR 3 SINGAPORE 319579.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB1549T
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Insured/Policyholder

Name Of Registered Owner	UNITED PARCEL SERVICE SINGAPORE PTE LTD
Co Reg No	198801949D
Email Address	MROSLAN@UPS.COM
Mobile Phone No	
Alternative Phone No	Office-81339046

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	
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
Fleet Policy	NO
Policy Number	0100739841
Cover Note Number	

Driver

Name of Driver	YAN YUAN YUAN
NRIC No	G2173557X
Date Of Birth	09/12/1989
Occupation	INDOOR
Date Of Driving Pass	19/10/2017
Driving Experience	1 YEAR AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-82684604
Fax Number	
Contact Number	
E-Mail Address	CHRISCHAW@UPS.COM
Address	NOADDRESS
Postcode	
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	COLLIDED INTO PARKED VEHICLE
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)	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

PLS REFER TO THE ATTACHED.

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	SLG1399P
Vehicle Make/Model/Colour	SILVER MAZDA 3
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	LESLIE ELISHA FOO YEW MENG
NRIC/Passport Number	S1771523B
Contact Number	96640088

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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:

2/8/19

Yan Yuan

Driver's Signature

(If driver is not the policyholder)

Date & Time: 2/8/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

See attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached.

DECLARATION

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

 
Policyholder's Signature
Date & Time: 21/8/19
Driver's Signature
(If driver is not the policyholder)
Date & Time: 21/8/19

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

Date : 02 August 2019

Time : 1625hrs

Entity : SP

Name : Yan YuanYuan

Position : Service Provider

Location : 11 Toa payoh Lor 3

UPS Vehicle no :GBB1549T

Accident description: On 2nd August 2019, 1425Hrs, Yuan Yuan was making a delivery at 11 Toa Payoh Lorong 3. Yuan Yuan made a U-Turn to go to the other side of the lane (with flow of traffic), Yuan Yuan saw a passenger car SLG 1399P parked against traffic flow, obstructing his travelling path. Therefore, Yuan Yuan drove around the car towards the right to avoid hitting it. At the same time, a FedEx van which was parking (against the traffic flow) behind the car also moved. Yuan Yuan turned the steering toward the left to avoid head-on collision with the FedEX van. As a result, UPS van hit the parked car(SLG 1399P) on the rear. Yuan Yuan immediately alighted the vehicle to take photos. The 3rd party wanted to settle privately but I insisted to call my Supervisor, Chris Chaw.

Yan Yuan

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
UNITED PARCEL SERVICE SINGAPORE PTE LTD

Name
YAN YUANYUAN

Work Permit No.
0 75338406

Sector
SERVICE



K0527627



VISIT PASS
Immigration Regulations

27-04-2016

Name
YAN YUANYUAN

FIN
G2173557X

Date of Birth
09-12-1989

Sex
M

Nationality
CHINESE

MULTIPLE JOURNEY VISA ISSUED

Download SGWorkPass App to check status



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



Accident Sketch Plan



HOTLINE TEL: (65) 8419-9000

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1966
ROAD TRANSPORT ACT, 1967 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1999 (MALAYSIA)

M.Z.300

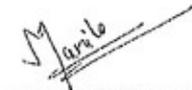
THIRD PARTY COMMERCIAL MOTOR	OWN DAMAGE EXCESS	SS\$0.00
CERTIFICATE NO. 999994156/100739841-00000	WINDSCREEN EXCESS	N/A
	<small>(for policies with effect from 1st November 2002)</small>	
	SUM INSURED	SS\$0.00
	INSURING WITH COE/PARF	NO
1) VEHICLE REGISTRATION NO.	GBB1549T	
2) NAME OF INSURED	UNITED PARCEL SERVICE SINGAPORE PTE LTD	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	2 Jan 2019	
4) DATE OF EXPIRY OF INSURANCE	1 Jan 2020	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *	Any person who is driving on the Insured's order or with their permission.	
<p>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.</p>		
6) LIMITATION AS TO USE *	<p>1) Use in connection with the Insured's business. 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business. 3) Use for social, domestic or pleasure purposes. The Policy does not cover a) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing. b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p>	
LOSS OF USE NOT INCLUDED		
* NAMED DRIVER N/A		
HIRE PURCHASE COMPANY NA		
<p>* 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, 1967 (Malaysia), are not to be included under these headings.</p>		

I / We hereby 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, 1967 (Malaysia).

Issued At Singapore 12 Apr 2019

AIG ASIA PACIFIC INSURANCE PTE. LTD.

000607-000
A I U NORTH AMERICA INC
1200 ABERNATHY ROAD, NE
ATLANTA GA 30328 USA

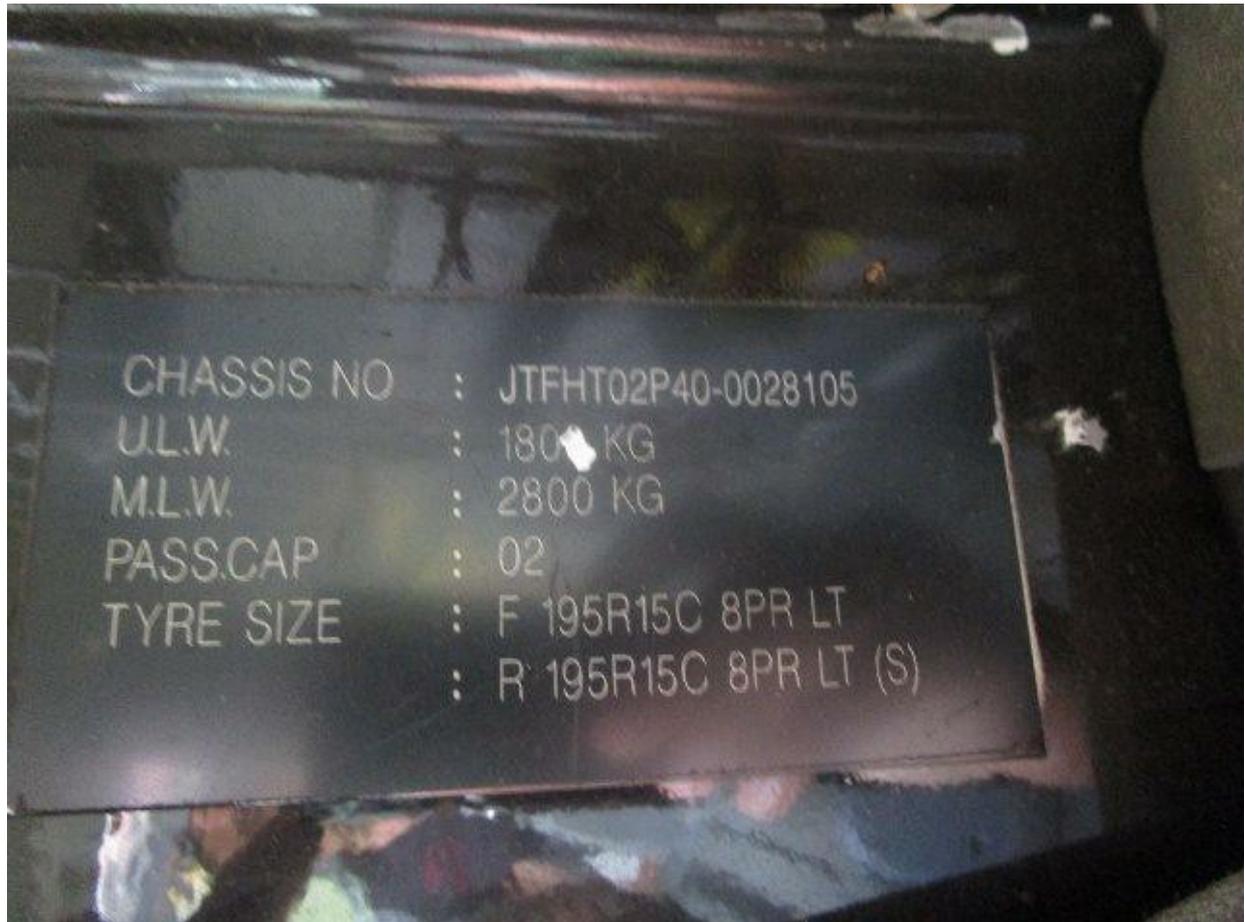


Authorised Representative

ORIGINAL

88PUFO

Accident Photo



CHASSIS NO : JTFHT02P40-0028105
U.L.W. : 1800 KG
M.L.W. : 2800 KG
PASS.CAP : 02
TYRE SIZE : F 195R15C 8PR LT
: R 195R15C 8PR LT (S)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

