

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	20/08/2019 17:53
Date Of Accident	20/08/2019 14:00
Exact Location Of Accident	PIE B4 STEVEN RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE9168R
Insured/Policyholder	
Name Of Registered Owner	UNIVERSAL DISPLAYS PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67448487

Vehicle Particulars

Manufacturer	NISSAN
Model	NV350
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	2100463885-03
Cover Note Number	-

Driver

Name of Driver	SEAN HISATO TOH JIN HUI
NRIC No	S9430510A
Date Of Birth	19/08/1994
Occupation	INDOOR
Date Of Driving Pass	22/10/2013
Driving Experience	5 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91596060
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 120 TANAH MERAH BSAR LANE
 Postcode 498907
 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 CHAIN COLLISION
 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 3
 Was any body injured in the Accident? YES
 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) 2
 Passenger 1
 NAME: : THOMAS LAU YOU HIN
 GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name GEYLANG NEIGHBOURHOOD POLICE CENTRE
 Police Station Address ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-8486999 - FAX NO: 68486799
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/20190820/2144

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 GBA9679D
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJM1478L
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)

DETAILS OF INJURED PERSON 1

Name SEAN HISATO TOH JIN HUI
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? GBE9168R
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name THOMAS LAU YOU HIN
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? GBE9168R
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

SKETCH PLAN

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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:

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

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



**SINGAPORE
POLICE FORCE**



T/20190820/2144

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

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Report No. T/20190820/2144

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	SIM JIA QING	ID No.	S9013035H
Related Vehicle	GBA9679D (Van)	Contact No.	-
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SEAN HISATO TOH JIN HUI	ID No.	S9430510A
Related Vehicle	GBE9168R (Van)	Contact No.	91596060
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	20/08/2019	Date Discharge	20/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	Serious
Driver			
Name	THOMAS LAU YOU HIN	ID No.	G7346274L
Related Vehicle	GBE9168R (Van)	Contact No.	81816901
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	20/08/2019	Date Discharge	20/08/2019
No. of Days granted Medical Leave	02	Degree of Injury	Slight



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T/20190820/2144

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

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Report No. T/20190820/2144

CONTINUATION OF REPORT

Driver			
Name	SISHITHAREN S/O BHASKARAN	ID No.	S2621156E
Related Vehicle	SJM1478L (Car)	Contact No.	93847603
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 20/08/2019 at about 1400hrs, I was on PIE exit before steven road. I saw that there was a construction on the first lane of PIE. I was driving on the second lane when suddenly the vehicle(SJM1478L) in front of me did an emergency break. I managed to stop in time and did not hit the vehicle in front of me. However, there was another vehicle(GBA9679D) behind me who did not stop in time and collided to the rear of my van. Due to this motion, my van went forward and hit onto the vehicle in front of me. We then came out of our vehicles and exchange particulars. I tried to call for police however they informed me that since no one is injured we can drive off. I then went to hospital to see doctor with my passenger. I do have an in car camera however it was not recording. I remember that the other two vehicles in front and behind me also do not have any in car camera. Due to the collision, there are severe damages to the front and rear of m van.



**SINGAPORE
POLICE FORCE**



T/20190820/2144

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Report No. T/20190820/2144

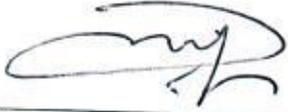
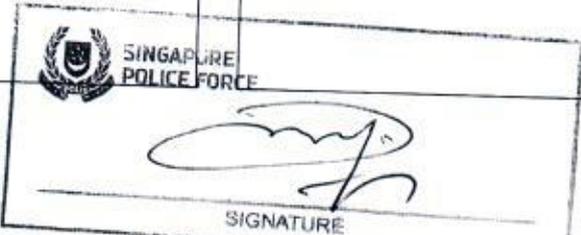
Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sgt 3 CHEW HUI YU 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 20/08/2019 17:37
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case:
Authentication Stamp NP168	 <p>SINGAPORE POLICE FORCE</p>  <p>SIGNATURE</p>

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9430510A




Name
SEAN HISATO TOH JIN HUI

杜 锦 辉

Race
CHINESE

Date of birth
19-08-1994

Country of birth
SINGAPORE

Sex
M

4911885

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9430510A

Name
SEAN HISATO TOH JIN HUI

Birth Date: 19 Aug 1994

Issue Date: 22 Oct 2013

002237303C

For LKK/NAC Use Only

4911885




NRIC No. S9430510A

Date of issue
07-12-2012

Address
120 TANAH MERAH BESAR LANE
SINGAPORE 498907

For LKK/NAC Use Only

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	EFFECTIVE DATE
Class 2	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS	22 Oct 2013
Class 4	HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN EXCEED 2500 KILOGRAMS	01 Dec 2015

S / No. 9000242784

NP 428A

Licence No: S9430510A

For LKK/NAC Use Only



CERTIFICATE OF INSURANCE

NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : Universal Displays Pte Ltd
 Period of Insurance : 29 Apr 2019 To 28 Apr 2020
 Engine No. : YD25390111A
 Chassis No. : JN1MC2E26Z0006098

Vehicle No. : GBE9168R
 Policy No. : 2100463885-03
 Endorsement No. :
 Issued Date : 05 Apr 2019

ABOUT THE COVER

Make/Model : NISSAN NV350 PANEL VAN
 Engine Capacity/Tonnage : 1.5 Tonnage Sum Insured : Market Value First Year of Registration : 2016
 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 authorized 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.

Loss Of Use (7 Days) Commercial Auto

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 169) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$000 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

- 1. Tan Chong Motor Sales Add: 913 Bl Timah Road Singapore 589623 64694091 64694092 64694093
- 2. TC AutoClinic Add: No. 1, Sixth Lok Yang Road Singapore 628099 62622212
- 3. Tan Chong Motor Sales Add: 17 Lor 8 Toa Payoh Singapore 319254 63570753 63570754
- 4. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
- 5. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513

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 Yebra App. Simply search and download "AIG_SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

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. 169), Part IV of the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500610317

TAN CHONG CREDIT PTE LTD-CSK
 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
 SINGAPORE 589622 ANSP-MOTOR
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Manile

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

Cathy-VV Tsai