





## 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 18:39
Date Of Accident	10/08/2019 13:50
Exact Location Of Accident	WESTGATE LOADING BAY BOON LAY WAY.
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ1871U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81330526

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV350
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994187/100871286
Cover Note Number	

### Driver

Name of Driver	LEE KEAN SIONG
NRIC No	S8364592Z
Date Of Birth	27/01/1983
Occupation	OUTDOOR
Date Of Driving Pass	25/07/2016
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81330526
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	APT BLK 32 TELOK BLANGAH RISE #02-269 SINGAPORE
Postcode	090032
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?	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)	2
Passenger 1	NAME: : COLLEAGUE GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8729999 - FAX NO: 67748639
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT.

#### 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	YN8238J
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)

## SKETCH PLAN

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6. This report will be forwarded by the insurers to 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 thereafter.
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 insurers) and have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the Insurers' law firm/law firms, the Monetary Authority of Singapore and any relevant government agency/authorities (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, repairs 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' law firm/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 law firm/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature



Driver's Signature (If Driver is not the Policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstance of the Accident \*

Refer to police report and Aetos incident report . Thanks

Declaration

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



Falconbridge's Signature



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



Witnessed by Reporting Centre Personnel





**SINGAPORE  
POLICE FORCE**



T/20190810/2107

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

1 of 3

Report No. T/20190810/2107

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/08/2019 19:18		Vide Report No.:		Station Diary No.: 127
<b>Informant's Particulars</b>				
Name of Informant: LEE KEAN SIONG		Address: APT BLK 32 TELOK BLANGAH RISE #02-269 SINGAPORE 090032		
ID Type / ID No.: NRIC NO / S8364592Z		Contact No.: Home/Office: Mobile: 81330526		
Nationality: MALAYSIAN		Email:		
Sex: Male	Age: 36	Date of Birth: 27/01/1983	Type of Informant: Driver	
Race: Chinese		Language: Chinese	Institution / School Name:	
Occupation: Aetos Officer		Driving Licence Information: Class: 2B,3,4A Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 10/08/2019 13:50	Type of Location: Car Park
Location: Along Road 1 BOON LAY WAY Westgate Loading Bay				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ1871U	Van				Slightly Damaged	1
YN8238J	Lorry				No Damage	0



**SINGAPORE  
POLICE FORCE**



T/20190810/2107

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

2 of 3

Report No. T/20190810/2107

**CONTINUATION OF REPORT**

**Brief Details.**

On 10/08/2019 at about 1350hrs, I was trying to leave the loading bay of Westgate, as I was moving out of the lot, the space was limited as the lorry in front did not close his tailgate. When I was inching out, I collided with the lorry's tailgate as that portion was a blindspot to me. That resulted in a dent at the bottom of the vehicle passenger side door.

Immediately, my partner and I alighted the vehicle to assess the damage and check for injuries but the owner was not in the vehicle. We tried to search for the owner of the vehicle but to no avail. I reported this to my supervisors and continue with my duties.





SINGAPORE  
POLICE FORCE



T/20190810/2107

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

3 of 3



Report No: T/20190810/2107

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: D / Sgt 3 BRENBAN LIM WEI JIE 	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEW LUI Contact No: 65476151	
Authentication Stamp NP 188 	
SIGNATURE	

Signature Of Informant: 
Date/Time: 10/08/2019 19:18
Classification Of Case:



**AETOS AUXILIARY POLICE FORCE**

**INCIDENT REPORT**

<b>Nature of Incident/Arrest</b>		<b>Location of Incident/Arrest</b>	
CVE vehicle GBJ1871U hit on lorry's YN 8238J tailgate		West Gate Loading Bay	
<b>Date/Day:</b>	10 August 2019 (Sat)	<b>Informant:</b>	CPL(APF) T10857 Muhd Zulraidi
<b>Time:</b>	1350hrs	<b>Team:</b>	CVE Team 07
<b>Particulars of Subject/s</b>			
<b>Name</b>	:	Lee Kean Siong	N.A
<b>Sex/Age</b>	:	Male / 34yrs	N.A
<b>NRIC/FIN No:</b>	:	S8364592Z	N.A
<b>Nationality</b>	:	Singaporean PR	N.A
<b>Occupation</b>	:	Auxiliary Police Officer	N.A
<b>Company</b>	:	AETOS Security Management Pte.Ltd	RADHA Exports Pte Ltd
<b>Vehicle No</b>	:	GBJ 1871U	YN8238J

On 10 August 2019 (Sat), Informant CPL (APF) T10857 Muhd Zulraidi was deployed for Cash & Valuable Escort duty from 1100hrs to 2300hrs. He has been assigned as Transaction officer for Team 07, along with PC (APF) T11881 Lee Kean Siong (Driver), AETOS vehicle registration number GBJ1871U.

At about 1350hrs, the team TO call and informed that their AETOS vehicle knocked onto the lorry's tailgate. The lorry YN 8238J was stationed beside AETOS vehicle GBJ1871U. When the AETOS vehicle was moving out from parking lot, the space was limited and blind spot to the driver hence collided with the lorry, resulted in denting at the vehicle passenger side door bottom .

Immediately after the collision, Transaction Officer, Muhd Zulraidi and Driver, Lee Kean Siong alighted the vehicle to assess the damage done. After confirming that no one was injured in the incident, He realized there is no one inside the lorry and tried to look for the owner to contact him, He also take few photo of the incident and informed Duty Deployment Officer CPL Chong WanYuan and SGT Ooi Siew Booi. And allowed to continue his duties



Forwarded for you information.



<p>Reported By :</p> <p>SGT (APF) 9232 Ooi Siew Booi</p>	<p>Signature:</p> <p><i>MS</i></p>	<p>Date :</p> <p>10 Aug 2019</p>
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# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

1. Complete and submit this Form to Authorized Reporting Centre ("ARC") for station.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorized Driver.
4. 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.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

## ACCIDENT STATEMENT

Date and Time of Accident ☐ Date: 10/08/2019 Time: 13:50 hours  
 Exact Location of Accident ☐ Westgate loading bay, boon lay way

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ☐ GBJ1871U

## INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)

Personal Identification - NRIC (Singaporean/PR)

- FIN/Passport Number

- Not Applicable

## VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model

Manufacturer \_\_\_\_\_ Model \_\_\_\_\_

Type of Vehicle\*

☐ Saloon ☐ MPV ☒ CRV ☐ Van ☐ Lorry  
☐ Bus ☐ Motorcycle ☐ Others \_\_\_\_\_

Exact Purpose for which vehicle was being used at time of accident ☐

Escort vehicle (Work purpose)

Are you claiming under your own insurance policy for repair to your vehicle?

☒ Yes ☐ No (If No, Please select ☐ Third Party ☒ Reporting)

Vehicle Category\*

☐ Private ☒ Commercial ☐ Motorcycle

## INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company \*

Type of Policy

☒ Comprehensive ☐ Third Party Fire & Theft ☐ TP Only

Fleet Policy

☒ Yes ☐ No

Policy Number

Motor CI

## DRIVER

☐ Same as Insured above

Name of Driver

☐ LEE KEAN SIONG

Personal Identification - NRIC (Singaporean/PR)

☐ S8364592Z

- FIN/Passport Number

Date of Birth

☐ 27 dd/ 01 mm/ 1983 /yy

Driving Date Pass

☐ dd/ mm/ /yy

Year of Driving Experience

☐ Year(s) Month(s)

Occupation

☐ Auxiliary police officer ☒ Indoor ☐ Outdoor

Gender

☒ Male ☐ Female

Contact Number / Mobile Phone / Fax No.

☐ 81330526

Address of Driver *	Apt Blk 32 Telok Blangah rise #02-269 Singapore		
	Postcode ( )		
Email Address *			
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
If No, Relationship of the Driver with the Insured			
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)			
Insurance Company of Driver's Own Vehicle (if applicable)			
<b>GENERAL INFORMATION OF THE ACCIDENT</b>			
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear) *	Side Swipe		
Weather Conditions *	<input checked="" type="radio"/> Clear	<input type="radio"/> Raining	<input type="radio"/> Others _____
Road Surface *	<input checked="" type="radio"/> Dry	<input type="radio"/> Wet	<input type="radio"/> Others _____
<b>OTHER INFORMATION</b>			
a. Was anybody injured in the accident? *	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
b. Was any other vehicle or property damaged? (Including Witness) *	<input type="radio"/> Yes	<input type="radio"/> No	
<b>DETAILS OF POLICE ACTION</b>			
Was the Accident reported to the Police? *	<input checked="" type="radio"/> Yes	<input type="radio"/> No (If Yes, please state which Police Station.)	
Police Station Name	Clementi N.P.C		
Police Station Address			
Police Station Contact	Tel No.	Fax No.	
Was notice of intended Prosecution given?	<input type="radio"/> Yes	<input checked="" type="radio"/> No (If Yes, against whom?)	
<b>DETAILS OF OTHER VEHICLE / PROPERTY 1</b>			
Vehicle Registration Number *	YN 8238J		
Vehicle Make/ Model/ Colour	Lorry		
Details of Properties			
Name of Driver			
Personal Identification - NRIC (Singaporean/PR)			
- FIN/Passport Number			
Contact Number			
Address			
Name of Insurance Company			
No. of Passenger (Including Driver)			
(Note - Please use page 6 if you need to add more vehicles )			



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8364592Z



Name

LEE KEAN SIONG

李 见 宏

Race

CHINESE

Date of birth

27-01-1983

Sex

M

S8364592Z



Country/Place of birth  
MALAYSIA

9539784



NRIC No S8364592Z



Nationality

MALAYSIAN

Date of issue

26-07-2019

Address

APT BLK 32 TELOK BLANGAH RISE  
#02-269  
SINGAPORE 090032





HOTLINE TEL: 651 8418-5000

**CERTIFICATE OF INSURANCE**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969  
ROAD TRANSPORT ACT, 1967 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M 2 426

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999994187/100871286

OWN DAMAGE EXCESS S\$1,000.00 ( )  
WINDSCREEN EXCESS S\$100.00

(for policies with effect from 1st November 2007)

SUM INSURED S\$1.00

INSURING WITH COE/PARF Yes

GBJ1871U

Goldbell Car Rental Pte Ltd

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT 9 Feb 2019

OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE 31 Mar 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE \*

Any person who is driving on the Insured's order or with their permission

Additional Excess of \$3000 applies to all claims for Drivers below 23 years old and/or with Driving Experience less than 12 months

Additional excess of \$500 applies to all claims for accident outside Singapore.

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 \***

Use for the carriage of passengers or goods in connection with the Policyholder's business. Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired. This Policy does not cover:

1) use for driving 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 anyone disabled using a mechanically propelled vehicle; and 3) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired.

In the event of accident claim, the repairs to the Vehicle must be carried out by one of our AIG Authorized Repairers or Eastern Performance Pte Ltd or Shg Ah Tee Motor &amp; Panel Service Pte Ltd or Megacity Automotive Engineering.

LOSS OF USE: NOT INCLUDED

\* NAMED DRIVER N/A

HIRE PURCHASE COMPANY UNITED OVERSEAS BANK 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, 1967 (Malaysia), are not to be included under these headings

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 In Singapore 24 Apr 2019

930123-879

ACORN INTERNATIONAL NETWORK

48 CHANGI SOUTH STREET 1 #04-01 SINGAPORE 48130

AIG ASIA PACIFIC INSURANCE PTE. LTD

Authorized Representative

ORIGINAL

DUPLICATE