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 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	29/08/2019 16:59
Date Of Accident	29/08/2019 13:05
Exact Location Of Accident	ALONG LOWER KEN RIDGE RD TOWARDS NUH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLS7565Z
Insured/Policyholder	
Name Of Registered Owner	AMA RENTAL PTE LTD
Co Reg No	20178966M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62000600
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS HYBRID-1.8 CVT (A)
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	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994055/100863588-00000
Cover Note Number	
Driver	
Name of Driver	WOO WEI LEONG
NRIC No	S2634919B
Date Of Birth	30/09/1961
Occupation	OUTDOOR
Date Of Driving Pass	06/04/1993
Driving Experience	26 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86878961
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 838 JURONG WEST ST 81 #09-165
Postcode	640838
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 - CHANGE/CROSS LANE
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)	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

ON 29/8/2019 ABOUT 1.03PM , I WAS DRIVING ALONG LOWER KENT RIDGE ROAD TOWARD TO NATIONAL UNIVERSITY HEART CENTRE (NUH). SUDDENLY , I FELT A HUGE IMPACT FROM MY RIGHT PORTION . I FOUND OUT THAT IT WAS VEHICLE B (PC3929X)THAT CAUSED THE COLLISION. THE WHOLE INCIDENT WAS CAPTURED ON MY CAR CAMERA.WE EXCHANGED CONTACT NUMBER AND IC FOR INSURANCE CLAIM PURPOSE .

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE IS TOO LARGE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC3929X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	ANG LAY CHENG
NRIC/Passport Number	S1214576D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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. 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.

AMA Rental Pte Ltd

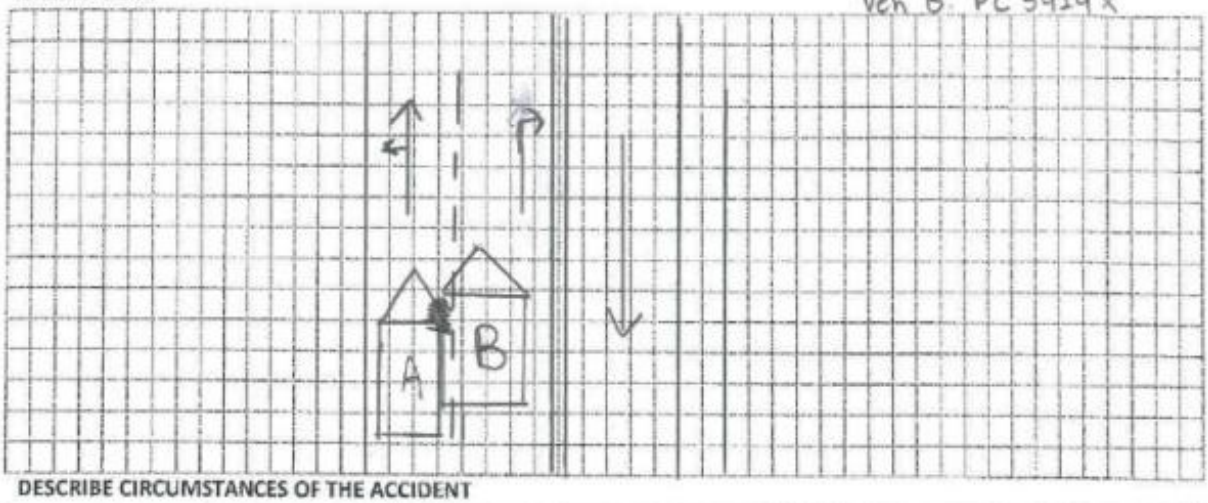
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Accident Sketch Plan

Along Lower Kent Ridge Road
Toward NUH

Veh A: SLS7566Z
Veh B: PC 3929 X

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 29/8/2019 about 1.03 P.M, I was driving along LOWER KENT RIDGE ROAD TOWARD To National University Heart Centre (NUH)

Suddenly, I felt a huge impact from my right portion. I found out that it was Vehicle B (PC3929X) that caused the Collision. The whole incident was Captured on my car camera.

We exchanged Contact Number and IC for Insurance claim purpose.

Important:		
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.		- Reporting Only
		- Claim OD
		- Claim TP
	/	- Claim OD/TP at other workshop

DECLARATION

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

AMA Rental Pte Ltd

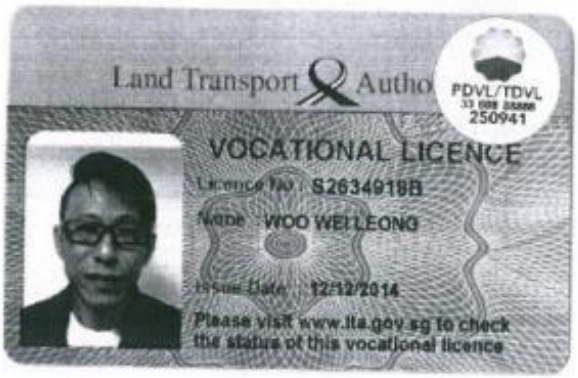
Policyholder's signature
Date & Time

Driver's Signature
(if driver not the policyholder)
Date & Time

Reporting Centre Personnel's Signature
Name:
Nric/Fin No.

Common Statement


REPUBLIC OF SINGAPORE DRIVING LICENCE
S2634919B
WOO WEI LEONG
30 Sep 1961
17 Mar 2004


Land Transport Autho
PDVL/TDVL
250941
VOCATIONAL LICENCE
Licence No: S2634919B
Name: WOO WEI LEONG
Issue Date: 12/12/2014
Please visit www.lta.gov.sg to check the status of this vocational licence


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2634919B
WOO WEI LEONG
鄔 維 良
CHINESE
30-09-1961
M
MALAYSIA


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)
PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms
Licence No: S2634919B
NP 428A


This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.
Type Description Issue Date
02 TAXI VL 12/12/2014


5329141
S2634919B
16-07-2014
APT BLK 838 JURONG WEST STREET 81
#09-165
SINGAPORE 640838

Accident Sketch Plan

AIG

HOTLINE TEL: (65) 6419-3000

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.430

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999994055/100863588-00000

OWN DAMAGE EXCESS	S$2,000.00	(I)
WINDSCREEN EXCESS (for policies with effect from 1st November 2002)	S$100.00	
SUM INSURED	S$1.00	
INSURING WITH COE/PARF	YES	

1) **VEHICLE REGISTRATION NO.** SLS7565Z

2) **NAME OF INSURED** AMA RENTAL PTE LTD

3) **EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT** 22 Jul 2019

4) **DATE OF EXPIRY OF INSURANCE** 21 Jul 2020

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

Any person who is driving on the Insured's order or with their permission. 23-30
This Policy will indemnify the Policyholder or any authorised driver only if he/she is ~~22 to 65~~ years old with at least 2 years relevant driving experience.
When the Vehicle is used for the carriage of passenger for hire or reward, such authorised driver must be registered with an intermediary which facilitates the carriage of passengers for hire or reward.

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 social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired.
Use for the carriage of passengers for hire or reward by 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 any purpose in connection with Motor Trade.

In the event of an accident claim, the repair can be carried out at Any workshop.

LOSS OF USE NOT INCLUDED

*** NAMED DRIVER** N/A

HIRE PURCHASE COMPANY NA

** 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.*

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, 1987 (Malaysia).

Issued At Singapore 6 Aug 2019

AIG ASIA PACIFIC INSURANCE PTE. LTD.

S04968-000
AUTO INSURE INSURANCE AGENCY
48 TOH GUAN ROAD EAST
#01-101 ENTERPRISE HUB
SINGAPORE 608586

Authorised Representative

ORIGINAL

SSCOSK

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo