

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	24/09/2019 09:01
Date Of Accident	23/09/2019 08:30
Exact Location Of Accident	ALONG ROBINSON RD B4 BOON TAT ST TRAFFIC JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA3439P
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-66039399

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	
Cover Note Number	

Driver

Name of Driver	CHOO MUAN HUAY
NRIC No	S1717621H
Date Of Birth	27/03/1965
Occupation	OUTDOOR
Date Of Driving Pass	10/08/1982
Driving Experience	37 YEARS AND 1 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-94310929
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 441A FERNVALE ROAD #02-307
Postcode	791441
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	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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , POSTCODE: 550108 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2849999 - FAX NO: 63431742
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/20190923/2038.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGB2787G
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Vehicle Make/Model/Colour	KIA
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHC8058X
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	TAXI
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	
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SGB2787G
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SHC8058X
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

INSTRUCTIONS

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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:

24 SEP 2019

G.OIA

Driver's Signature
(If driver is not the policyholder)

Date & Time: 24 SEP 2019

09.01 am

Reporting Centre Personnel's Signature

Name: Poh Kwee Choo
NRIC/FIN No.: S6840583A

SKETCH PLAN



B → SMD 2439 P
B → SGB 7787 G
C → SHC 8058 X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Along Road 1 Robinson Road

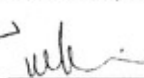
Please refer to the report police.

DECLARATION

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



Policyholder's Signature
Date & Time: 24 SEP 2019



Driver's Signature
(If driver is not the policyholder)
Date & Time: 24 SEP 2019



Reporting Centre Personnel's Signature
Name: Poh Kwee Choo
NRIC/FIN No.: S6840583A

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190923/0035

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

Report No. T/20190923/0035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/09/2019 12:12	Vide Report No.: A/20190923/0035	Station Diary No.: 7
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Informant's Particulars

Name of Informant: CHOO MUAN HUAY			Address: APT BLK 441A FERNVALE ROAD #02-307 SINGAPORE 791441	
ID Type / ID No.: NRIC NO / S1717621H			Contact No.: Home/Office: Mobile: 94310929	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 54	Date of Birth: 27/03/1965	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: CRAB DRIVER			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 23/09/2019 08:30	Type of Location: X-Junction
Location: Along Road 1 ROBINSON ROAD				
Along robinson road before boon tat St				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMA3439P						0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL		



SINGAPORE
POLICE FORCE



T/20190923/2038

Police Station Of Origin:
Serangoon North NPP
100 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20190923/2038

CONTINUATION OF REPORT

Driver			
Name	CHOO MUAN HUAY	ID No.	S1717621H
Related Vehicle	SMA3439P	Contact No.	94310929
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.

I am lodging a traffic accident report with ref to A/20190923/0035 which happened along Robinson road before Boon Tat St at the traffic junction.

The accident took place on 23.09.2019 at 0830hrs, I was driving Grab car SMA3439P along the said road. While driving, I was distracted by some light to my eye and within split seconds, my vehicle hit onto the rear of the front vehicle. I did not manage to brake on time due to the light distraction. I alighted from the vehicle and discovered it was a three chain collision. I was not injured however the other two drivers were. Ambulance was activated and arrived shortly after. Traffic police took my in car camera sd card and advised me to lodge a traffic accident report.



SINGAPORE
POLICE FORCE



T/20190923/2038

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

3 of 4

Report No. T/20190923/2038

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:

F/

Sgt 3 MUHAMMAD ASYRAF BIN ARIS

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

23/09/2019 12:12

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt SYED ZAYID MUHAMMAD BIN
SYED ABDUL WAHID ALHINDUAN

Contact No.: 65476394

Classification Of Case:

Authentication Stamp

NP168

ACKNOWLEDGEMENT SLIP - SINGAPORE POLICE FORCE



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: #A/20190923/0035

I, SSS 705107 KIM
(Recipient's Name, NRIC or Passport No. / Rank and No.)
of 10 USI Ave 3, THO #1408864
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One SD card, 16GB plastic
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

from Choo Huan Hway S/777624-H, Hp: 94310929
(Name, NRIC or Passport No. / Rank and No.)
of B/441A female #02-307 S/771441
(Address / Police Station / NPC / NPP)
on 23/9/19 at 10/64
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

[Signature]
(Signature)
CHOO HUAN HWAY S/777624-H
(Name, NRIC or Passport No. / Rank and No.)

Received by:

[Signature]
(Signature)
SSS 705107 KIM
(Name, NRIC or Passport No. / Rank and No.)

Other Remarks: PO 7720153 Plain ext: 6547-6187
* note accident report @ nearby police station.



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, 1968
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

Comprehensive Commercial Motor		POLICY EXCESS	
CERTIFICATE NO.	999994314	WINDSCREEN EXCESS	S\$100.00
1) VEHICLE REGISTRATION NO.		SUM INSURED	Market Value
2) NAME OF POLICYHOLDER		INSURING WITH COE/PARF	Yes
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		SMA3439P	
4) DATE OF EXPIRY OF INSURANCE		Goldbell Car Rental Pte Ltd	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		01 January 2019	
		31 March 2020	
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*			
1) Use for social, domestic, pleasure purposes and business purposes of insured			
2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.			
3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.			
The Policy does not cover: 1) Use for 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 any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.			
LOSS OF USE		Not Included	
HIRE PURCHASE COMPANY		ANZ Banking Group	

*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 in Singapore 17 Jan 2019

AIG Asia Pacific Insurance Pte. Ltd.

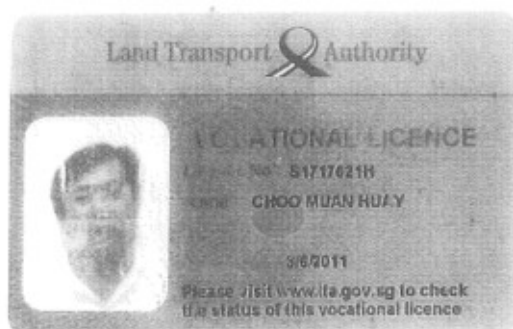
030123-000
Acorn International Network Pte Ltd
48 Changi South St 1 Level 3
SINGAPORE 486130

ORIGINAL

AUTHORISED REPRESENTATIVE

SSPKWJ

DRIVER'S NRIC, DRIVING LICENCE + VOCATIONAL LICENCE



This card is not transferable 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.

Type	Description	Issue Date
02	TAXI VL	24/07/1999



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



PRIVATE HIRE LABEL

