

## 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	29/11/2019 13:41
Date Of Accident	28/11/2019 14:10
Exact Location Of Accident	JUNCTION OF DESKER ROAD & KG KAPOR RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU7931M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MARIC MARKETING PTE LTD
Co Reg No	201620700D
Email Address	GCARGALLERY@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90698770

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS E AUTO
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	999994149
Cover Note Number	

### Driver

Name of Driver	KALAIVAANAN S/O R RAMASAMY
NRIC No	S1507977J
Date Of Birth	16/04/1961
Occupation	INDOOR
Date Of Driving Pass	16/10/2008
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90698770
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 25 TELOK BLANGAH CRESCENT #02-81
Postcode	090025
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 - CROSS JUNCTION
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

PLEASE REFER TO ATTACHED .

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGS5470K
Vehicle Make/Model/Colour	MIT LANCER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	90555634
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.



Policyholder's Signature

Date & Time: 28/11/19 16:03 PM

Driver's Signature

(If driver is not the policyholder)

Date & Time: 28/11/19 16:08

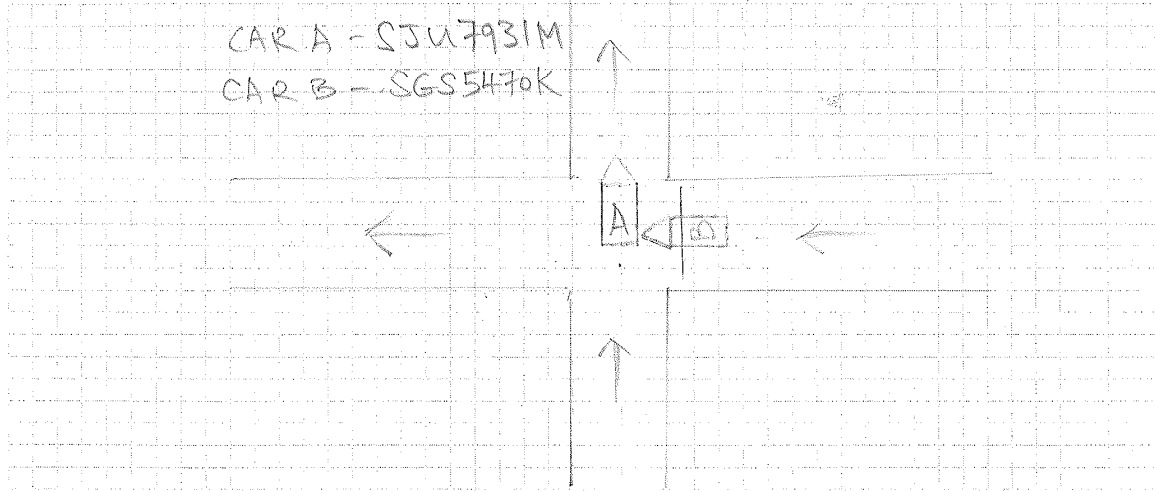
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At about 2:10pm on 28 Nov 2019, as I was driving along Kg Kepar road towards Syed Alwi Road Mr. Chee Lwe chiong who was driving his Mitsubishi Lancer car along deakeer road failed to stop his car when he reached at the cross junction of deakeer road and Kg Kepar road thus knocking into the rear tyre of my car.

## DECLARATION

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

Policyholder's Signature

Date & Time: 28/11/19 16:03pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

28/11/19 - 1608

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GLA/PA, Sketch Plan Form v2.0



## MARIC MARKETING PTE LTD

9 Tagore Lane #03-04 Singapore 787472

Office : 6452 4300

REG No. 201620700D

Fax : 6452 5882

---

### LETTER OF AUTHORIZATION

Name.: TEO YAO WEI, NRIC No.: S8922492F is hereby authorized to conduct overtaking of vehicle ownership and on behalf of the company and also be authorized to sign, initial accept or execute all documents in connection with the following transaction : -

Accident Report

Vehicle No. : SJU 7931 M

Yours sincerely

WONG WEN HAO  
DIRECTOR





## 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.400

THIRD PARTY FIRE & THEFT		COMMERCIAL MOTOR		POLICY EXCESS		(The below excess is subject to GST)	
CERTIFICATE NO.	SJU7931M					WINDSCREEN EXCESS	NA
POLICY NO.	999994149						
				SUM INSURED	Market Value		
				INSURING WITH COE/PARF	YES		
				SJU7931M			
				MARIC MARKETING PTE LTD			
1) VEHICLE REGISTRATION NO.				25 April 2019			
2) NAME OF INSURED				24 April 2020			
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT							
4) DATE OF EXPIRY OF INSURANCE							
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*							
<p>Any person who is driving on the Insured's order or with their permission.</p> <p>S\$1,500.00 Section II Excess is applicable for driver who is between 23 years to 70 years old with minimum 2 years driving experience in Singapore.</p> <p>An additional section II excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.</p> <p>Accident repair can be carried out at AIG appointed list of workshop or Manufacturer workshop within 3 years warranty.</p>							
<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 for social, domestic, pleasure purposes and business purposes of Insured</p> <p>2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.</p> <p>3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p> <p>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.</p>							
LOSS OF USE				Not Included			
HIRE PURCHASE COMPANY				TAI THONG LEE TRADING PTE 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, 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 26 Apr 2019




AIG Asia Pacific Insurance Pte. Ltd

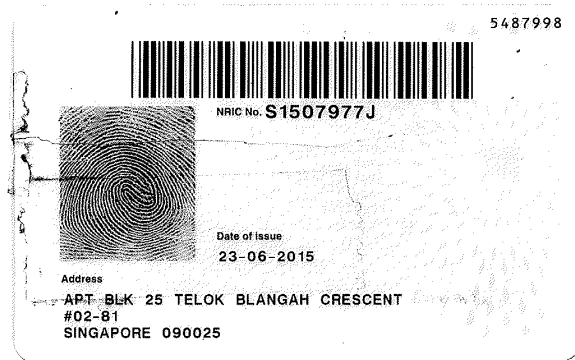
500656-000  
 Cowell Insurance (Agency) Pte. Ltd.  
 8 Burn Road  
 #09-09 Trivex  
 Singapore 369977

  
 AUTHORIZED REPRESENTATIVE

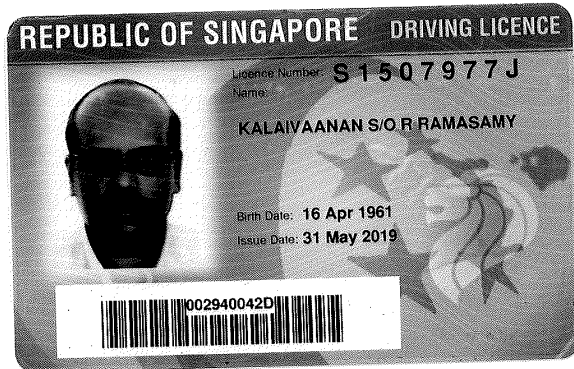
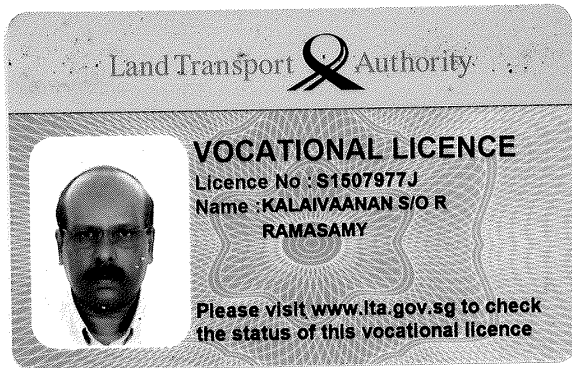
SSPOEC

ORIGINAL

REPUBLIC OF SINGAPORE			
IDENTITY CARD NO. S1507977J			
	Name		
	KALAIVAANAN S/O R RAMASAMY		
	Race		
	INDIAN		
	Date of birth		Sex
	16-04-1961		M
Country/Place of birth		S1507977J	
SINGAPORE			







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
13	PRIVATE HIRE CAR VL	18/07/2018



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

EFFECTIVE DATE

Class	Description	Effective Date
Class 3	Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	16 Oct 2008

NP 428A



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo





Accident Photo



**Addendum Sheet Pg. 1**

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: SG65500206 / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**


Original Report No : MCD519157580 Vehicle Registration No: SJU7931M  
Name(as shown in NRIC) : Marie Marketing Pte Ltd NRIC/FIN/Passport No : \_\_\_\_\_  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Date of Accident : 28/11/19 Time of Accident : 1410  
Place of Accident : Junction of dexter Road & Kg Kapor Road  
Insurance Company: HLG Asia Pacific Insurance Pte Ltd

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To amend the vehicle number to read as SJU7931M

Policyholder / Driver's Signature  
Date:

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