

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 willful 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	12/12/2019 18:04
Date Of Accident	11/12/2019 22:25
Exact Location Of Accident	481 SEMBAWANG ROAD TOWARDS GAMBAS AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD9043Y
Insured/Policyholder	
Name Of Registered Owner	HENG HUP HUAT FOODSTUFFS TRADING PTE LTD
Co Reg No	201736464Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90069518
Alternative Phone No	OFFICE-90069518

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	1800073282-01
Cover Note Number	

Driver

Name of Driver	TAN GIAM SENG
NRIC No	F8024212M
Date Of Birth	06/05/1976
Occupation	OUTDOOR
Date Of Driving Pass	16/06/2008
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90069518
Fax Number	
Contact Number	OTHERS-90069518
Email Address	NOEMAIL

Address	2 GAMBAS CRESCENT #03-09 NORDCOM TWO
Postcode	757044
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	COLLISION - HEAD TO REAR
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 SKETCH PLAN

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	SLJ6457G
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KOH TENG MENG
NRIC/Passport Number	S1574158I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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 Person's Signature
Name:
NRIC/FIN No.:

481 Sembawang Rd towards
Gambas Road

Vehicle B: GBD 9043Y

Vehicle A: SLJ 6457G

Vehicle B: GBD 9043Y

Vehicle A: SLT 6457G

On the stated date and time, I vehicle A lightly touch onto vehicle B.

On the stated date and time, I vehicle A lightly touch onto vehicle B.

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



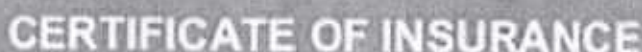
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Date of Accident : 11/12/19 Accident Time: 22:35 (24-HR-FORMAT)
Accident Place : 481 Sembawang Rd + w/ds Gambas rd
Vehicle Reg. No (Car plate No.) : GSD 9643Y Vehicle Make/Model: _____
Insurance Company : ATC Policy No. _____
Name of Registered Owner : Company / Individual Heng Hop Hatt Foodstuffs Trading Pte Ltd
ID of Registered Owner : Co Reg No: 2017364642 Owner's NRIC No: _____
: Co Contact No: _____ Owner's Contact No: _____
DRIVER'S Name : Tan Giam Seng DRIVER'S NRIC No: F8024212M
DRIVER'S Date of Birth : 06/05/1976 DRIVER'S License Pass Date 16/06/2008
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : 2 Gambas Crescent #03-09 Nordcom Two S (757044)
DRIVER'S Contact No./ Alt No. : 1) 9006 9518 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)
Email Address : _____
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Party \ Claim Own Insurance
Number of Passengers (including Driver): _____
Was the accident reported to the police? YES \ NO
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>SLJ 6457G</u>	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: <u>KOH TEEN MENG</u>	Name DRIVER: _____
IC No. DRIVER: <u>S15741581</u>	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____



Name of Policyholder : HENG HUP HUAT FOODSTUFFS TRADING PTE LTD
Period of Insurance : 25 Jun 2019 To 24 Jun 2020
Engine No. : 1KD2499538
Chassis No. : KDH2015017078

Vehicle No. : GBD9043Y
Policy No. : 1800073282-01
Endorsement No. :
Issued Date : 16 May 2019

ABOUT THE COVER

Make/Model	TOYOTA HIACE VAN 1.5 ton [Van]				
Engine Capacity/Tonnage	1.5 Tonnage	Sum Insured	Market Value	First Year of Registration	2015
Driver Restriction	NA	Off Peak Car	No	Insuring with COE/PARE	Yes

Person or Classes of Persons Entitled to Drive*

By this Policy we identify the Publisher(s) or any authorized user or other holding the specified asset.

You have to pay an additional sum of \$3,000 as "Young and inexperienced Driver Excess" ("YED") if You are or Your Authorized Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition	All Age Condition
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Limitation as to use*

- 1) Use in connection with the Policyholder's business
2) Use for the carriage of passengers 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 its use for hire or reward, driving tuition, driving test, racing, pace-making, heli-hilly and its associated testing, and to use whilst towing a trailer except the towing of amphibious used as a mechanically propelled vehicle's use for any purpose in connection with Motor Trade.

¹ Limitations imposed respectively by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 195) and Section 8 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fine - \$0 Over Damage - \$0.00 Thrift - \$0

Section 2
Property Damage - 20

Windspeed scale: 0-100

Named Driver and Excess (if any) (see page 1)

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

Any accident repairs to the vehicle can be covered out of the expense of Your choice. Damage specifically excluded by the

For Apple® Reporting Carriers: AIG Authorized Repairs, please contact our 24-hour accident emergency hotline at +65 6358-6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download 'AIG SG' from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NTUC INCOME INS. CO-OPERATIVE LTD

(We hereby certify that the policy to which this Certificate of Insurance refers is issued in accordance with the provisions of the Motor Vehicles Third Party Risks and Compensation Act (Cap. 185), Part A of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia))

050371 801-0

JG MOT ON AGENCY

80 CHANGI ROAD #04-09 CENTROPOD @ CHANGI

SINGAPORE 419715

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

Book of Henry, Book no. 100