

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	19/12/2019 17:22
Date Of Accident	10/12/2019 13:15
Exact Location Of Accident	ANG MO KIO AVENUE 9
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN5099E
Insured/Policyholder	
Name Of Registered Owner	ANDRIC LEASING
Co Reg No	48503800E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-96314534

Vehicle Particulars

Manufacturer	HONDA
Model	FREED
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	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994263
Cover Note Number	

Driver

Name of Driver	ANG TECK LYE
NRIC No	S1634424I
Date Of Birth	24/07/1964
Occupation	OUTDOOR
Date Of Driving Pass	12/03/1990
Driving Experience	29 YEARS AND 8 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96314534
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 450B SENGKANG WEST WAY #21-341
Postcode	792450
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 - MAJOR/MINOR RD
Weather Conditions	RAINING
Road Surface	WET

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

REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD5473R
Vehicle Make/Model/Colour	TOYOTA DYNA
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

SKETCH PLAN

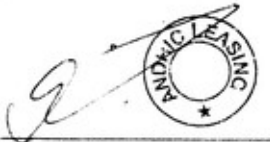
IMPORTANT NOTICE

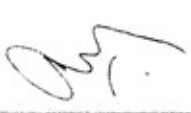
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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

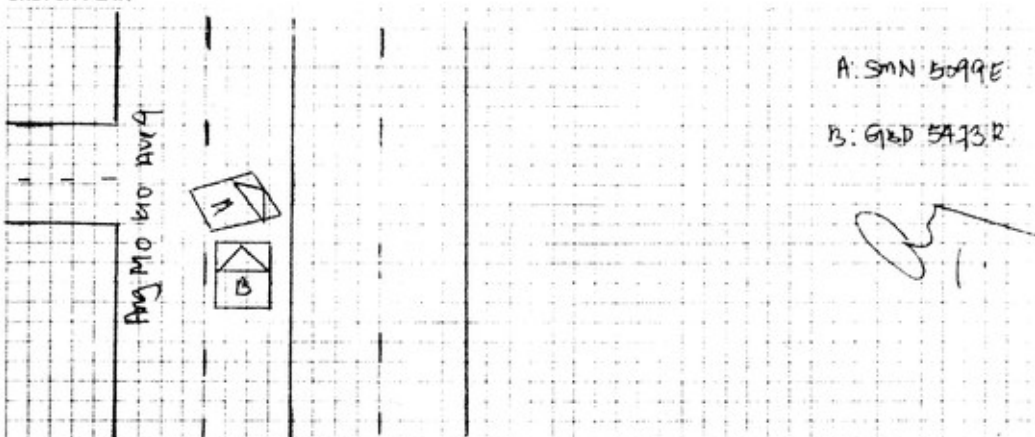
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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: 19 DEC 2019


Driver's Signature
(If driver is not the policyholder)
Date & Time: 19 DEC 2019


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/12/19 at about 1315hrs, while I was driving my motor vehicle A SMN 5099E along Ang Mo Kio Ave 9 at the extreme left lane. I intend to make a u-turn. I checked and confirmed there were no on-coming vehicles from my right and I start to moving off. Suddenly the motor vehicle B GRD 5473R hit onto the right portion of my motor vehicle A SMN 5099E.

[Signature]

DECLARATION

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

[Signature]
Policyholder's Signature
Date & Time: 19 DEC 2019

[Signature]
Driver's Signature
(If driver is not the policyholder)
Date & Time: 19 DEC 2019

[Signature]
Reporting Centre Personnel's Signature
Name: Jenny Lim
NRIC/FIN No.:

GLA/IMC Vehicle Flap Form 29



HOTLINE TEL: (65) 6419-3005

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) AND ROAD TRANSPORT (AMENDMENT) ACT 2019
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1981 (MALAYSIA)

M.Z.450

		(The below excess is subject to GST)	
COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	S\$2000.00 (Sect I)
CERTIFICATE NO.	SMN0091E	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999994253	SUM INSURED	Market Value
1) VEHICLE REGISTRATION NO.		INSURING WITH COE/PARF	Yes
2) NAME OF INSURED		SMN5059E	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		ANDRUC LEASING	
4) DATE OF EXPIRY OF INSURANCE		15 August 2019	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		21 February 2020	
<p>Any person who is driving on the Insured's order or with their permission. S\$2,000.00 Section I & S\$1,500.00 Section II Excess is applicable for driver who is between 21 years to 65 years old with minimum 2 years driving experience in Singapore. An additional excess of S\$1,500.00 applies to Section I & Section II per accident is applicable in the event of an accident occurring outside Singapore. The policy does not cover drivers who are below 21 years old and/or with less than 2 year driving experience.</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*			
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 livery, 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		SINGAPURA FINANCE 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) and Road Transport (Amendment) Act 2019, 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) and Road Transport (Amendment) Act 2019.

Issued in Singapore 15 Aug 2019

AIG Asia Pacific Insurance Pte. Ltd.

501295-000
Insure Link Pte Ltd
2 Kallang Ave
#08-16 CT Hub
Singapore 339407

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL

SJ 汽車企業
MOTOR ENTERPRISE
170 Upper Bukit Timah Road
Bukit Timah Shopping Centre #03-50, S588179
Tel: 6440 3100/ 6252 1113 Fax: 6440 2100
Email: simotor@singnet.com.sg
Company Registration No: B11011111X

Accident Photo



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