Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 18/05/2020 10:31

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 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 <u>truthful and accurate</u> 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.

aforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	18/05/2020 10:11
Date Of Accident	27/04/2020 10:30
Exact Location Of Accident	AT PASIR RIS DR 6 CAR PARK BLK 448
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMM560C
Insured/Policyholder	
Name Of Registered Owner	HENG LEASING PTE LTD
Co Reg No	201840603E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-31572626
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE HYBRID-1.5 (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	999993872
Cover Note Number	
Driver	
Name of Driver	GOH YEOW HENG
NRIC No	S6821315J
Date Of Birth	05/05/1968
Occupation	OUTDOOR

13/10/1994

25 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94871117

Fax Number

Contact Number

EMail Address NOFMAIL

Address 514 PASIR RIS ST 51 #06-99

Postcode 510514

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 **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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name JOO CHIAT NEIGHBOURHOOD POLICE POST

2

NO

NO

YES

NO

1

Police Station Address ROAD: 267 ONAN ROAD, POSTCODE: 424773, COUNTRY: SINGAPORE

TEL NO: 1800-3459999 - FAX NO: 64474181 **Police Station Contact**

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

ON 27/04/2020 AT ABOUT 1030 HRS, I WAS DRIVING MY VEHICLE, SMM560C AND HAD ENTERED THE CAR PARK OF BLK 448 PASIR RIS DR 6 OPEN CAR PARK. I DROVE FORWARD AND STOPPED AT THE STOP LINE. I SAW THERE WAS A RED TRANSCAB TAXI,SHD258H, IN LOT 193 WHICH WAS OPPOSITE TO WHERE I AM.THERE WAS A MALE CHINESE DRIVER IN THE TAXI AND HE WAS DOING NOTHING.AS THERE WAS NO VEHICLE PASSING BY, I MAKE A RIGHT TURN. AT THAT MOMENT, THE TAXI SUDDENLY ACCELERATED OUT OF HIS LOT AT A FAST MANNER AND AS A RESULT HIS VEHICLE COLLIDED ONTO THE FRONT OF MY CAR. THE COLLISION RESULTED IN DAMAGES TO BOTH OF OUR VEHICLES. THE FRONT OF MY VEHICLE WAS DAMAGED. WE ALIGHTED AND TOOK PHOTOS OF THE ACCIDENT. HE ONLY GAVE ME HIS CONTACT NUMBER (HP:90225998). I HAVE WENT TO MY RENTAL COMPANY TO REPORT ON THE MATTER AND LODGING THIS REPORT AS INFORMED BY THEM.

Attachment(s)

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

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may a low insurance companies to <u>repudiate policy liability</u>.
- 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
- 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.
- 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:
 - 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 invoive 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 veh'cle(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:
 - 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 research and regulations faws or court orders.

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.:

KETCH PLAN			Approximate the second			
				10		
				9		
				W	+ + + +	+
	-		B			
			I V D			
		X	TO NOT		11	
	-	1	MALT			A = CMM 260C
		1	TALL		11	10 - CHR 2000
+++++	-		111		1/1	0 919 49017
-						
					MILL	
SCRIBE CIRCUN						
In Sev	7.	Oxiga	report t	10000		410
retur	10	pona	we boal 1	JONOS.	142+19	029
		_				
				1		
CLARATION	25		G C	- (- 0	\ /
Ve declare the fore	going p					Mal
do		*(2018	1EN (5)		1	BA,
icyholder's Signatur		187	Trade gnature		Re	parting Centre Personnel's Signature
e & Time:		~	Tanver is not the policy	holder)		ime:
25,5000			late & Tims:	0.430		SIC/FIN No.:

3 ARMC SketchFlanForm_V3

3





Traffic Volume:

Anyone conveyed by ambulance:

No Traffic

Report No. T/20200427/2029

Police Station Of Origin: Joo Chiat NPP 267 Onan Road SINGAPORE 424773 Tel No: 1800-3459999

Traffic Flow:

Type of Collision; Between Moving Vehicles - Head To Side

Date/Time Report Made: 27/04/2020 13:49			Vide Report No.:				Station Diary No.: 10		
Informa	nt's Partic	ulars	AND DELL						
Name of Informant: GOH YEOW HENG		Address: APT BLK 514 PASIR RIS STREET 52 #06-99 SINGAPORE 510514							
ID Type / ID No.: NRIC NO / S6821315J			Contact No.: Home/Office: Mobile				e: 94871117		
Nationality: SINGAPORE CITIZEN			Email:	Email:					
Sex: Male	Age:	Date of Birth: 05/05/1968	Type of Info Driver	ormant:					
Race: Chinese			Language: Institu English			Institution	tion / School Name:		
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information: Class: 3 Date of				f Expiry:		
		1.35			47				
General I	nformatio	n of the Accident	NUS.	10000		VOICE OF			
Type of Accident	71-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3		Drin Driv No	70.0	Date/Time of Accident: 27/04/2020 10:30		Type of Location Car Park		
	Te 3.0000	0.				П			
Weather: Clear			Road Surface: Dry			Ro	oad Speed Limit:		

Details of V	ehicle Invo	lved			*	
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD258H	TAXI			-	Slightly Damaged	0
SMM560C	Car				Slightly	0

Traffic Control:

Details of Person Involved		THE RESERVE AND THE PERSON OF
Any Pedestrian Involved: No		
No. of Pedestrians Injured: NIL	Use of Pedestrian Cros	ssing: NA





Police Station Of Origin: Joo Chiat NPP 267 Onan Road SINGAPORE 424773 Tel No: 1800-3459999

2 of 3 Report No. T/20200427/2029

CONTINUATION OF REPORT

Driver		- Tell Life	CONTRACTOR OF	ALCO DE LA COLUMNIA D	
Name	GOH YEOW HENG			ID No.	S6821315J
Related Vehicle	SMM560C (Car)		-	Contact No.	94871117
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	The state of the s	

Brief Details

On 27/04/2020 at about 1030hrs, I was driving my vehicle, SMM560C and had entered the carpark of Blk 448 Pasir Ris Dr 6 open carpark. I drove forward and stopped at the STOP line. I saw there was a Red Transcab taxi, SHD258H, in lot 193 which was opposite to where I am. There was a male Chinese driver in the taxi and he was doing nothing. As there was no vehicle passing by, I make a right turn. At that moment, the taxi suddenly accelerated out of his parking lot at a fast manner and as a result his vehicle collided onto the front of my car. The collision resulted in damages to both of our vehicles. The front of my vehicle was damaged.

We alighted and took photos of the accident. He only gave me his contact number (HP: 90225998). I have went to my rental company to report on the matter and lodging this report as informed by them.





T/20200427/2029

3 of 3

Report No. T/20200427/2029

Police Station Of Origin: Joo Chiat NPP 267 Onan Road SINGAPORE 424773 Tel No: 1800-3459999

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: G / Sr Staff Sgt MAZLAN BIN MIAT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 27/04/2020 13:49
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	



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, 1967 (MALAYSIA) AND ROAD TRASPORT (AMENDMENT) ACT 2019

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M 2 400

COMPREHENSIVE

COMMERCIAL MOTOR

POLICY EXCESS

S\$2500.00 (Sect | & II)

CERTIFICATE NO.

SMMSAGO

WINDSCREEN EXCESS

\$\$100.00

(The below excess is subject to GST)

POLICY NO.

999993872

SUM INSURED

Market Value

INSURING WITH COE/PARF SMM560C

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

Heng Leasing Pte Ltd

PURPOSES OF THE ACT

25 February 2020

4) DATE OF EXPIRY OF INSURANCE

24 February 2021

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.

S\$2,500.00 Section I & \$\$2,500.00 Section II Excess is applicable for driver who is between 26 years to 65 years old with minimum 2 years driving experience.

An additional excess of \$1,000.00 applies to Section II per accident is applicable in the event of an accident occurring outside Singapore.

The policy does not cover drivers who are below 26 years old and or with less than 2 year driving experience

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 whitst drawing a trailer except the towing (other than for reward) of any one cisabled mechanically propelled vehicle, 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not included

HIRE PURCHASE COMPANY

MAYBANK SINGAPORE LIMITED

"Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Perty 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 (Maleysia) and Road Transport (Amendment) Act 2019.

Issued in Singapore 21 Feb 2020

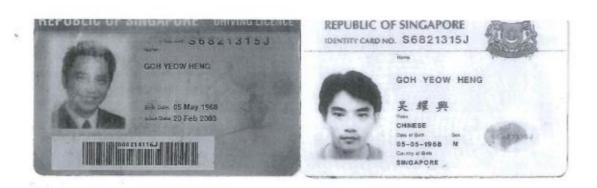
AIG Asia Pacific Insurance Pte. Ltd.

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

AUTHORISED REPRESENTATIVE

SSPORC

ORIGINAL





ort Authority

Serial No. A 08201

9			
	3	9	9

NRIC: 368 21315J

Y TAXI DRIVER'S VOCATIONAL LICENCE

i the vocational licence competency test and have been granted a Taxi Driver's Vocational Licence (TDVL).

encement Date: 05 NOV 2019

ay this Temporary TDVL in your vehicle at all times while driving a taxi/chauffeured private hire car.

quently inform you to collect your Vocational Licence Card that will replace this Temporary TDVL.

et your Vocational Licence Card within 6 months of the TDVL Commencement Date and display it in your taxi/car erwise, your TDVL may be revoked.

ar of Vehicles authority of Singapore





















