MAII20046036 / Auto Insure Pte Ltd (HQ) - Woodlands ENTRY DATE & TIME: 13/05/2020 14:04 SUBMITTED BY: Lim Wei Ling

## SINGAPORE ACCIDENT STATEMENT

## **IMPORTANT NOTICE**

Occupation

**Date Of Driving Pass** 

**Driving Experience** 

- 1. Please report <u>correctly</u> 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 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 conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	13/05/2020 14:04
Date Of Accident	12/05/2020 13:15
Exact Location Of Accident	ALONG MT ELIZABETH LINK TWDS CAIRNHILL RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLJ2946M
Insured/Policyholder	
Name Of Registered Owner	POPULAR RENT A CAR PTE LTD
Co Reg No	199608195Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-31572626
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	PRIUS C 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	999994047
Cover Note Number	
Driver	
Name of Driver	HONG SUAN HENG
NRIC No	S1619862E
Date Of Birth	08/03/1963

**OUTDOOR** 

15/08/1981

38 YEARS AND 8 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-91130950

Fax Number

**Contact Number** 

**EMail Address NOEMAIL** 

Address 259 BISHAN ST 22 #07-313

Postcode 570259

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 - CHANGE/CROSS LANE

2

NO

NO

NO

1

YES

NO

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? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

## **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name BISHAN NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 20 BISHAN STREET 23, POSTCODE: 579757, COUNTRY: SINGAPORE

**Police Station Contact** TEL NO: 1800-5529999 - FAX NO: 65561905

Was notice of intended Prosecution given?

If Yes, against whom?

### **Circumstances of Accident**

ON 12/05/2020 AT ABOUT 1350HRS, I WAS TRAVELLING ALONG THE SECOND LANE FROM LEFT OF MOUNT ELIZABETH LINK TOWARDS CTE. AT THE X-JUNCTION OF MOUNT ELIZABETH LINK AND CAIRNHILL ROAD, I HEARD A SOUND WHILE I WAS TURNING LEFT INTO CAIRNHILL ROAD. I THEN REALIZED ONE VEHICLE ON MY LEFT HAD COLLIDED WITH MY VEHICLE. I THEN STEPPED OUT AND MADE A CHECK. MY VEHICLE SUSTAINED FEW LONG SCRATCHES AND DENTS ON THE LEFT SIDE OF MY VEHICLE. I THEN EXCHANGE PARTICULARS WITH THE DRIVER. NO ONE WAS INJURED AT THAT POINT OF TIME.I AM LODGING REPORT FOR INSURANCE CLAIM PURPOSE.

## 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 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)

SFS989B

PRIVATE CAR

# Accident Sketch Plan

SKETCH PLAN							
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DECLARATION					1/		
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( AL)		200	1			MIN	
Policyholder's Signature		Driver's Sign	atur	Rep	orting Centre Pe	rsonnel's Signature	
Date & Time:		(If driver is a	ot the policyholder)	Nan	ne:	Y.	
		Date & Time		NRI	C/FIN No.:		

GIARM/C SketchPlanPorm\_V3

### 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 allow 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 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
  - (li) for complying with requirements under any regulations, laws or court orders.

Policyre del's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

T/20200512/2033

1 of 3

Report No. T/20200512/2033

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

Date/Time R 12/05/2020 1		ade:	. Vide F	Report No.:			Sta 39	ation Diary No.:	
Informant's	Particu	lars	1125		<b>MARKET</b>		NW P	Will Forman	
Name of Informant: HONG SUAN HENG		Address: APT BLK 259 BISHAN STREET 22 #07-313 SINGAPORE 570259							
ID Type / ID No.: NRIC NO / S1619862E			Contact No.: Home/Office: Mobile				le: 91130950		
Nationality: SINGAPORI	E CITIZ	EN	Email						
	Age: 57	Date of Birth: 08/03/1963		Type of Informant: Driver					
Race: Chinese				Language: Instit			on / Scl	hool Name:	
Occupation: Grab Driver			Drivin	Driving Licence Information:			of Expiry:		
MOUNT EL		H LINK	(-Junctio	n of Mount I	Elizabeth Link	and Cai	mhill R Road	oad	
Weather:			12.55	Surface.				Speed Limit:	
Weather: Clear			Dry				Traffic	•	
Weather:			Dry	c Control:			Traffic	Volume:	
Weather: Clear Traffic Flow Type of Coli	ision:	ehicles - Side Swi	Dry Traffi	c Control:			Light	Volume:	
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Weather: Clear Traffic Flow Type of Coll Between Mo	ision: oving Ve	Involved	Dry Traffi	c Control:	Color	Cor	Light Anyor ambul No	Volume: ne conveyed by lance:	

Use of Pedestrian Crossing: NA





Police Station Of Origin: Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

T/20200512/2033

2 of 3

Report No. T/20200512/2033

### CONTINUATION OF REPORT

Driver	A THE RESERVE OF					ACTION TO SEE
Name	YAP LING LING			ID No.		S6833667H
Related Vehicle	SFS989B (Car)			Contact No.		96638600
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	The cold I am a cold	Date Disc	harge	NIL	
No. of Days granted Medical Leave NIL			Degree of	Injury NIL		
Driver						
Name	HONG SUAN HENG			ID No.		S1619862E
Related Vehicle	SLJ2946M (Car)			Contact No.		91130950
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	of Days granted Medical Leave NIL			Injury NIL		

On 12/05/2020 at about 1350hrs, I was traveling along the second lane from left of Mount Elizabeth Link towards CTE. At the X-Junction of Mount Elizabeth Link and Cairnhill Road, I heard a sound while I was turning left into Cairnhill Road. I then realized one vehicle on my left had collided with my vehicle. I then stepped out and made a check. My vehicle sustained few long scratches and dents on the left side of my vehicle. I then exchange particulars with the driver. No one was injured at that point of time. I am lodging report for insurance claim purpose.





3 of 3

Report No. T/20200512/2033

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

# 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.

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: E / Sgt 2 ZHU JIANBIN	Signature of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/05/2020 14:51
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) RIALES, THIS ROAD TRANSPORT ACT, 1517 (MALAYSIA), Road Transport (Amendment) Act 2013

MOTOR VEHICLES (THIRD-PARTY RISKS) RIALES, 1960 (MALAYSIA)

M2.410

COMPREHENSIVE COMMERCIAL MOTOR CERTIFICATE NO. 999994047

(The below excess is subject to GST POLICY EXCESS

5\$3000,00 (1 & 11)

WINDSCREEN EXCESS \$\$100.00

SUM INSURED

Market Value

INSURING WITH COE/PARF Yes

SLJ2946M

Popular Rent A Car Pte Ltd

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4 ) DATE OF EXPIRY OF INSURANCE

01 August 2019 31 July 2020

5 ) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

Any Person who is daying on the insured's Order or with their permitsion Authorized Orients must be age within 23 to 65 years old with at linest 2 years relevant daying expenses.

Provided that the person driving is permitted in eccontance with the Seasoning or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not dequatited by order of a court of Law as by reason of any emotored or regulation in that behalf from defring the Webs Vehicle.

### 5 ) LIMITATION AS TO USE\*

- Use for social, domestic, pleasure purposes and business purposes of leauned
   Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is fixed.
   Use for the denings of presengent for him or meand by any person to whom the vehicle is bleed.

The Policy does not cover. 1) Use for failure, driving heat, racing, pace-making, refability their or speechtresting, 2) Use whilst develop a trailer except the theiring rother than for reward; of any one disabled reacturing by properties to the any purpose in connection with the Motor Trace.

LOSS OF USE

Not Applicable

HIRE PURCHASE COMPANY

DBS BANK LTD

\*Limitations routered inoparative by Section 6 of the Motor Vehicles (Third-Party Raics and Comparasion) Act (Chapter 105) and Section 95 of the Road Transport Act, 1987 (Malaysia), we not to be included under those handings.

If We hereby Certify that the policy to which this Certificate ratios is issued in accordance with the provisions of the Melor Vehicles
(Third-Perty Risks and Compensation) Act (Chapter 199) and Part fit of the Road Transport Act, 1967 (Malaysia), Road Transport (Amerikaning Act 2018

Issued in Singapore 11 Sep 2019

AIG Asia Pecific Insurance Ptc. Ltd.

000064-000 Direct Clients 76 Shenton Way #07-16 SINGAPORE 079120

AUTHORISED REPRESENTATIVE

**SEPIUS** 







15 Aug 1961



04-06-2016

APT BLK 259 BISHAN STREET 22 #07-313 SINGAPORE 570259

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA or request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type

Description Issue Date

13

PRIVATE HIRE CAR VL

05/03/2018









































