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 <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.	sent to the archiving or this report at the centre and to copies of the report being made available			
	ACCIDENT STATEMENT			
Date Of Report	05/10/2020 10:46			
Date Of Accident	04/10/2020 15:55			
Exact Location Of Accident	TELOK BLANGAH RISE BLK 40 CAR PARK			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	GBK784P			
Insured/Policyholder				
Name Of Registered Owner	GUAN TECK IMP & EXP PTE LTD			
Co Reg No	199402051E			
Email Address	GTGUAN@SINGNET.COM.SG			
Mobile Phone No				
Alternative Phone No	OFFICE-91777837			
Vehicle Particulars				
Manufacturer	TOYOTA			
Model	HIACE VAN TURBO 4DR AT			
Exact Purpose for which vehicle was being used at time of accident	t			
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	COMMERCIAL VEHICLE			
Insurance Company				
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.			
Type Of Coverage	COMPREHENSIVE			
Fleet Policy	NO			
Policy Number	1900258675			
Cover Note Number				

Driver

Name of Driver GUI YEW TECK
NRIC No S1700643F
Date Of Birth 16/04/1965
Occupation OUTDOOR
Date Of Driving Pass 01/11/1989

Driving Experience 30 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93888428

Fax Number

Contact Number

EMail Address GTGUAN@SINGNET.COM.SG

BLK 194B BUKIT BATOK WEST AVE 6 #11-235 Address

Postcode

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 SIDE SWIPE 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 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

1 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

KINDLY REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBJ5602D

TOYOTA HIACE VAN Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category

Name of Driver **LIM JUN MING** NRIC/Passport Number S9429152F 91599125 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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)
 - (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")
- 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
- 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

lying 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: 05/10/2020

1034 AM

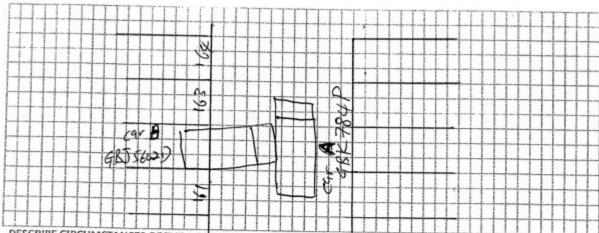
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GIARMC SketchPlanForm_V3

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

4 (gr A (48K784P) was on the way	to	Exit th	e ca	rpark
9t tetok Blangah Rise infront of BIK 4	o, while	Exiting	(ar B	suddenly
This parking lot 9.	eter co	ir A home	Pass	Halfway
hence knocking into car A			, -	0
Important:				
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM). There is a FOURTEN (14)		-	rting Only	
		- Claim	OD	
DAYS CLAUSE WHEREBY MUST BE MADE within the stinulated time frame		- Claim	TP	
from the day of the occurrence.		- Claim	OB/TP at o	other workshop
DEGLED LINES.		,		

DECLARATION

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

Policyholder's signature

Date & Time

Driver's Signature

(if driver not the policyholder)

Date & Time 05/10/2020

10-34 Am

Reporting Centre Personnel's Signature

Name:

Nric/Fin No.

GUAN TECK IMP & EXP PTE LTD 20 Bukit Batok Crescent #03-02/03 Enterprise Centre Singapore 658080

AG/10/05

05.10.2020

TO WHOM IT MAY CONCERN

This is to certify that Mr Gui Yew Teck of I/C No: S1700643F is an employee of Guan Teck Imp & Exp Pte Ltd. He is authorize to drive the vehicle van No: GBK784P.

Yours faithfully

GUI CHAI HONG



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : GUAN TECK IMP & EXP PTE LTD : 18 Dec 2019 To 17 Dec 2020

Period of Insurance : 1KDB015499 Engine No.

Chassis No. : JTFHT02P800249853 Vehicle No. : GBK784P : 1900258675 Policy No.

Endorsement No.

Issued Date : 18 Dec 2019

ABOUT THE COVER

: TOYOTA HIACE 1.2 ton [Van] Make/Model

Engine Capacity/Tonnage: 1.2 Tonnage First Year of Registration : 2019 Sum Insured : Market Value Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) Any person who is driving on the Policyholder's order or with their permission.
 b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

1) Use in connection with the Policyholder's business.
2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.
3) Use for social, domestic or picesure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle.c) use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and 1987

EXCESS

Fire - \$0 Own Damage - \$800 Theft - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle must be carried out by one of our Authorised Repairers. Any accident repairs only extended out at the Sole Agent's workshop.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Atternatively, You may refer to AIG website www.aig.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: Maybank Singapore Limited

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysla).

INSMART (INSURANCE) AGENCY PTE LTD

NO. I KAKI BUKIT ROAD I #02-27 ENTERPRISE ONE

0500659000 SINGAPORE 415934 INSMART (INSURANCE) AGENCY PTEL: 6842 0766 FAX: 6842 6955 / 6842 7855

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

NO 1 KAKI BUKIT ROAD 1 #02-27 ENTERPRISE ONE

SINGAPORE 415934

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

