

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	21/10/2020 17:05
Date Of Accident	21/10/2020 15:00
Exact Location Of Accident	THE SPRINGBLOOM CONDO 556121
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD8166H
Insured/Policyholder	
Name Of Registered Owner	ML ALUMINIUM & METAL CONTRACTOR
Co Reg No	5XXXX120A
Email Address	MICHAELLEE.680106@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91801063
Alternative Phone No	OFFICE-91801063

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 100-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	GOODS TRANSPORTATION
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	2070088010
Cover Note Number	

Driver

Name of Driver	LEE TEK GUA
NRIC No	SXXXX256B
Date Of Birth	06/01/1968
Occupation	OUTDOOR
Date Of Driving Pass	05/08/1992
Driving Experience	28 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	+65-91801063
Fax Number	
Contact Number	
EEmail Address	MICHAELLEE.680106@GMAIL.COM

Address	BLK 1 PARK ROAD #15-793
Postcode	059108
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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
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?	YES
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLV9032R
Vehicle Make/Model/Colour	MERC CLA180
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KHOO YONG GUAN
NRIC/Passport Number	SXXXX521H
Contact Number	96235655
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLANIMPORTANT 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. 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.
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) 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.



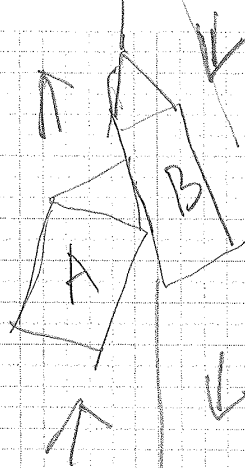
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

The Springbloom
Condo S 556121



A - GRD 8166H
B - SLV 9032R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*on ~~the~~ 21/10/2020 3:00pm at ~~the~~ the Springbloom Condo
while I going to turn right to BIK 143
I check my blind spot No vehicle behind,
When I turn to the right, suddenly
SLV 9032R from NO where come had
hit my front Right side



DECLARATION

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

Policyholder's Signature
Date & Time:

RABAN (1/30/2020, 3:00pm)

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

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



**SINGAPORE
POLICE FORCE**



L/20201021/2083

1 of 2

POLICE REPORT (NP299)

Report No. L/20201021/2083

Police Station Of Origin
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

Date/Time Report Made 21/10/2020 19:02		Vide Report No.		Station Diary No. 19	
Name Of Informant LEE TEK GUA		Address APT BLK 1 PARK ROAD #15-793 SINGAPORE 059108			
ID Type / ID No. NRIC NO / S6867256B		Contact No. Home/Office		Mobile 91801063	
Nationality MALAYSIAN		Email Address			
Occupation RENOVATION COMPANY		Sex Male	Age 52	Date of Birth 06/01/1968	Race Chinese
Institution/School Name		Language			
Date/Time Of Incident 21/10/2020 15:00		Location Of Incident 143 SERANGOON AVENUE 3 THE SPRINGBLOOM SINGAPORE 556121			

Brief details.

On the given date, time and location, I was driving within the compound of the condominium. There was a slip road joining back to the road within the compound. Before I could join the main road, I lookout for vehicles coming from my right. There is no vehicle hence I proceeded to go out. Out of sudden, there was a Singapore registered car on my right side. Both of our vehicle had collided onto each other. The collision caused damages on the front right side of my bumper. The other driver told me he will report to his insurance company. We took down each other particulars before going off. I had already reported the matter to my insurance company. No one was injured and no Police was called.

Signature Of Officer Recording The Report: L / Sgt 3 MUHAMMAD AKMAL BIN YAHYA		Signature Of Informant: 	
Signature Of Interpreter: Not applicable		Date/Time: 21/10/2020 19:02	
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Sgt 3 MUHAMMAD SYAFIEE BIN MOHAMED ISHAK Contact No.:		Classification Of Case:	

Authentication Stamp



**SINGAPORE
POLICE FORCE**



L/20201021/2083

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20201021/2083

The driver's details as follow;

Khoo Yong Guan

SLV9032R - Blue Mercedes CLA180

Hp: 96235655

Signature Of Officer Recording The Report: L / Sgt 3 MUHAMMAD AKMAL BIN YAHYA	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/10/2020 19:02
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Sgt 3 MUHAMMAD SYAFIEE BIN MOHAMED ISHAK Contact No.:	Classification Of Case:

Authentication Stamp



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : ML ALUMINIUM & METAL CONTRACTOR
Period of Insurance : 01 Jun 2020 To 20 May 2021
Engine No. : 1KD2463685
Chassis No. : KDY2318017957

Vehicle No. : GBD8166H
Policy No. : 2070088010
Endorsement No. :
Issued Date : 30 May 2020

ABOUT THE COVER

Make/Model : TOYOTA DYNA LORRY 1.6 ton [Lorry]
Engine Capacity/Tonnage : 1.6 Tonnage **Sum Insured** : Market Value **First Year of Registration** : 2015
Driver Restriction : NA **Off Peak Car** : No **Insuring with COE/PAF** : 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 pleasure 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 Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$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 in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, 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: NA

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 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504641000

ASSURE INSURANCE AGENCY

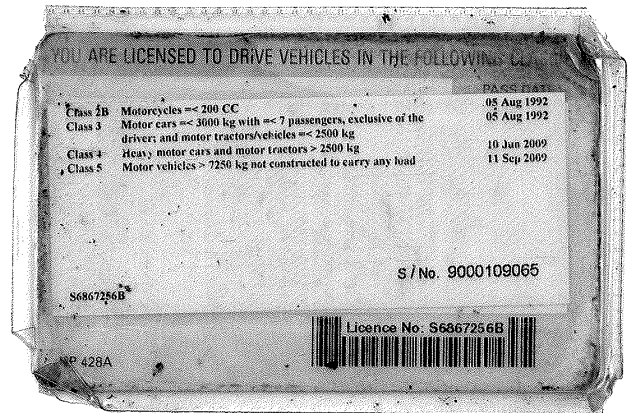
29 KELANTAN ROAD #01-111 KELANTAN COURT
SINGAPORE 200029

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Assure Insurance Agency Pte Ltd



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6867256B



Name
LEE TEK GUA

李 德 松

Race
CHINESE

Date of birth 06-01-1968 Sex M

Country of birth
MALAYSIA


S6867256B

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S6867256B

Name
LEE TEK GUA

Birth Date: 06 Jan 1968
Issue Date: 29 Oct 2008



001666578G



L/20201022/2024

1 of 1

Case Summary Form (CSF)

Report No.L/20201022/2024

Manual Form Serial No -
 Report Number L/20201022/2024
 Vide Report Number L/20201021/2083
 Date/Time of Report Made 22/10/2020 12:50
 Place Report Lodged Woodlands West N.P.C.
 Name of Informant Lee Tek Gua
 ID Type / ID No. NRIC NO / S6867256B
 Home/Office
 Mobile 91801063
 Email
 Date/Time of Incident From 21/10/2020 15:00
 Date/Time of Incident To
 Incident Location 143 SERANGOON AVENUE 3 THE SPRINGBLOOM SINGAPORE 556121

Brief Facts

I am lodging this report to amend L/20201021/2083.

On 21/10/2020 at 1500hrs at 143 Serangoon Avenue 3(The Springbloom Condo), I was driving my vehicle(GBD8166H, Toyota, Silver, Lorry) within the compound of the condominium. It was a two way road main road . I signal right and check my blind spot as I wanted to turn right into Blk 143 Springbloom. After checking the blindspot which I did not see any vehicle, I started to turn right.

Out of sudden, there was Vehicle(SLV9032R, Mercedes, Blue Colour, Car) on my right side from behind. The vehicle(SLV9032R) left portion collided onto my vehicle(GBD8166h) front right side portion. The collision caused damages on the front right side of my vehicle. The other driver told me he will report to his insurance company. We took down each other particulars before going off. I had already reported the matter to my insurance company. No one was injured.

Case Sensitivity No
 Officer-in-Charge of Case L / Woodlands Police Divisional Investigation Branch /
 MUHAMMAD SYAFIEE BIN MOHAMED ISHAK
 Contact No. 67360024
 Classification of Case 1) NO OFFENCE DISCLOSED

SSSgt Johnson TC
 BUKIT PANJANG NORTH NPP
 BLK 27 MARSILING DRIVE
 SINGAPORE 730027
 TEL: 1800-3689999



L/20201022/2030

1 of 1

Case Summary Form (CSF)

Report No.L/20201022/2030

Manual Form Serial No -
Report Number L/20201022/2030
Vide Report Number L/20201021/2083
Date/Time of Report Made 22/10/2020 13:16
Place Report Lodged Woodlands West N.P.C.
Name of Informant Lee Tek GUa
ID Type / ID No. NRIC NO / S6867256B
Home/Office
Mobile 91801063
Email
Date/Time of Incident From 21/10/2020 15:00
Date/Time of Incident To
Incident Location 143 SERANGOON AVENUE 3 THE SPRINGBLOOM SINGAPORE 556121

Brief Facts

I am lodging this report to amend L/20201021/2083.

On 21/10/2020 at 1500hrs at 143 Serangoon Avenue 3(The Springbloom Condo), I was driving my vehicle(GBD8166H, Toyota, Silver, Lorry) within the compound of the condominium. It was a two way road main road . I signal right and check my blind spot as I wanted to turn right into Blk 143 Springbloom. After checking the blindspot which I did not see any vehicle, I started to turn right.

Out of sudden, Vehicle(SLV9032R, Mercedes, Blue Colour, Car) overtook my lorry on my right side from behind. While overtaking, vehicle(SLV9032R) left portion collided onto my vehicle(GBD8166h) front right side portion. The collision caused damages on the front right side of my vehicle. The other driver told me he will report to his insurance company. We took down each other particulars before going off. I had already reported the matter to my insurance company. No one was injured.

Case Sensitivity No
Officer-in-Charge of Case L / Woodlands Police Divisional Investigation Branch /
MUHAMMAD SYAFIEE BIN MOHAMED ISHAK
Contact No. 67360024
Classification of Case 1) NO OFFENCE DISCLOSED

BUKIT PANJANG NORTH NPP
BLK 27 MARSILING DRIVE
SINGAPORE 730027
TEL: 1800-3689999

Accident Photo



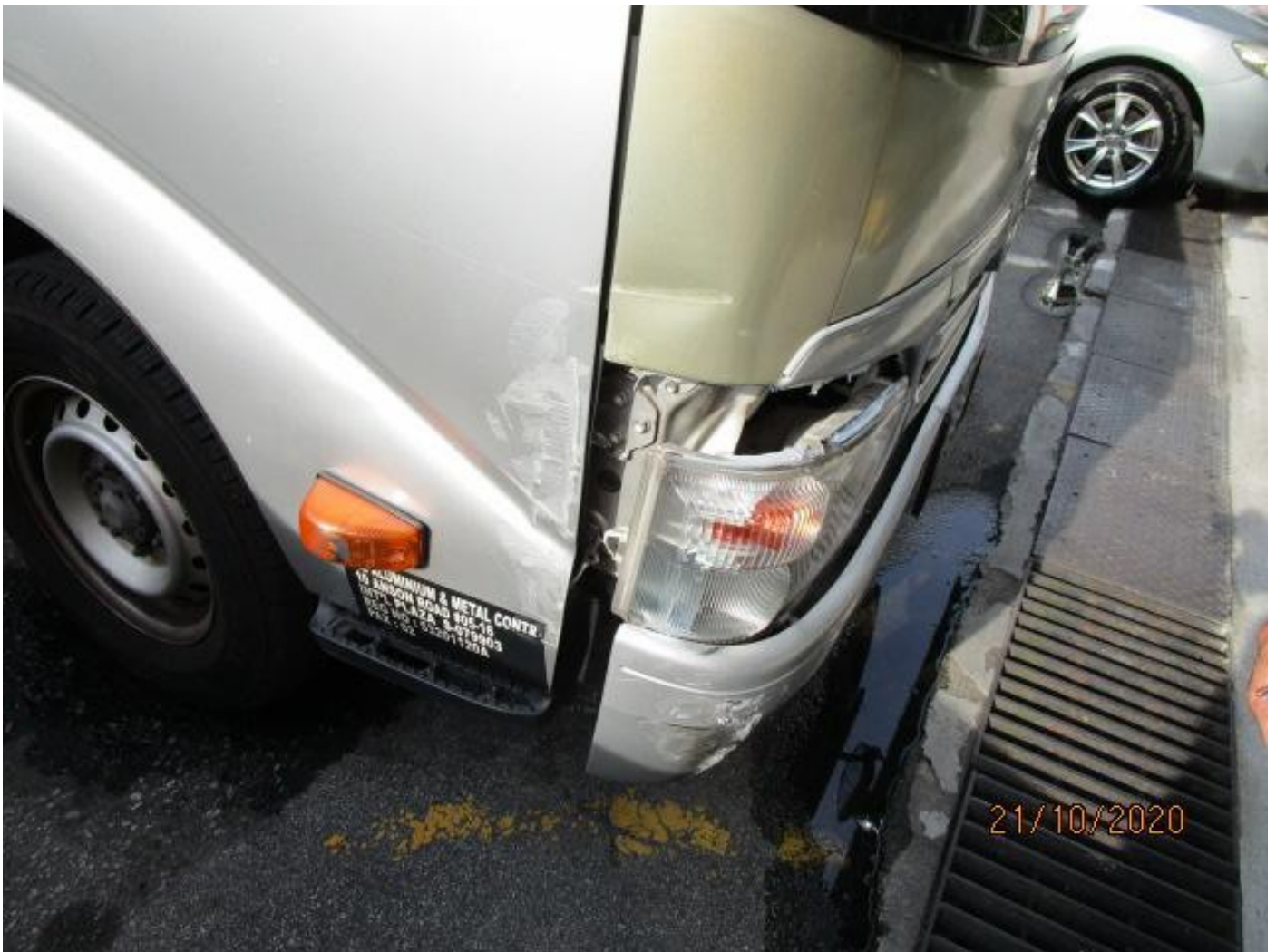
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



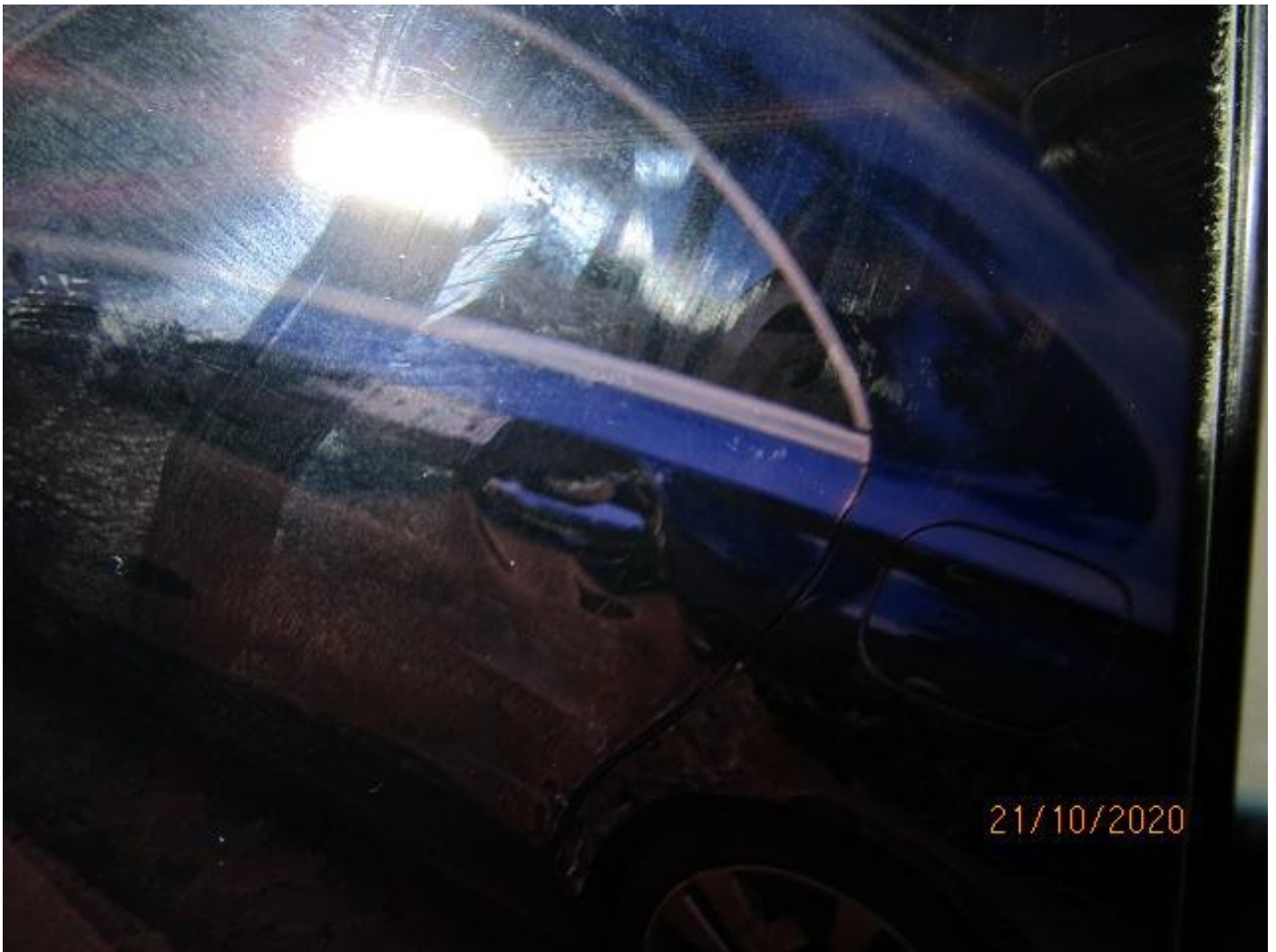
21/10/2020



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1



6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

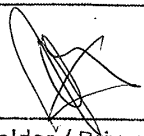
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : WCD520092347 Vehicle Registration No: QBD 8166H
Name (as shown in NRIC) : Mr ALUMINIUM & Metal Custom NRIC/FIN/Passport No : 5XXXX120A
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 21/10/2020 Time of Accident : 1500
Place of Accident : The Springbloom Condo 556121
Insurance Company: ALG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To include Police Report L/20201022/2024
L/20201022/2030



Policyholder / Driver's Signature
Date:

CDGE, Alvin S/Ho / 20

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