

# 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 Submission ..... 14/12/2020 12:23 (SGT)  
Date of Accident ..... 11/12/2020 11:15 (SGT)  
Exact Location of Accident ..... Ang Mo Kio Ave 3, Singapore  
Additional Location Information ..... CTE TOWARDS CITY ALONG ANG MO KIO AVE 3  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBG1578H

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... LIAN HIN PTE LTD  
Company Reg No ..... 201306186N  
Email Address ..... jeffrey.quek@lianhin.com  
Mobile Phone No ..... (Phone) +65-98801223  
Alternative Phone No ..... +65-90689331

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Dyna  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Employment  
Are you claiming under your own insurance policy for repair to your vehicle? ..... Yes  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 2596

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 999993854/100861436-00000  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... LIM BOON KAK  
NRIC No ..... S1779821I

Date Of Birth .....	23/12/1966
Occupation .....	Outdoor
Date Of Driving Pass .....	13/12/1984
Driving experience .....	36 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-90689331
Alt. Phone Number .....	-
Email Address .....	marcus_ng@aia.com.sg
Address .....	BLK 894D WOODLANDS DRIVE 50 #11-23
Address complement .....	-
Postcode .....	7339894
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Employee
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....	Collision - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO STATEMENT AND SKETCH

#### 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 .....	SGT3218G
Vehicle Manufacturer .....	Honda
Vehicle Model .....	Stream
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	TAN WENG HENG , EDEN
NRIC No .....	S8010874E
Contact Number .....	(Phone) +65-90929098
Address .....	-

Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLANIMPORTANT NOTICE

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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 compliance with requirements under any regulations, laws or court orders.



Policyholder's Signature  
Date & Time:

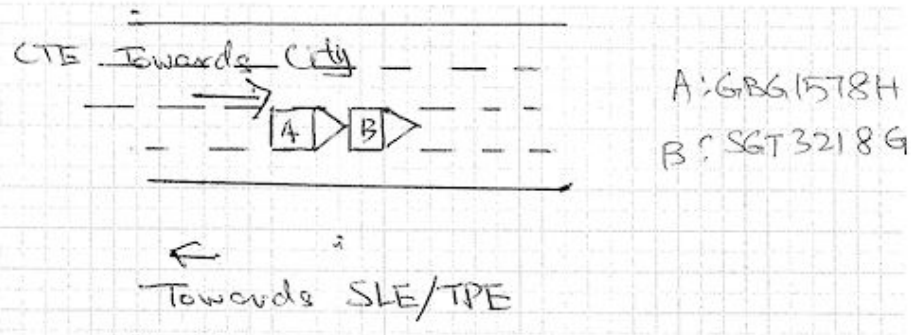
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

1/30/2020

Protected By Symantec

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/12/2020 at 11:15am I was driving along CTE towards City at Ang Mo Kio Ave 3 Flyover. It was heavy traffic flow during that hour. I was behind Veh B moving forward slowly due to traffic jams. At 11:15am I accidentally hit onto the rear of vehicle B when I was moving forward. I quickly got off my vehicle to check on Veh B. Both our vehicles were damaged and I asked Veh B driver was he injured, he said he was fine. After accessing the damages we exchange particulars and agreed to report to our own insurance company.

## DECLARATION

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

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.:



## LETTER OF AUTHORISATION

LIAN HIN PTE LTD

**To Whom it concerns,**

**Dear Sir/ Mdm**

**We hereby authorize our staff Mr Lim Boon Kak to act on company behalf in all possible manners to report and record all documentation regarding accident of company lorry GBG 1578 H.**

**I appreciate both your and Mr Lim cooperation in this matter.**

**Your Sincerely**

A handwritten signature in black ink, appearing to be 'J. Quek'.

**Jeffrey Quek**

**Admin Executive**







HOTLINE TEL: (65) 6419-3000

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

M2.300

COMMERCIAL AUTOPLUS COMPREHENSIVE	OWN DAMAGE EXCESS      S\$800.00    (1)
CERTIFICATE NO. 999993854/100861436-00000	WINDSCREEN EXCESS      S\$100.00
	<small>(for policies with effect from 1st November 2002)</small>
	SUM INSURED      S\$1.00
	INSURING WITH COE/PARF    YES

1) VEHICLE REGISTRATION NO.	GBG1578H
2) NAME OF INSURED	Lian Hin Pte Ltd
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	2 Apr 2020
4) DATE OF EXPIRY OF INSURANCE	1 Apr 2021
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *	

Any person who is driving on the Insured's order or with their permission.  
 An additional Young and Inexperienced Driver (YIDR) Excess of S\$3,000 (unless otherwise stated) applies to any drivers (named and unnamed) who is below age 23 or has less than 2 years 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 in connection with the Insured's business.
  - 2) Use for the carriage of passenger (other than for hire or reward) in connection with the Insured's business.
  - 3) Use for social, domestic or pleasure purposes.
- The Policy does not cover : a) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.  
 b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- SOLE AGENT'S WORKSHOP : For new vehicles less than 3 years from initial registration, you have the option for claims-related repairs to be done at Sole Agent's workshop.
- AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)
- |   |  |
|---|--|
| 1. Star Automotive Ctr - 5 Portsdown Rd [Tel: 65620000]       | 4. Sin Yew Hup Welding - 4 Woodlands Rd [Tel: 67600619]    |
| 2. Lai Huat Meng Kee Motor - 21, Sin Ming Ind [Tel: 64538110] | 5. Delgro Engrg P L - 205 Braddell Rd [Tel: 63837118]      |
| 3. Kan Fook Sing Motor - 1069, Eunos Ave 5 [Tel: 67479560]    | 6. Progressive Automotive - 3022A Ubi Rd 1 [Tel: 67415336] |

LOSS OF USE      NOT INCLUDED

\* NAMED DRIVER      N/A

HIRE PURCHASE COMPANY    HITACHI CAPITAL ASIA PACIFIC PTE 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), 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).

Issued At Singapore    1 Apr 2020

AIG ASIA PACIFIC INSURANCE PTE. LTD.

693232-000  
 NG YEOW HIONG MARCUS  
 371 ALEXANDRA ROAD  
 #11-33 AIA ALEXANDRA  
 SINGAPORE 159963  
 SP-ELITE

  
 Authorised Representative

ORIGINAL

SSCANA





















































Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S865500206 / 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 : SC1K20CE0002 Vehicle Registration No: 6BG 1578H  
Name (as shown in NRIC) : Lian Hin Pte Ltd NRIC/FIN/Passport No : 201306186N  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : \_\_\_\_\_  
Email Address : jeffrey.guek@lianhin.com  
Date of Accident : 11/12/2020 Time of Accident : 1115  
Place of Accident : C7E towards City along Ang Mo Kio Ave 3.  
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 amend on. Registered Acc ID & Registered Owner Name.

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Policyholder / Driver's Signature  
Date:

CDG, Pelen 11/12/20  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: