Your NCD will be affected due to late reporting

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 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.

ACCIDENT STATEMENT

Date of Submission	16/02/2021 11:18 (SGT)
Date of Accident	11/02/2021 13:50 (SGT)
Exact Location of Accident	Tampines Ave 10, Singapore
Additional Location Information	AFTER TAMPINES LINK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG3921L

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KST AUTO RENTAL PTE. LTD.
Company Reg No	2XXXXX860W
Email Address	kstteam@singnet.com.sg
Mobile Phone No	(Phone) +65-67415520
Alternative Phone No	(Office) +65-67415520

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1600

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	999993817
Cover Note Number	-

DRIVER

Name of Driver	JEFREY SUMARDY BIN AHAMAD
NRIC No	SXXXX722G

Date Of Birth	26/12/1964
Occupation	Outdoor
Date Of Driving Pass	22/03/1985
Driving experience	35 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88209227
Alt. Phone Number	-
Email Address	jefrey@transnational-grp.com
Address	BLK 387 TAMPINES ST 32
Address complement	#02-93
Postcode	520387
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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

PLS REFER TO THE ATTACHED STATEMENT.

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	SMK3680E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN PANG HONG
NRIC No	SXXXX630C
Contact Number	(Phone) +65-97512730
Address	-

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

SKETCH PLAN

IMPORTANT NOTICE

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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 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.
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.

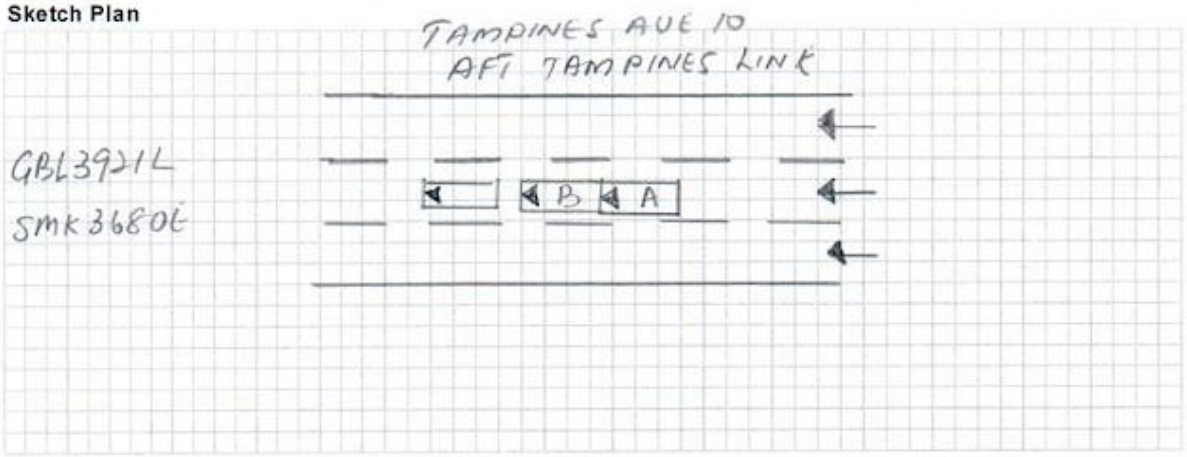
(collectively the "**Purposes**")

(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.

Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
MST AUTO RENTAL PTE LTD	16.02.2021	16/02/21

Sketch Plan



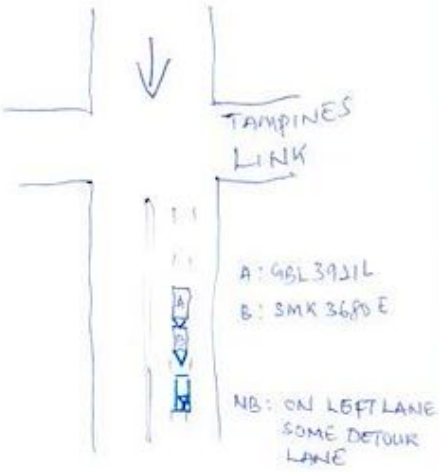
ACCIDENT REPORT

NAME: JEFREY SUMARDY BIN AHAMAD
IC NO: S1657722G
VEH NO: GBL 3921L

ON 14th FEB 2021 AT AROUND 1350hrs, I WAS DRIVING GBG 3921L ALONG TAMPINES AVE 10. AFTER PASSBY JUNCTION BETWEEN TAMPINES LINK, WHILE ~~TRVE~~ TRAVELING AT 60KM/H ~~65 KM/H~~ ON 2nd LANE, FRONT CAR SMK 3680E SUDDENLY MAKING A JAMMED BREAK. DISTANCE BETWEEN FRONT CAR IS ABOUT 1½ ~~CA~~ CAR LENGTH. I'M STRAIGHT AWAY STEP FULL BREAK BUT COULDN'T STOP ON TIME. AND HIT FRONT CAR REAR BUMPER.

WAS TOLD BY OTHER PARTY DRIVER, FRONT VEHICLE OF HIS HAD MADE SUDDEN STOP.

OTHER PARTY PARTICULAR
VEH NO: SMK 3680E
NAME: TAN PANG HONG
IC NO: S7001630C



Describe Circumstances of the Accident

P/S refer to the attached statement.

Declaration

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

KST AUTO RENTAL PTE LTD

Policyholder's Signature / Date & Time

16.02.2021

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

16/02/21

Witnessed by Reporting Centre Personnel

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5


NISSAN
VSKYBAM20Z0145099
2000 Kg
3100 Kg
1– 980 Kg
2– 1100 Kg
TYPE
TYP
COLOUR,TRIM
FABRE,POLST
QM1 K 767
YTKARURM20TWL–CAAC

IMAGES #6

GENERAL INSURANCE ASSOCIATION
RECORDS MANAGEMENT CENTRE

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN0921G0003 Vehicle Registration No: GBG3921L

Name (as shown in NRIC): JEFREY SUMARDY BIN AHAMAD NRIC/FIN/Passport No: SXXXX7226

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: BLK 387 TAMPINES ST 32 #02-93 Singapore (520387)

Contact (Tel): Mobile No.: 88209227

Email Address:

Date of Accident: 11/02/21 Time of Accident: 13:50

Place of Accident: TAMPINES AVE 10 AFT TAMPINES LINK

Insurance Company: AIG

(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:

AMEND POLICY NO: 99999387

Policyholder / Driver's Signature
Date:

12/04/21

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

GIAIRMC Addendum Form