

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 13/04/2021 18:53 (SGT)
Date of Accident 10/03/2021 08:15 (SGT)
Exact Location of Accident Near PIE, Singapore
Additional Location Information Along PIE >Tuas (Before Jalan Bahar Exit)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF6472B

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner KONG GENERAL CONTRACTOR PTE LTD
Company Reg No 201017658N
Email Address nick.goh@coring.com.sg
Mobile Phone No (Phone) +65-96584114
Alternative Phone No (Office) +65-65664140

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? No - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 2998

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 7210002614
Cover Note Number 25/01/2021-24/01/2022

DRIVER

Name of Driver Nick Goh Jing Wei
NRIC No S8913179J

Date Of Birth	20/04/1989
Occupation	Outdoor
Date Of Driving Pass	05/01/2008
Driving experience	13 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96584114
Alt. Phone Number	-
Email Address	nick.goh@coring.com.sg
Address	218C Boon Lay Ave #13-295
Address complement	-
Postcode	640218
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	No Collision
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	6
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Bellal
Gender	Male

PASSENGER 2

Name	Tamilarasu
Gender	Male

PASSENGER 3

Name	Khairul
Gender	Male

PASSENGER 4

Name	Alam Shah
Gender	Male

PASSENGER 5

Name	Poomalai
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008999999
Alt. Police Station Phone No	(Fax) +65-66655791
Police Station Address	No. 92 Boon Lay Way Singapore 609962
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Kindly refer to the sketch plan

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 SMP2460D
 Vehicle Manufacturer Nissan
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour Red
 Vehicle Category Private car
 Name of Driver -
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Bellal
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained Injured due to the braking force
 Injured person in which vehicle? GBF6472B
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person Tamilararasu
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained Injured due to the braking force
 Injured person in which vehicle? GBF6472B
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? No

INJURED 3

Name of injured person Khairul
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained Injured due to the braking force
 Injured person in which vehicle? GBF6472B
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? No

INJURED 4

Name of injured person	Alam Shah
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	Injured due to the braking force
Injured person in which vehicle?	GBF6472B
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

INJURED 5

Name of injured person	Poomalai
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	Injured due to the braking force
Injured person in which vehicle?	GBF6472B
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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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: *Poh Guan Ann*
NRIC/FIN No.:





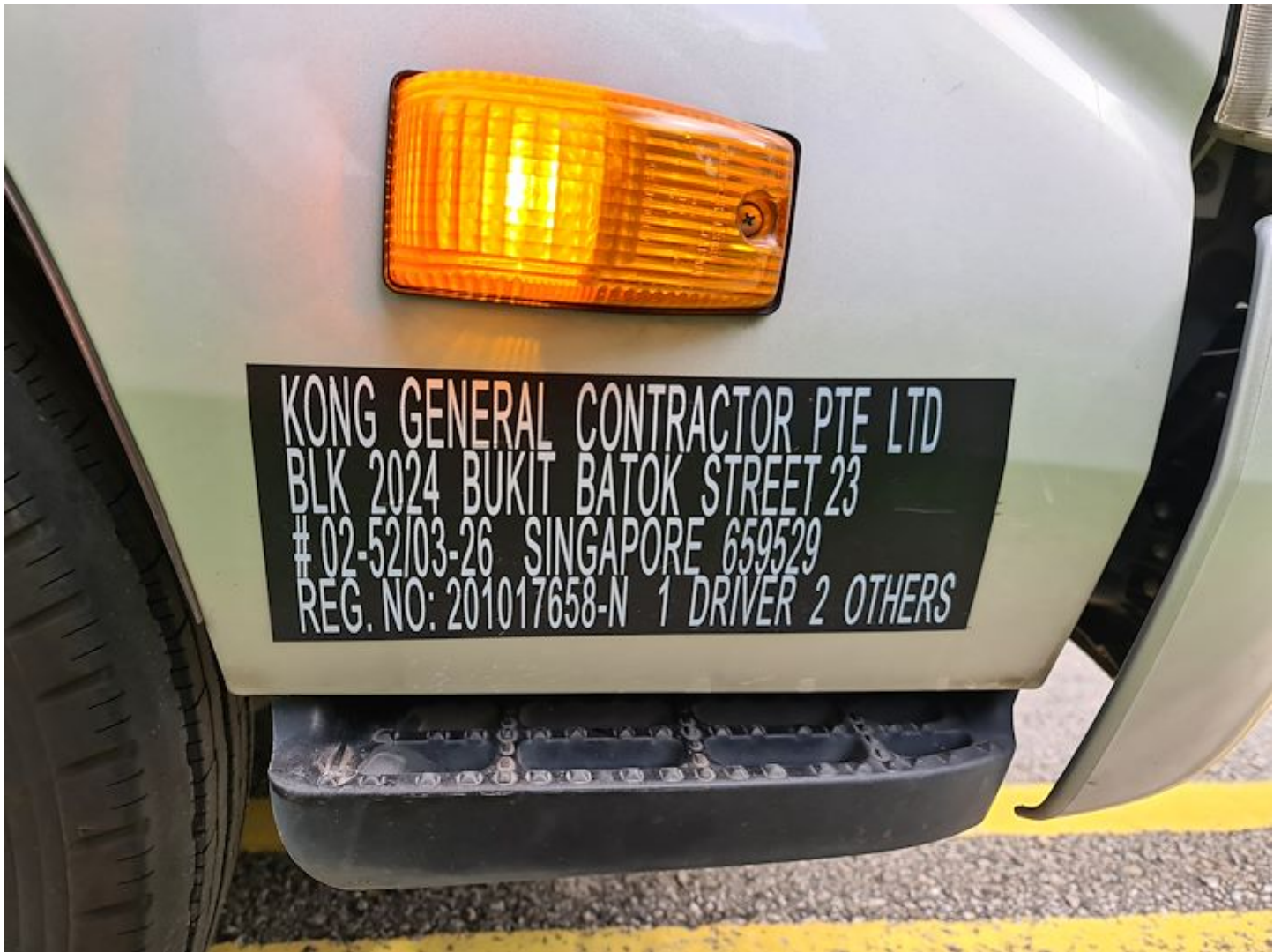












タイヤ空気圧 (kPa/kg/cm ²)	
タイヤサイズ	
前輪	後輪
175/75R15 103/101L LT	145R13-8PRLT
550 5.50	450 4.50
175/75R15 103/101L LT	165R13-6PRLT
550 5.50	350 3.50
25261	YV

TOYOTA MOTOR CORPORATION JAPAN
MODEL QDE-KDY231-TLMGY
ENGINE 1KD-FTV
FRAME No. KDY231-8025882 2982 mL
COLOR TRIM PLANT OPTION
199 FB13 P11
TRANS/AE R451 A01B 200





