

# 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 ..... 17/03/2021 17:18 (SGT)  
Date of Accident ..... 16/03/2021 11:20 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... ORCHARD LINK OUTSIDE TAKASHIMAYA LOADING BAY  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBF1710Y

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... SHOPPING BAG (S) PTE LTD  
Company Reg No ..... 200612162D  
Email Address ..... J9G@GILLCAPITAL.COM.SG  
Mobile Phone No ..... (Phone) +65-63093229  
Alternative Phone No ..... (Home) +65-63093229

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Hiace  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... -  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Reporting only  
Vehicle Category ..... Commercial vehicle

### INSURANCE COMPANY

Name of Insurance Company ..... AIG  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 2100476033-04  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... PENKE VEERA VENKATASIVA RAMA RAO  
Passport No/FIN ..... G7165689L  
Date Of Birth ..... 19/05/1979  
Occupation ..... Outdoor

Date Of Driving Pass .....	06/08/2008
Driving experience .....	12 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87767407
Alt. Phone Number .....	-
Email Address .....	VRAMM833@GMAIL.COM
Address .....	BLK 412 PANDAN GARDEN #08-103
Address complement .....	-
Postcode .....	600412
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? .....	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

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SH8229M
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	OW BOON HENG
Contact Number .....	-

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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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.

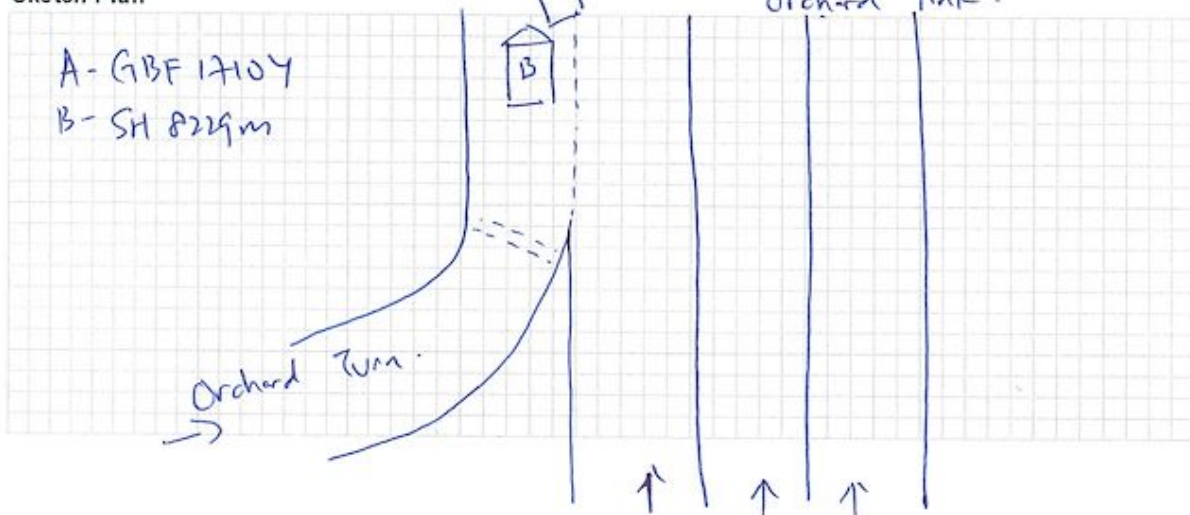


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



### Describe Circumstances of the Accident

Refer to Police Report.

## Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &  
Time

P.V.V.S. Pandey

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

2

Witnessed by Reporting Centre  
Personnel



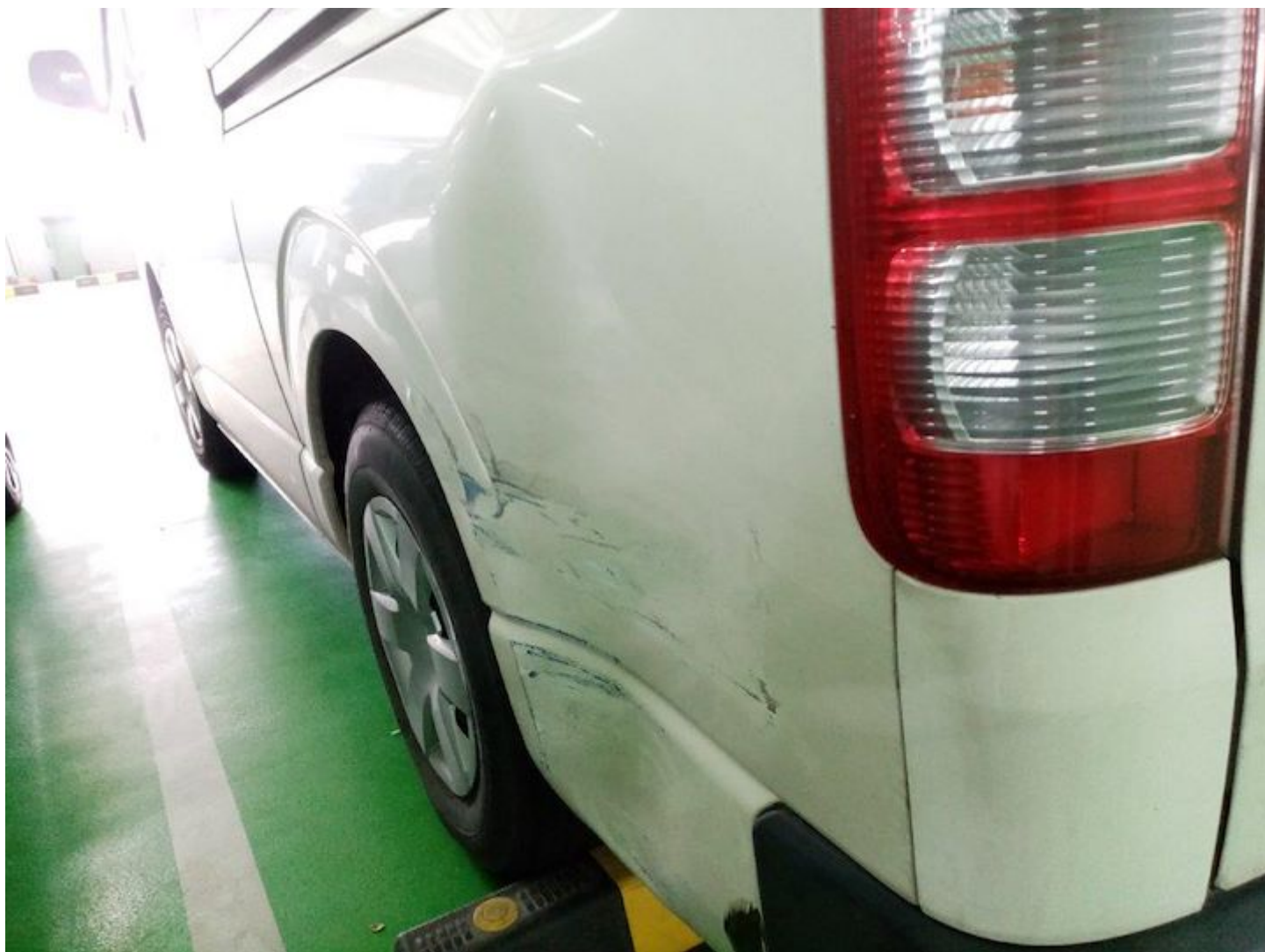




















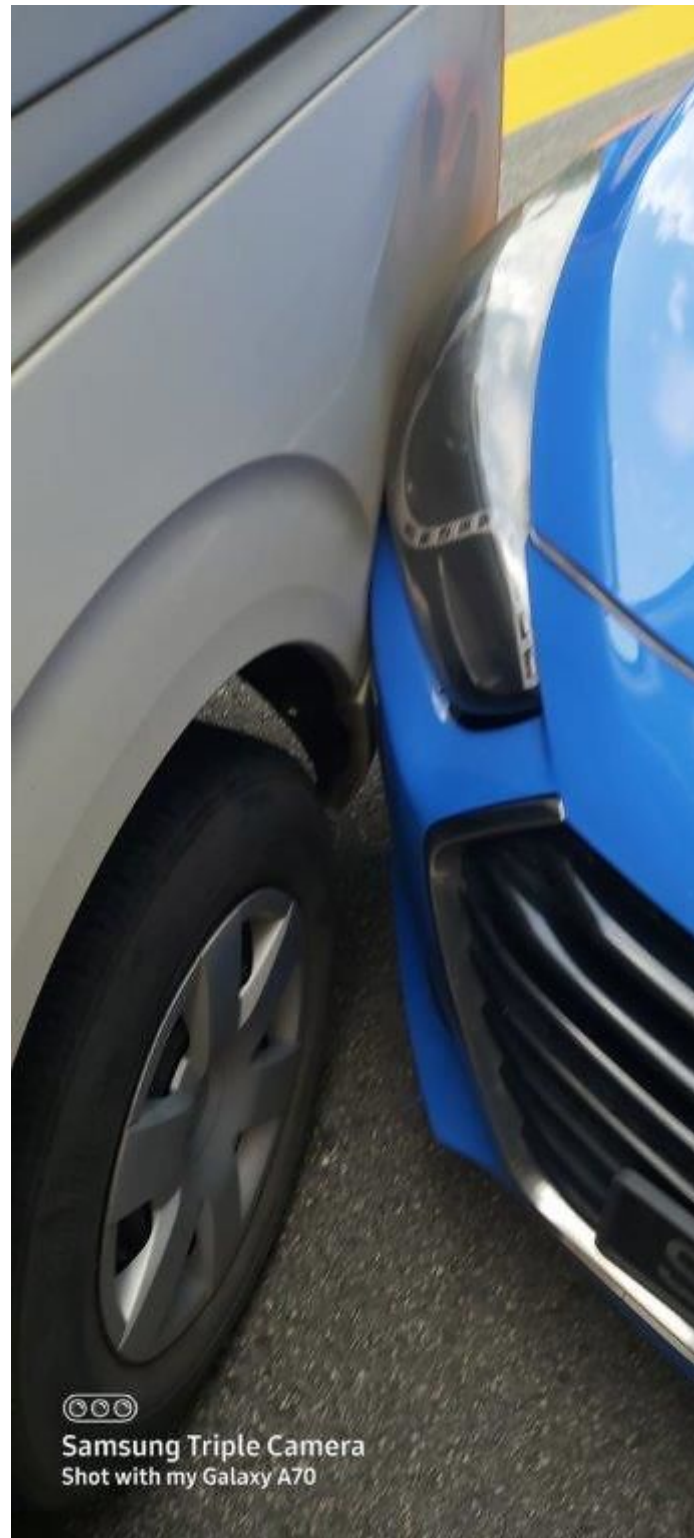




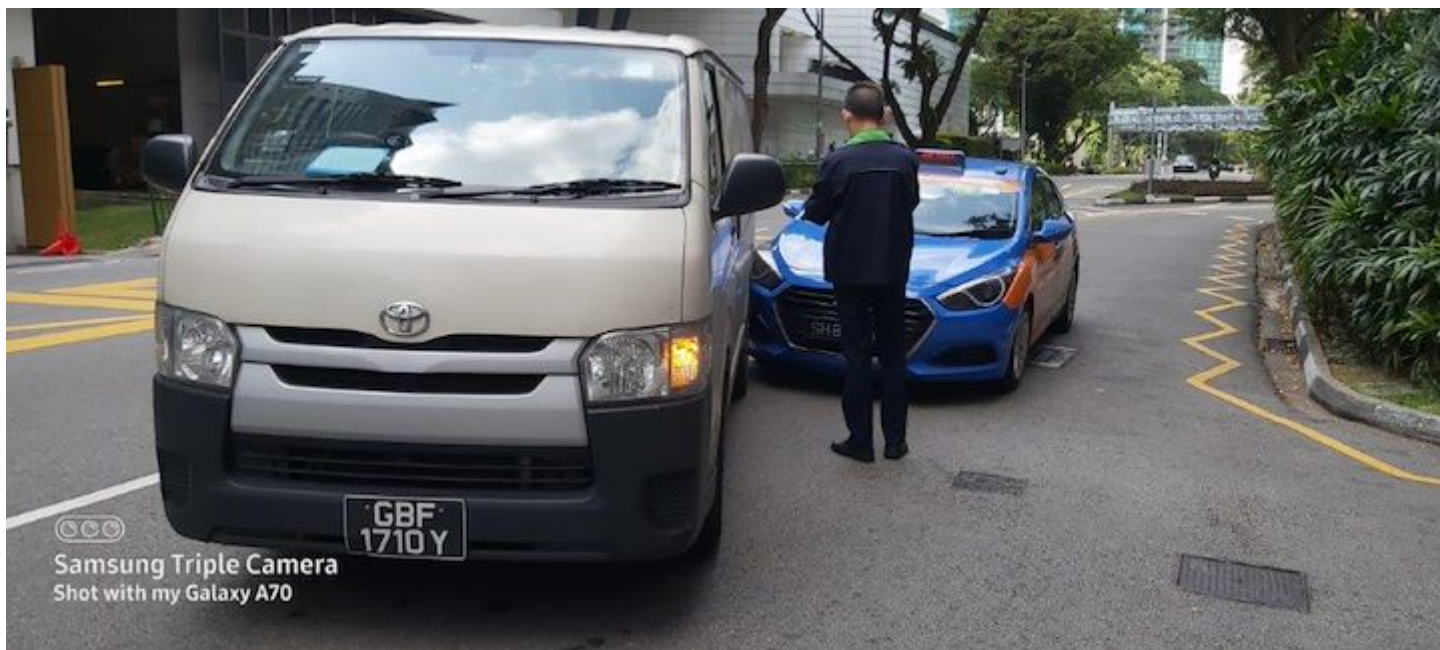
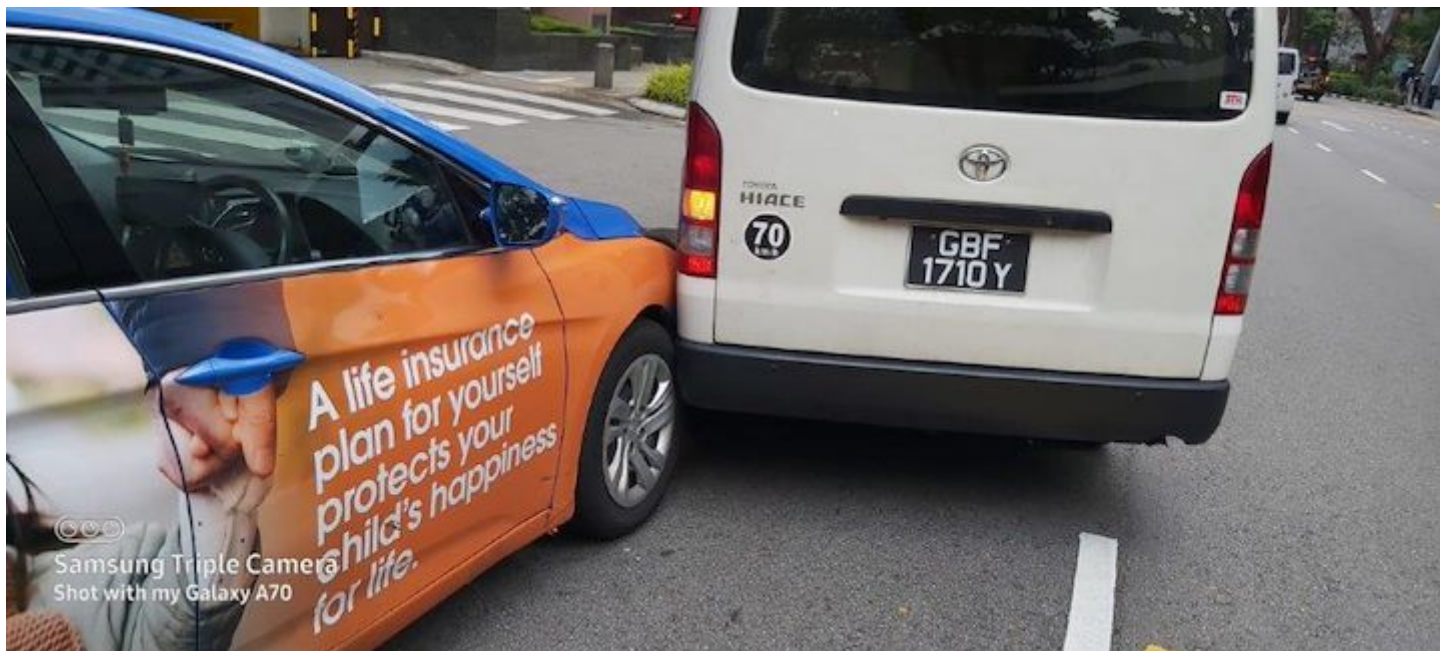


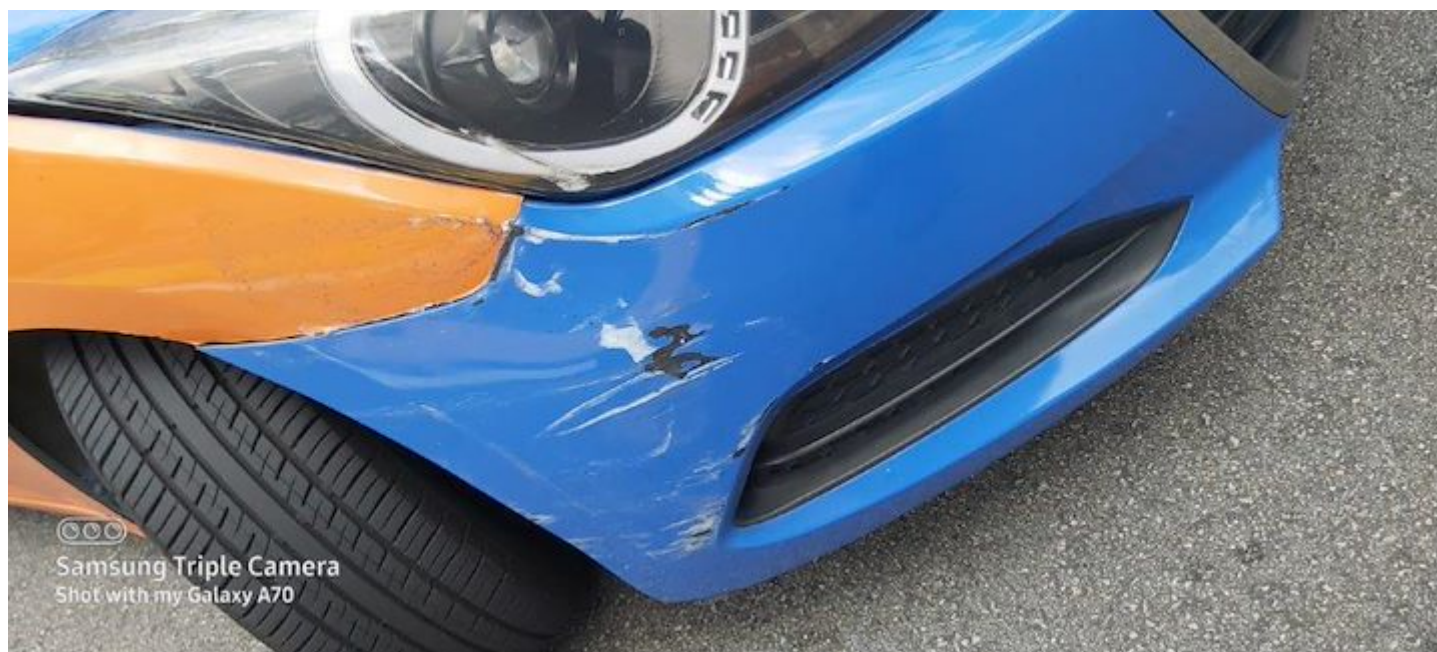






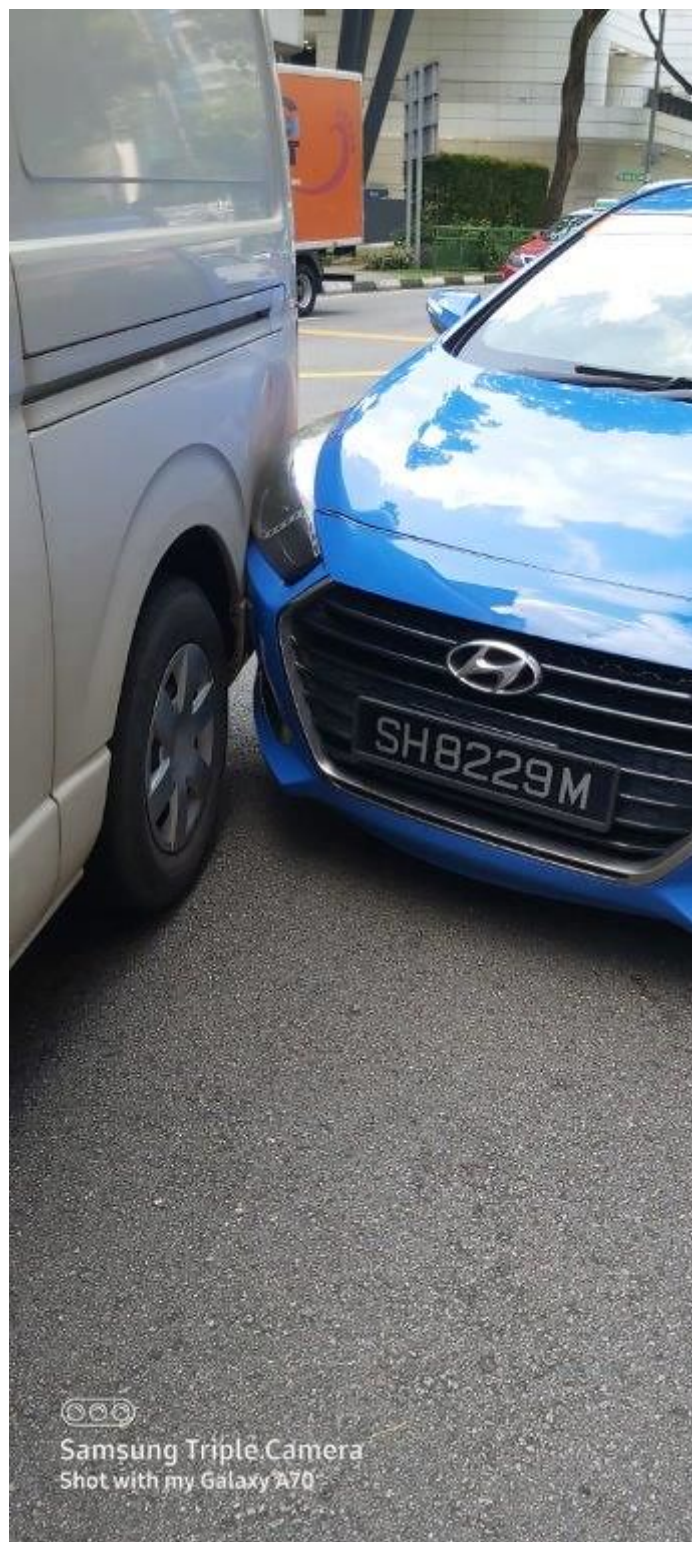












Annex D

## NOTICE OF REPORTING

This is to confirm that Penke veera Venkatasiva Rama Rao, FIN: G7165689L, has reported to the Police a non-injury traffic accident which occurred along Orchard Link, outside Takashimaya Loading Bay, on 16/03/2021 at about 11.20am involving the following vehicles:

- 1) GBF1710Y
- 2) SH8229M

On 16/03/2021 at about 11.20am, I was driving my van GBF1710Y along Orchard Link towards Orchard Rd on the most left lane. There is a Loading/Unloading Bay entrance outside Takashimaya building, along Orchard Link. Hence after Orchard Turn Rd, I have signal left and kept to an additional lane which directs traffic to Takashimaya Loading/Unloading Bay.

Suddenly a taxi bearing SH8229M drove out of Orchard Turn Rd and collided with my Van. My van sustained damages on the left rear area. No visible injuries on all parties. No damage to any government property. We exchanged particulars and left the scene.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(2) T180079 Benjamin

Date: 16/03/2021  
S/D Ref: 73

Time: 1610hrs

Police Post/Unit : Jurong East NPC

Original - to be issued to informant  
Duplicate - to be submitted to Traffic Police

*[Handwritten signature]*  
Police Officer  
Date: 16/03/2021  
Time: 1610hrs  
S/D Ref: 73





AIG Asia Pacific Insurance Pte. Ltd.  
78 Shenton Way  
#09-16  
AIG Building  
Singapore 079120  
Co Reg.No 201009404M

Policy/Reference No. 2100476033-04

09 Jul 2020

Shopping Bag (S) Pte Ltd  
1 Temasek Avenue  
#21-01 Millenia Tower  
SINGAPORE 039192

Dear Shopping Bag (S) Pte Ltd

**Your Policy Has Been Renewed**

We are pleased to inform you that your COMMERCIAL AUTOPLUS COMMERCIAL has been renewed and details of your policy are below:

Policy number : 2100476033-04  
Effective date : 21 Jul 2020  
Expiry date : 20 Jul 2021

It is important that you review the enclosed policy documents to verify that all the information in these documents is accurate. If you wish to update us on any changes, please contact us.

**For More Information**

If you require more information about your policy, please contact our customer service representatives Monday through Friday between 9am to 5pm at +65 6419 3000. Alternatively, you can send us an email at [www.aig.sg](http://www.aig.sg).

Thank you for your support. We look forward to serving you in all your general insurance needs.

Yours sincerely

Manik Bucha  
Head of Personal Insurance

PS: You can now enjoy round-the-clock access to selected AIG products and services with our easy-to-use Apple or Android smartphone app. Purchase new policies, renew your policies, access claims support or receive emergency assistance for motor and travel, anytime, 24-hours a day. Your AIG Mobile App can be downloaded for free at iTunes or Google Play.

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## CERTIFICATE OF INSURANCE

### COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Shopping Bag (S) Pte Ltd  
 Period of Insurance : 21 Jul 2020 To 20 Jul 2021  
 Engine No. : 1KD2629004  
 Chassis No. : JTFHT02P3002C0544

Vehicle No. : G8F1710Y  
 Policy No. : 2100476033-04  
 Endorsement No. :  
 Issued Date : 09 Jul 2020

#### ABOUT THE COVER

Make/Model : TOYOTA HIACE 1 ton [Van]  
 Engine Capacity/Tonnage : 1 Tonnage  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2016  
 Insuring with COE/PAFF : 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 Inexperienced Driver Excess" ("YIDE") 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 passengers (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 test, driving school, racing, pace-making, reliability trial or speed-testing, and b) use whilst drawing a trailer except the towing of a vehicle disabled using a mechanically propelled vehicle c) use for any purpose in connection with Motor Trade

\* Limitations rendered inoperative by Section 9 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 2010, are not to be included under these headings

#### EXCESS

Section 1  
 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 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](http://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 : United Overseas Bank Limited

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 2010 and Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia).

0030210549  
 AIG - AUTO DIRECT

AIG Asia Pacific Insurance Pte. Ltd.  
 This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIGSON/CD/CAFP

70 Selegie Road, #09-01, AIG Building, Singapore 117600 | T: +65 6338 6200 | [www.aig.sg](http://www.aig.sg)

AIG Asia Pacific Insurance Pte. Ltd.



AIG Asia Pacific Insurance Pte. Ltd  
AIG Building  
78 Shenton Way  
#07-16

### MOTOR ACCIDENT INTERVIEW FORM

NAME : Penke Veen Venkatasiva Ramn Rao  
VEHICLE NUMBER : GBF 17104  
DATE/ TIME OF ACCIDENT : 16/3/2021 @ 1120am  
PLACE OF ACCIDENT : Orchard Link outside Tatashimaya Loading Bay.  
THIRD PARTY VEHICLE (IF ANY) : SH 8229m

\*\*\*\*\*  
WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Warehouse → Tatashimaya.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?

No.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

LH Rear Collision

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No.

NAME: P. v. s. Ramn

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE