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 the control of this report will fee fee be made qualified to the proposition by interested parties. 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	05/04/2021 17:24 (SGT)
Date of Accident	01/04/2021 14:45 (SGT)
Exact Location of Accident	Thomson Rd, Singapore
Additional Location Information	Before PIE towards Changi
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Nissan

Vehicle Registration Number	GBH7917T	

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Benzene & Co
Company Reg No	111069/00M
Email Address	benzeneco@yahoo.com.sg
Mobile Phone No	(Phone) +65-97861228
Alternative Phone No	+65-97861228

VEHICLE PARTICULARS

Manufacturer

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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1500

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800116453-02
Cover Note Number	-

DRIVER

Name of Driver	Tan Peck Tong
NRIC No	S0528778B

Date Of Birth 04/01/1948 Occupation Outdoor Date Of Driving Pass 17/04/1970 Driving experience 51 YEARS Gender Male Mobile Number (Phone) +65-97861228 Alt. Phone Number Email Address benzeneco@yahoo.com.sg Address Blk 212B Compassvale Drive #06-123 Address complement Postcode 542212 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? 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 Chain 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 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) 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 Serangoon Neighbourhood Police Centre Police Station Address 50 Serangoon Avenue 2 #01-02 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT Please refer to police report. 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 XE4480K Vehicle Manufacturer Vehicle Model

Commercial vehicle

G8177407U

Murugaiyan Sivakumar

CAccident report SL0321450001

Vehicle Variant
Vehicle Colour
Vehicle Category

Name of Driver

Passport No/FIN

Contact Number	(Phone) +65-90190194
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	PC1355F
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
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 Address Address Complement Post Code Approximate Age Years Old Injuries Sustained	Tan Peck Tong Blk 212B Compassvale Drive #06-123 - 542212 - Finger injured
Injured person in which vehicle?	GBH7917T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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 .
 - 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

BENZENE & CO

Manager

0.5 APR 2021

Date & Time:

Driver's Signature

(If driver is not the policyholder)

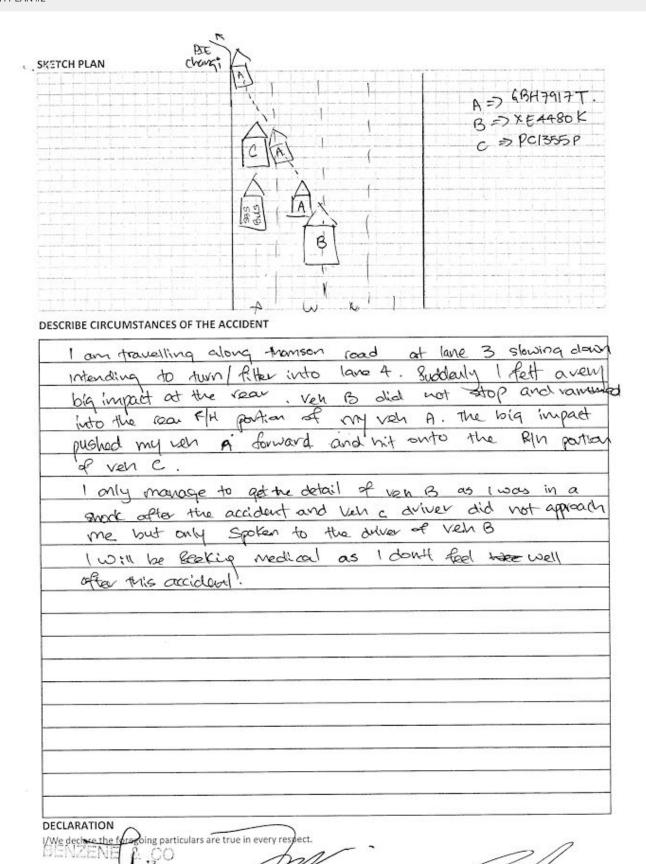
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: Angie Soh

GIARMC SketchPianForm_V3



iver's Signature

(Uf driver is not the policyholder)

Accident report SL0321450001

Policyholder's Signa

Manager O 5 APR 2021 Date & Time:

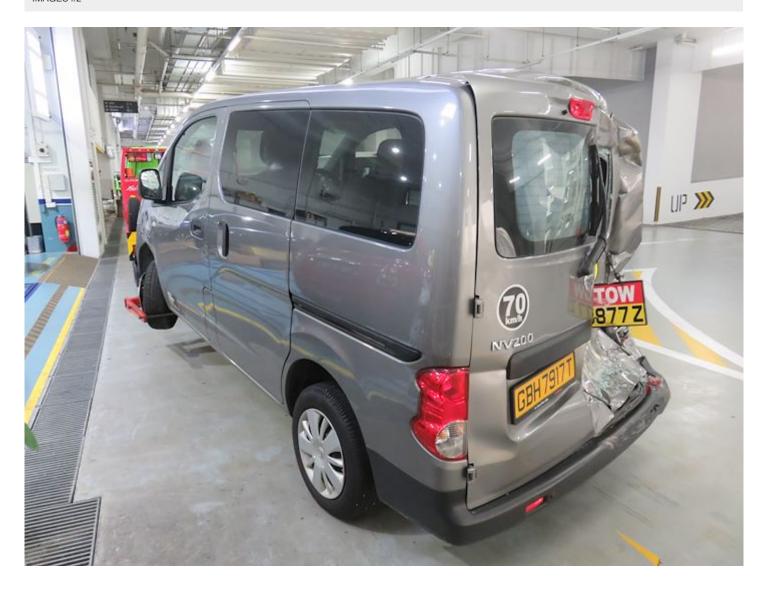
Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Angie Soh

















Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 1 of 3 Report No. T/20210402/2079

50 Serangoon Avenue 2 #01-02 SING 556129

Tel No: 1800-4880999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/04/2021 19:00		/lade:	Vide Report No.:	30	
Informa	nt's Partic	ulars			
Name of Informant: TAN PECK TONG			Address: APT BLK 212B COMPASSVALE DRIVE #06-123 SINGAPORE 542212		
	O Type / ID No.: Contact No.: Home/Office: Mobile: 97861228			Mobile: 97861228	
	Nationality: SINGAPORE CITIZEN		Email:		
Sex: Age: Date of Birth: Male 73 04/01/1948			Type of Informant: Driver		
Race: Chinese			Language: Chinese	Institution / School Name:	
Occupation: SUPPLIER			Driving Licence Information Class: 3	n: Date of Expiry:	

General Infor	mation of the Acci	dent			
Type of Accident: Injury Others		Drink Drive: No	Date/Time of Accident: 01/04/2021 14:4	Type of Location: T-Junction	
Location: THOMSON F	ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Moderate	
Type of Collis Between Mov	sion: ving Vehicles - Head	d To Rear		Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH7917T	Van				Slightly Damaged	0
XE4480K	truck				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



2 of 3

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129 CONTINUATION OF REPORT

Report No. T/20210402/2079

Tel No: 1800-4880999

Driver						
Name	TAN PECK TONG				S0528778B	
Related Vehicle	GBH7917T (Van)			ct No.	97861228	
Hospital/Clinic	INTEMEDICAL KOVAN			of g e & Date	Class: 3 Date of Expiry: NIL	
Date Treatment	01/04/2021	Date Disc	harge 01/04		/2021	
No. of Days gran	Degree of Injury Slight					
Driver						
Name	Murugaiyan sivakumar				G8177407U	
Related Vehicle	XE4480K (truck)			ct No.	90190194	
Hospital/Clinic	NIL			of g ce & Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Disc	ischarge NIL			
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL		

On 01/04/2021 at about 1445hrs, I was driving my vehicle (GBH7917T) along Balestier Road towards Thomson Road. While I was turning towards Thomson Road, I then slow down my vehicle and suddenly I felt an impact and due to the impact, my vehicle moved forward and came to a stop as my vehicle tyre was totally damaged, both of us then got out of our vehicle, took photos, exchange particulars and the truck driver then left the scene as I had to wait for tow truck to tow my vehicle away. Shortly after, I felt pain on my back and as such I went to consult a doctor and I was given 3 days MC.





3 of 3 Report No. T/20210402/2079

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129 CONTINUATION OF REPORT

Tel No: 1800-4880999

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Informant: Signature Of Officer Recording The Report: Sgt 3 LEE SHENG XIANG Signature Of Interpreter: Date/Time: 02/04/2021 19:00 Not applicable Classification Of Case: Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt SYED ZAYID MUHAMMAD BIN SINGAPORE POLICE FORCE SYED ABDUL WAHID ALHINDUAN SN 156 Contact No.: 65476404 Authentication Stamp NP168 SIGNATURE



Γ/20210404/2018

Report No. T/20210404/2018

1 of 3

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No T/20210402/2079

Report Number T/20210404/2018

Vide Report Number T/20210402/2079

Date/Time of Report Made 04/04/2021 12:33

Place Report Lodged Traffic Police

Type of Informant Driver

Name of Informant Tan Peck Tong

ID Type / ID No. NRIC NO / S0528778B

Home/Office

Mobile 97861228

Email

Type of Accident Injury / Others

Drink Drive No

Anyone conveyed by No

ambulance

Date/Time of Accident 01/04/2021 14:45

Accident Location THOMSON ROAD

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger	
GBH7917T	Van				Slightly Damaged	0	
PC1355P	Bus/Coach/Mi nibus				Slightly Damaged	0	
XE4480K	Truck				Slightly Damaged	0	



/20210404/20

2 of 3

Report No. T/20210404/2018

Continuation of CSF For NP168

Brief Facts.

With reference to report number T/20210402/2079, I wish to add that after the collision, my vehicle GBH7917T had moved forwards and collided into the front right side of a minibus PC1355P. After the incident, the driver of PC1355P made a call and took some photos and drove off after.

. . .



T/20210404/2018

3 of 3

Report No. T/20210404/2018

Continuation of CSF For NP168

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Case Sensitivity

No

Officer-In-Charge of Case

TP / AEIT /

SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN

Classification of Case

1) INJURY / OTHERS





CERTIFICATE OF INSURANCE

NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : Benzene & Co Period of Insurance : 29 Sep 2020 To 28 Sep 2021

Engine No. : K9KE628D615517

Chassis No. : VSKYBAM20Z0170950 Vehicle No. : GBH7917T Policy No. : 1800116453-02

Endorsement No.

Issued Date : 07 Sep 2020

ABOUT THE COVER

Make/Model : NISSAN NV 200

Engine Capacity/Tonnage : 0.6 Tonnage Sum Insured : Market Value First Year of Registration : 2018 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : 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 halshe meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Oriver 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 crawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle.c) use for any purpose in connection with Motor Trade.

Loss Of Use (7 Days) Commercial Auto

* 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)

1,Tan Chong Motor Sales. Add: 813 Bt Timath Road Singapore 589823 64894091 64694092 64694093 2,Autolution Industrial. Add: 19 Ubl Road 4 Singapore. 408623 64909568 3,TG AutoClinic. Add: 25 Leng Kee Road Singapore 159997 87033611 67038512 67038513 4,TG AutoClinic. Add: No.1, Subt Lick Yang Road Singapore 628099 62022212 5,Tan Chong Motor Sales. Add: 17 Lor 8 Toa Payoh Singapore. 319254 63570753 63570754

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hottine at +65 6338 6200. Alternatively, you may refer to AIG website www.eig.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: HL Bank

IWe 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).

0500610551

TAN CHONG CREDIT PTE LTD - TKP

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Galk Chai Sylvia Lim

78 Shenton Way #09-16 AIG Building S079120 | T +65 6419 3000 | www.big.sg