

KURUP & BOO
UEN 53130914B
ADVOCATE & SOLICITOR
COMMISSIONER FOR OATHS
NOTARY PUBLIC

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Singapore 179098
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6221 8623
Fax. No. 6225 7248
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boo@kurupnboo.com.sg

Our Ref : BMC.3636.21.wh

12 April 2021

U R G E N T

AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#07-16 AIG Building
Singapore 079120

Via email only
aigsgp_claimssurvey@aig.com

Dear Sirs

ACCIDENT INVOLVING VEHICLE NO. SMX 1570J AND SDD 6009T AT JURONG TOWNHALL ROAD ON 10 APRIL 2021

We act for Drive Easy Rental Pte Ltd, the owner of the vehicle no. SMX 1070J which was involved in the above accident.

For your immediate attention, we attach a copy of the Singapore Accident Statement lodged by or on behalf of our client.

By way of notice, we inform you that our client damaged vehicle is now in the workshop named below:

Heng Yap Seng Auto Services
Block 160, Sin Ming Drive
#08-13 Sin Ming AutoCity
Singapore 575722
Contact : Mr Chong Han Meng
HP No. : 9183 3008 Fax : 6873 2017

We hereby give you **two days'** notice for your representative to go the above workshop to inspect our client's damaged vehicle. Kindly contact Mr Chong Han Meng prior to going to the workshop for the survey.

Yours faithfully



BOO MOH CHEH

enc

cc Heng Yap Seng Auto Service

SV0K214A0006-01 / VICOM LTD (VAC) - Bukit Batok (659545)
 ENTRY DATE & TIME: 10/04/2021 12:03 (SGT)
 SUBMITTED BY: Wilson Teo Cheng Ming
 VERSION: 2 (12/04/2021 13:03 (SGT))

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	10/04/2021 12:03 (SGT)
Date of Accident	10/04/2021 00:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JURONG TOWNHALL ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX1570J
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	DRIVE EASY RENTAL PTE LTD
Company Reg No	2XXXXXX208G
Email Address	admin@aerogarage.com.sg
Mobile Phone No	(Phone) +65-93960689
Alternative Phone No	+65-97591401

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	5119641258
Cover Note Number	-

DRIVER

Name of Driver	TAN THIAM SENG
NRIC No	SXXXX682B

Date Of Birth	12/02/1965
Occupation	Outdoor
Date Of Driving Pass	27/09/1994
Driving experience	26 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97591401
Alt. Phone Number	-
Email Address	admin@aerogarage.com.sg
Address	BLK 531 BUKIT BATOK STREET 51 #04-124
Address complement	-
Postcode	650531
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PASSENGER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Hong Kah North Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18005679999
Alt. Police Station Phone No	(Fax) +65-65652508
Police Station Address	Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370
Was notice of Intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER SKETCH STATEMENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	UNABLE TO DOWNLOAD
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDD6009T
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Vehicle Manufacturer	Mercedes
Vehicle Model	E200
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	POH CHAI HENG
NRIC No	SXXXXX326H
Contact Number	(Phone) +65-90295498
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN THIAM SENG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY PAINS
Injured person in which vehicle?	SMX1570J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2





Name of injured person	PASSENGER
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY APINS
Injured person in which vehicle?	SMX1570J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

SKETCH PLAN

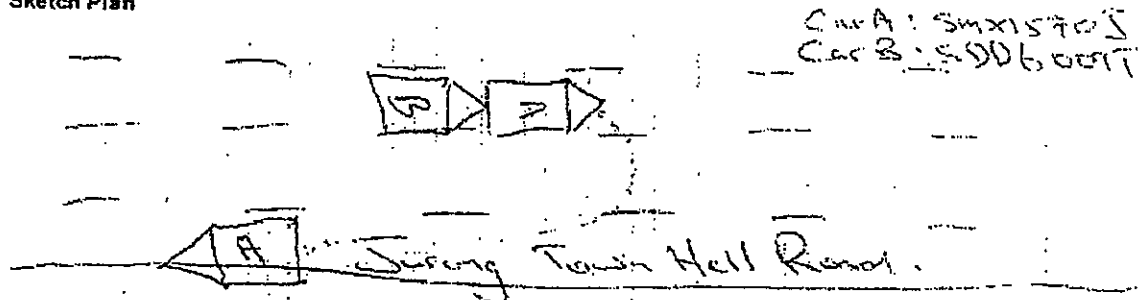
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)
I understand, 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 a. Insurer(s) who have insured vehicle(s) involved in this accident (as 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



SKETCH PLAN #2

Describe Circumstances of the Accident

along Jurong Town Hall Rd

I, Tan Thiam Seng was driving my car and was on the way to send my passenger back to Bt. Pongong Rd. I was driving at 3rd lane and was suddenly hit by the car behind me. My car spun and was flipped at the kerbs.

(lost control)

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel