SN092154000C / National Assessment Centre Services [408933] ENTRY DATE & TIME: 04/05/2021 17:01 (SGT) SUBMITTED BY: Liew Shan Hui VERSION: 1 (04/05/2021 17:01 (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 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.

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   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 04/05/2021 17:01 (SGT) Date of Accident 30/04/2021 14:30 (SGT) Exact Location of Accident 407 Yishun Ave 6, Singapore Additional Location Information **CARPARK LOT 413** Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number GW2390G

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner KST AUTO RENTAL PTE LTD Company Reg No **Email Address** LINGHEONG6097@GMAIL.COM Mobile Phone No (Phone) +65-67415520 Alternative Phone No +65-67415520

#### VEHICLE PARTICULARS

Manufacturer Toyota Model Hiace Variant Exact purpose for which vehicle was being used at time of **Employment** accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle Transmission Manual CC 3000

#### **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage ThirdParty Fleet Policy Nο Policy Number 999993602 Cover Note Number

#### DRIVER

Name of Driver TAN LING HEONG NRIC No. S7888050C

Date Of Birth 15/04/1978 Occupation Outdoor Date Of Driving Pass 07/05/2016 Driving experience 4 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-86612707 Alt. Phone Number Email Address LINGHEONG6097@GMAIL.COM Address BLK 329A ANCHORVALE STREET #08-507 Address complement Postcode 541329 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 Side Swipe 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? Was any injured conveyed to hospital by ambulance? 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? Police Station Name Ang Mo Kio South Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004519999 Alt. Police Station Phone No (Fax) +65-65535679 Police Station Address 81 Ang Mo Kio Ave 3 Singapore 569929 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO STATEMENT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number FY318T Vehicle Manufacturer Vehicle Model

Private car

Vehicle Variant
Vehicle Colour
Vehicle Category

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)				_

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#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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

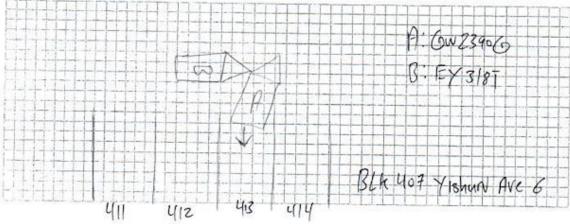
- (a) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' law yers/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
- (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' law yers/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





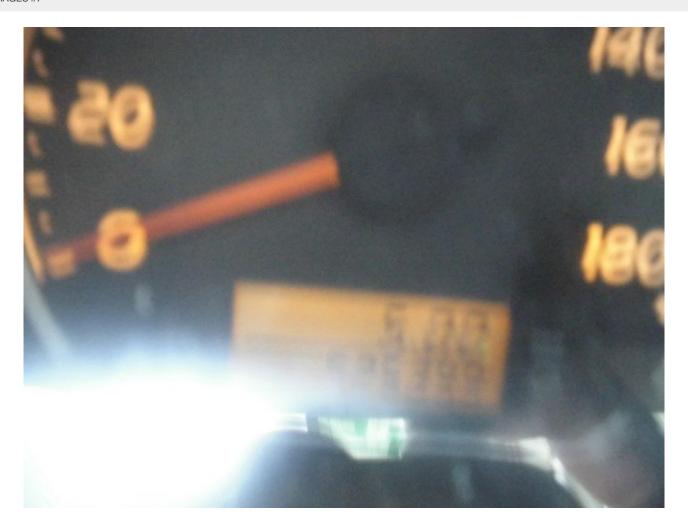


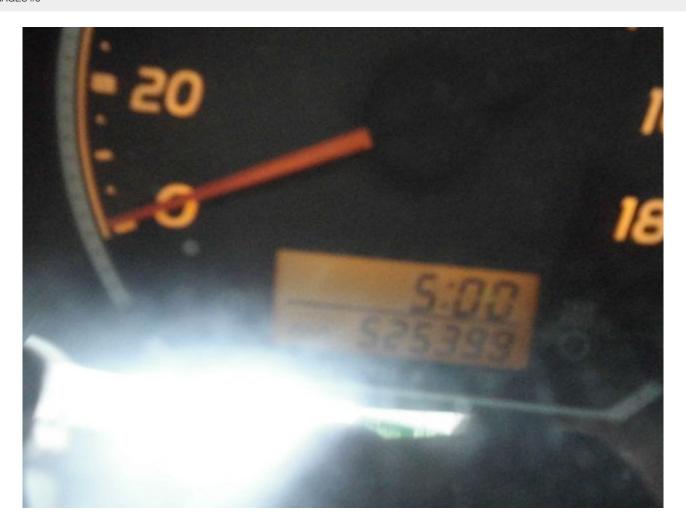












### CONFIDENTIAL

Annex E

## NOTICE OF COMPLIANCE

This is to confirm that Tan Ling Heong, NRIC S7888050C has reported to the Police a non-injury traffic accident which occurred at Blk 407 Yishun Ave 6 open space carpark at lot 413 on 30.04.2021 at 2.30pm involving the following vehicles:

- GW2390G (driven by Tan Seng Chuan)
- 2. EY318T (driven by a Chinese uncle)
- If this accident was reported to the Police within 24 hours of its occurrence, 2 Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Syt (2) Nicholes Sylvania Date: 01/05/2021 Time: 0152 hvs

S/D Ref: 13

Police Post/Unit: \_\_\_

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

CONFIDENTIAL

Version as of 15 Jan 2002