

## **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.

- 4. The issue and acceptance of this is form by instrained 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 14/05/2021 12:40 (SGT) Date of Accident 12/05/2021 18:15 (SGT) Exact Location of Accident Singapore Additional Location Information TAN TOCK SENG LINK Country/State of Loss Singapore

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

Nissan

Vehicle Registration Number GBK4047H

#### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SMS BUILDING PTE LTD Company Reg No 201437212K **Email Address** sean@smsbuild.com Mobile Phone No (Phone) +65-83003838 Alternative Phone No +65-83003838

#### VEHICLE PARTICULARS

Manufacturer

Model Nv200 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 Auto CC 1600

#### **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Nο Policy Number 2070107237 Cover Note Number

#### DRIVER

Name of Driver MUHAMMAD SUFYAIN BIN YUSOFF NRIC No S8931480A

Date Of Birth 18/09/1989 Occupation Outdoor Date Of Driving Pass 13/01/2020 Driving experience 1 YEAR AND 4 MONTHS Gender Mobile Number (Phone) +65-81556685 Alt. Phone Number Email Address sufyan@smsbuild.com Address 535 JURONG WEST ST 52 #05-487 Address complement Postcode 640535 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 Chain Collision Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT SEE ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** Vahiala Dagistration Number

Venicle Registration Number	SBX95B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	SIN WAI TUCK
Contact Number	(Phone) +65-90676538
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	SLE7446C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN KER HAN
Contact Number	(Phone) +65-92744072
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

#### 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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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)

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

Date & Time:

Driver's Signature

(If driver is lot the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident Location : TAN TOC	
Accident Date: 12 MAM 21	Accident Time : 6115 andpm
Owner Email:	Driver Email: Sufyan@smsbuil&.com
On IZMAYZI I WAS DR	IVING ALONG TAN TOCK SENG LINK.
AS IT WAS RAINING A	THE PORD WAS SLIPPERY I COUNTY
	E. I'VE HIT THE CAR PLATE NO SLETHHEC
FROM THE BACK, IE	THE STATED CAR HAD ALSO HIT KNOTH
CAR PLATE NO SE	3×95B.
- OTHER VEHICLE INVOLVE DE	TAILS
Veh No: SLE71446C Hp:	Pax; I Driver Name: TAN KER HAN
Veh No: SBX95B Hp:	Pax: i Driver Name: SIN WAI TUCK
DECLARATION	Fax. 1 Dilver Name, STN WAT TOCK
/We declare the foregoing particulars are true i	n every respect.
	Zenature Reporting Chris Personnel's Signature r is not the policyholder) Name:
Date & T	

# SMS BUILDING PTE LTD

Company Reg No. GST Reg No. 201437212K

82 Rifle Range Road Mayfair Park Singapore 588387 (Office)

280 Woodland Industrial Park E5 Harvest@ Woodlands Singapore 757322 (Factory)

Email: sales@smsbuild.com Website: www.smsbuild.com.sg Tel: 6547 5545

14 May 2021

AIG ASIA PACIFIC INSURANCE PTE LTD

Dear Sir,

Report Accident: 12 May 2021 Involving Company Vehicle GBK4047H

We would like to inform that our company vehicle GBH4047H had an accident on 12 May 2021

We had appointed Mr Sufyan, NRIC: S8931480A driver of the vehicle to report the case

Please do contact us if you need further clarifications

Yours faithfully

Sean Ng Project Director

Mobile: 83003838



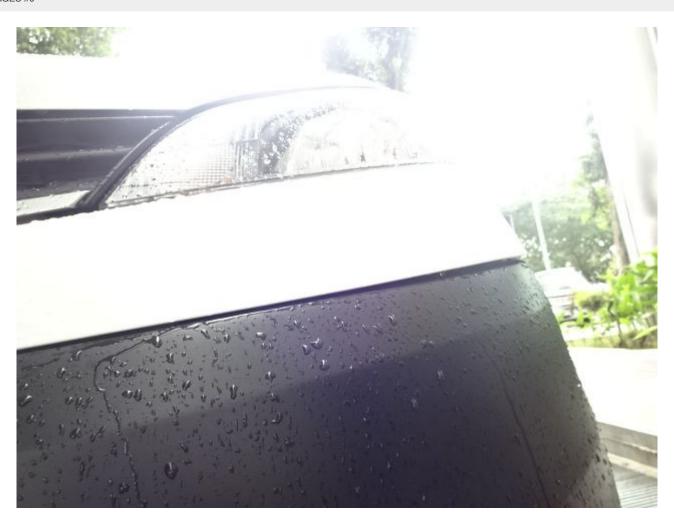












CHASSIS NO: JN1YAAM20Z00000542
U.L.W :1200 KGS
M.L.W :2070 KGS
PRESION D

TYRE SIZE :F: 1DRIVER, 1 OTHER
R: 00
TYRE SIZE :F: 165 x 80R 14C
R: 165 x 80R 14C
R: 165 x 80R 14C



