

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 19/05/2021 15:10 (SGT)
Date of Accident 18/05/2021 12:15 (SGT)
Exact Location of Accident Singapore
Additional Location Information NO 2 FIRST STREET (BASEMENT CARPARK)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBL3210D

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner METAQUIP TC INDUSTRIAL PTE LTD
Company Reg No 199305621Z
Email Address jonathan_goh@tanchong.com
Mobile Phone No (Phone) +65-87775119
Alternative Phone No (Office) +65-62653666

VEHICLE PARTICULARS

Manufacturer Nissan
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? Yes
Vehicle Category Commercial vehicle
Transmission Auto
CC 1597

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number -
Cover Note Number 100883075

DRIVER

Name of Driver NG CHOON SEAH
NRIC No S1491158H

Date Of Birth	31/05/1961
Occupation	Outdoor
Date Of Driving Pass	07/05/1979
Driving experience	42 YEARS
Gender	Male
Mobile Number	(Phone) +65-92392998
Alt. Phone Number	-
Email Address	jonathan_goh@tanchong.com
Address	APT BLK 21 CHAI CHEE ROAD, #02-452
Address complement	-
Postcode	461021
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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	Collided into Parked Vehicle
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGG4848A
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	STEVEN
Contact Number	(Phone) +65-82224848
Address	-
Address complement	-

Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN

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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

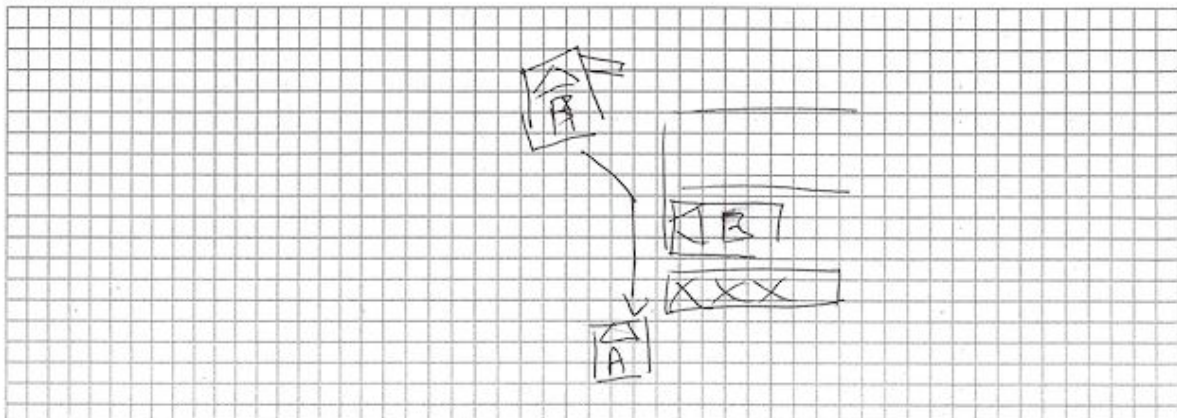
[Handwritten Signature]

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

TC AutoClinic Pte Ltd
1 SIXTH LOK YANG ROAD
SINGAPORE 628099
TEL: 6282 2212
FAX: 6282 3092

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

After I stopped my car at the basement carpark I proceed to take out a parcel from my vehicle to make delivery. As I was walking towards the lift lobby, a passerby alerted me that my van is moving. So I ran back to my van to attempt to stop my van but unable to stop in time. My van hit an a parked vehicle. As I thought I will be doing a quick delivery I did not closed my van door and the door was damaged as result.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



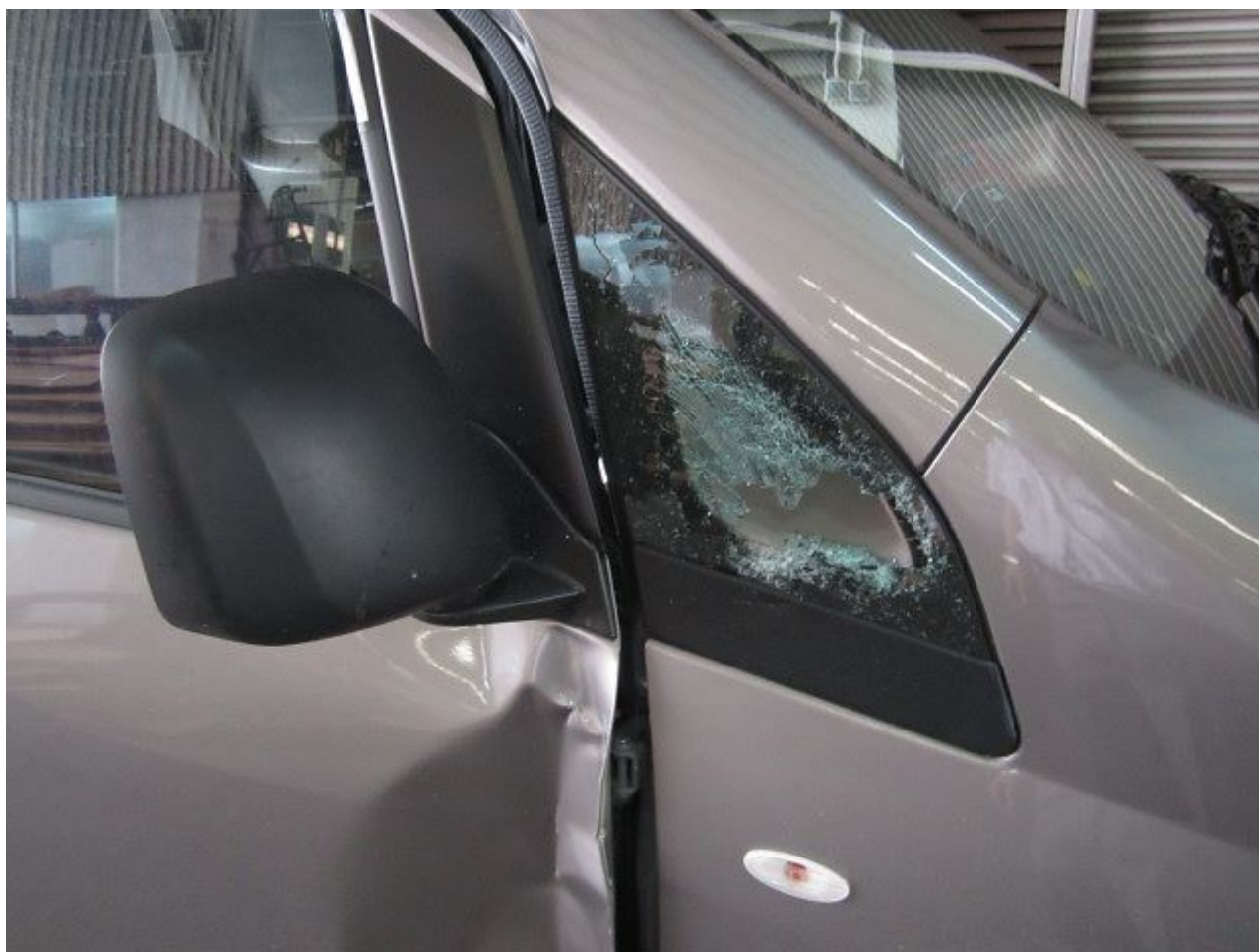
Driver's Signature (If driver is not the policyholder) / Date & Time

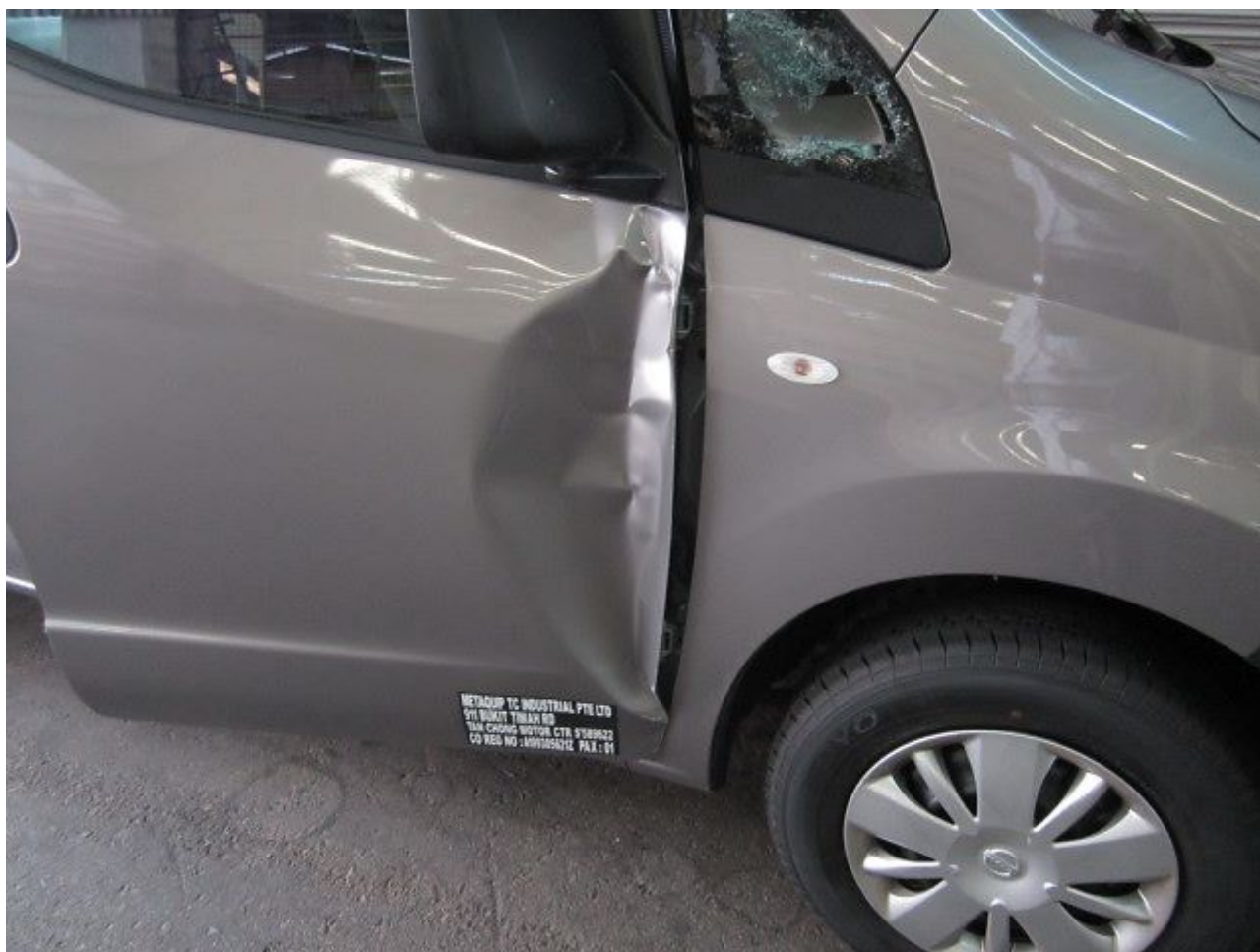
TC AutoClinic Pte Ltd
1 SIXTH LOK YANG ROAD
SINGAPORE 628090
TEL: 6282 2212
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Witnessed by Reporting Centre Personnel











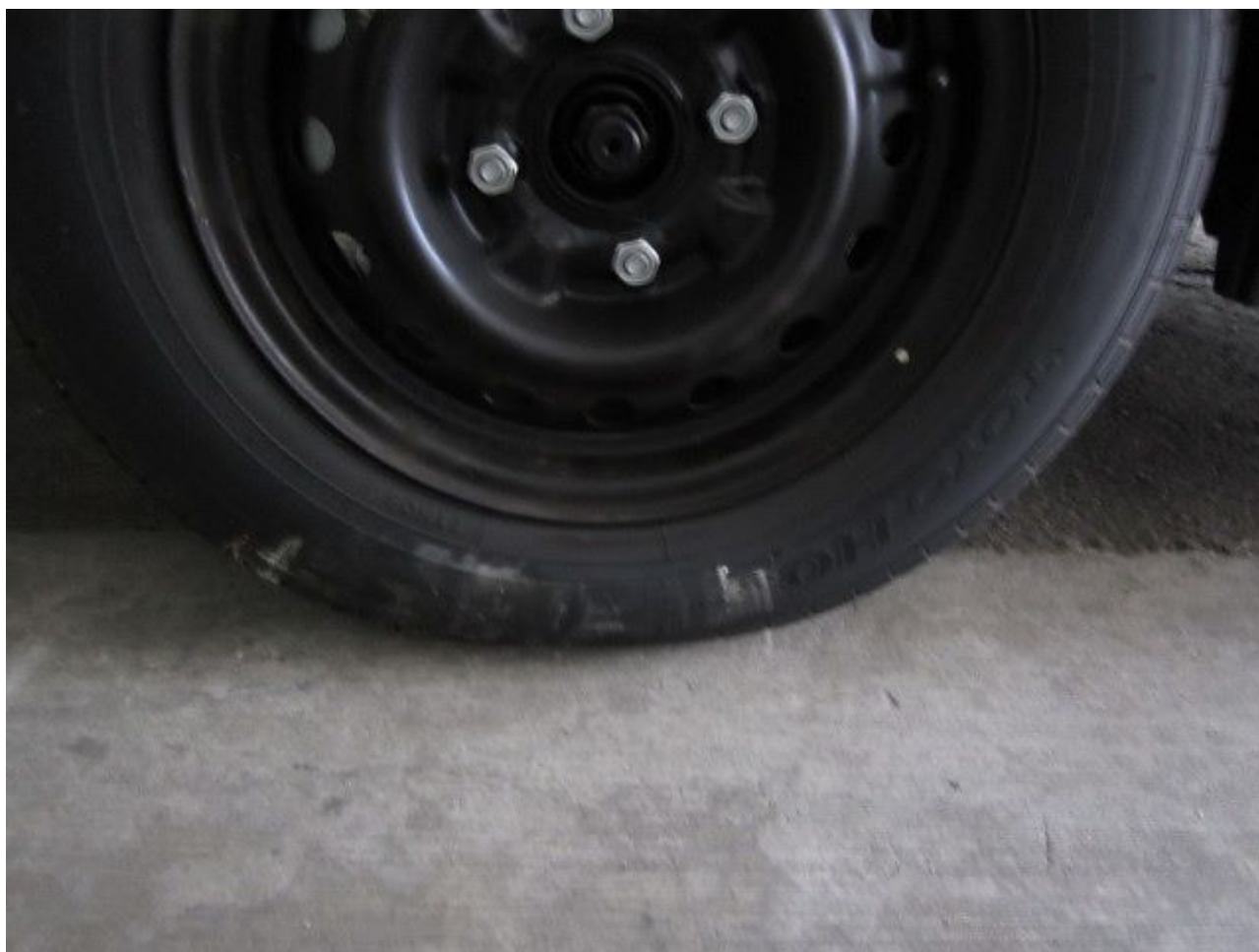


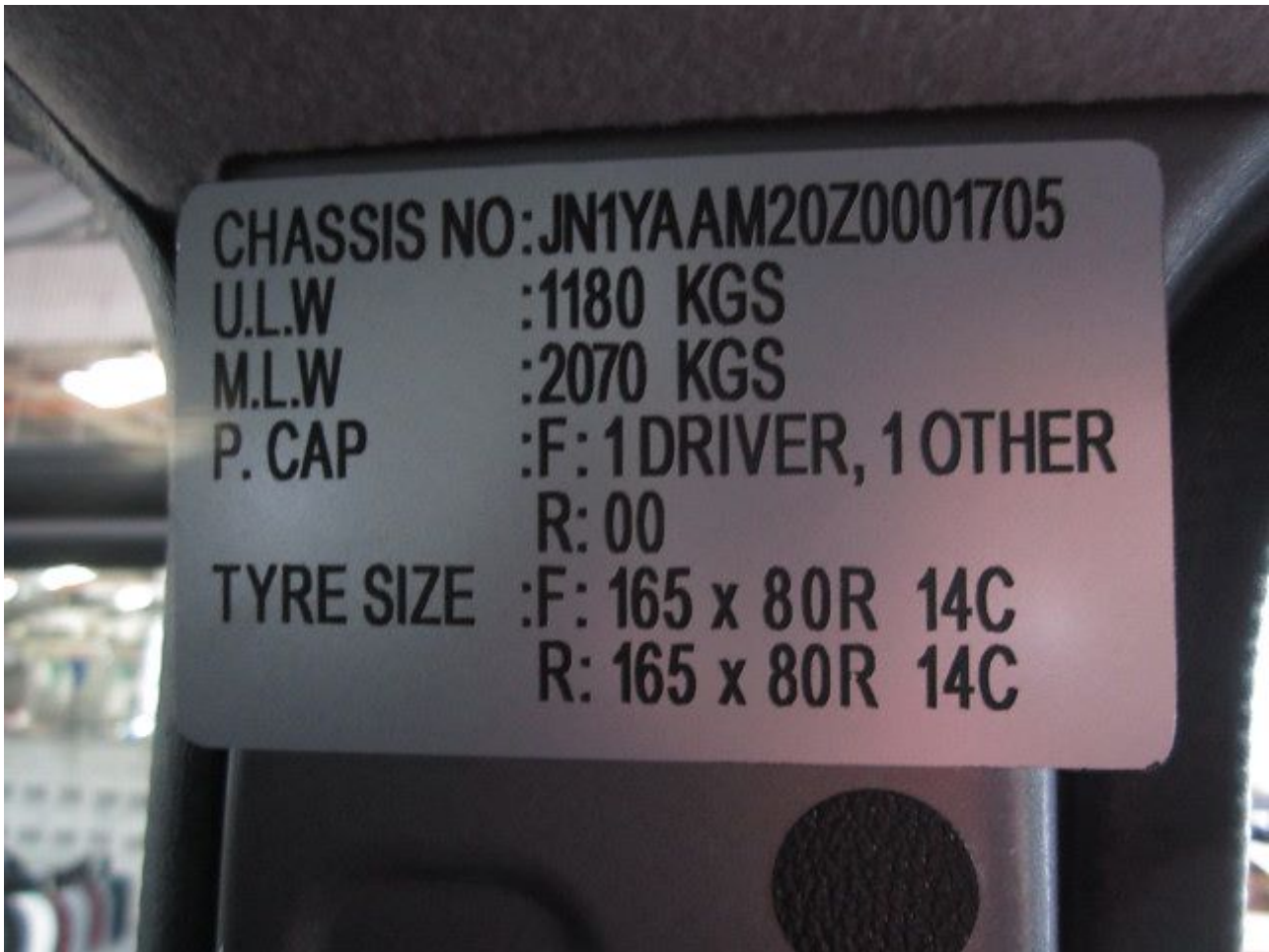
















HOTLINE TEL: (65) 6419-3000

COVER NOTE

Cover Note No.	100883075	Date:	10 May 2021
The following risk described in the Schedule is hereby HELD COVERED in the terms of the applicable Company's policy issued to the Policyholder			
Schedule			
Policyholder	Metaquip TC Industrial Pte Ltd		
Age Condition	N/A	Registration No	TBA
Policy Type	COMPREHENSIVE COMMERCIAL MOTOR	Make/Model	Nissan NV200 1.6AT Petrol
Effective Date	11 May 2021	CC/Tonnage	0.79
Expiry Date	10 May 2022	Engine No	HR16183662D
Hire Purchase Company	NA	Chassis No	JN1YAAM20Z0001705
		Year of Registration	2021
<p>This policy is subject to driver's age condition. The policy will indemnify the insured or any authorised driver only if he/she meets the age condition. Please refer to policy terms and conditions.</p> <p>Usage of vehicle only for the following purposes:</p> <ol style="list-style-type: none"> 1. Use only for social, domestic and pleasure purposes and for the Policyholder's business. 2. Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business and use for social, domestic or pleasure purposes. <p>Please note that acceptance of the risk is subject to our final acceptance and terms and conditions applicable to the policy. Should you require any change to the insurance, please contact us immediately. Otherwise, any change will not be covered under the policy.</p> <p>The Company may cancel this cover by notice in writing and the insurance will be terminated and a proportionate part of the annual premium for the insurance will be charged for the time the Company has been on risk.</p>			
<p>MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)</p> <p>MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960</p> <p>ROAD TRANSPORT ACT, 1967 (MALAYSIA)</p> <p>MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)</p>			
CERTIFICATE OF INSURANCE			
I / We hereby certify that this cover note is issued in accordance with the provisions of the Motor Vehicles (Third- Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1967 (Malaysia).			

Issued in Singapore

AIG Asia Pacific Insurance PTE. LTD.

IMPORTANT NOTICE
 THIS COVER NOTE IS VALID
 FOR 60 DAYS FROM THE
 FIRST DAY OF THE POLICY
 PERIOD.


 AUTHORISED REPRESENTATIVE

AIG Building, 78 Shenton Way #09-15 Singapore 079120

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