

# 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 ..... 24/05/2021 14:26 (SGT)  
Date of Accident ..... 22/05/2021 14:00 (SGT)  
Exact Location of Accident ..... Near Upper Changi Rd E, Singapore  
Additional Location Information ..... UPPER CHANGI ROAD EAST  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBG7441D

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... WEE LIAN ELECTRICAL ENGINEERING (PTE) LTD  
Company Reg No ..... A197802486Z  
Email Address ..... kt.tan@weelian.com.sg  
Mobile Phone No ..... (Phone) +65-96782438  
Alternative Phone No ..... (Office) +65-64533003

### VEHICLE PARTICULARS

Manufacturer ..... Nissan  
Model ..... Cabstar  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... -  
Are you claiming under your own insurance policy for repair to your vehicle? ..... Yes  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 3000

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 170067384-03  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TAN KIM TECK  
NRIC No ..... S1515786J

Date Of Birth .....	14/04/1961
Occupation .....	Indoor
Date Of Driving Pass .....	10/04/1979
Driving experience .....	42 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-96782438
Alt. Phone Number .....	-
Email Address .....	kt.tan@weelian.com.sg
Address .....	80 LORONG MELAYU
Address complement .....	-
Postcode .....	416987
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 .....	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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	SIVANATHAN KANAPATHI
Gender .....	Male

#### PASSENGER 2

Name .....	NALU UDAIYAR CHINNA THAMBI
Gender .....	Male

#### PASSENGER 3

Name .....	SRIPOOTON WICHIAN
Gender .....	Male

#### PASSENGER 4

Name .....	ANANTHAPERUMAL GANAPATHI
Gender .....	Male

#### 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

SEE ATTACHED SKETCH PLAN, PHOTO AND VIDEO FOOTAGE

#### 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 .....	SHD9923L
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Prius
Vehicle Variant .....	-
Vehicle Colour .....	Red
Vehicle Category .....	Taxi
Name of Driver .....	JACKSON
Contact Number .....	(Phone) +65-90239823
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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5. Any false reporting may be referred to the Police for investigation.
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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 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 24/05/2021  
19:15

Sketch Plan

A - GBG 7441D  
B - SHD 9923L

Driver's Signature (if driver is not the policyholder) / Date  
& Time 24/05/2021  
19:15

AUTOLUTION INDUSTRIAL PTE LTD  
19 UBI ROAD 4  
SINGAPORE 408628  
TEL: 6490 8877 FAX: 68467483

Witnessed by Reporting Centre  
Personnel ELMER (A) 10

UPPER CHANGI ROAD  
EAST



Describe Circumstances of the Accident

UPPER

WHEN I WAS DRIVING MY VEHICLE "A" AT CHANGI ROAD EAST AT 1.55pm ON 22ND MAY 2021, VEHICLE "B" SUDDENLY STOP AND I DID APPLIED BRAKE ON MY VEHICLE "A", BUT COULD NOT STOP IN TIME AND HIT THE VEHICLE "B".

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time  
 24/05/2021  
 14:15

Driver's Signature (If driver is not the policyholder) / Date & Time  
 24/05/2021  
 14:15

AUTOLUTION INDUSTRIAL PTE LTD  
 19 UBI ROAD 4  
 SINGAPORE 408623  
 TEL: 6450 9666 FAX: 68467483

Witnessed by Reporting Centre Personnel  
 EMMA ALFONSO





































# CERTIFICATE OF INSURANCE

## NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : Wee Lian Electrical Engineering (Pte) Ltd  
 Period of Insurance : 17 Oct 2020 To 16 Oct 2021  
 Engine No. : ZD30026240N  
 Chassis No. : JN1SC2F24Z0860306

Vehicle No. : GBG7441D  
 Policy No. : 1700067384-03  
 Endorsement No. :  
 Issued Date : 10 Sep 2020

### ABOUT THE COVER

Make/Model : NISSAN NEW CABSTAR

Engine Capacity/Tonnage : 1.6 Tonnage

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2017

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 he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver 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 drawing 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: 913 Bt Timah Road Singapore 589623 64694091 64694092 64694093

2. Autolub Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666

3. TC AutoClinic Add: 25 Leng Kee Road Singapore 156097 67038511 67038512 67038513

4. TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212

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 hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://www.aig.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: NA

We 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).

0500610317

TAN CHONG CREDIT PTE LTD-CSK

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

BSCHMO