

NATION ASSURANCE CO., LTD.

Date: 11/20/2018
Ref No: 1008095
Veh No: 1895189
DOB: 10/14/01

CC BY-NC-ND 4.0 International license.

cl. 1.

$\frac{dW}{dt} = \frac{1}{N} \sum_i W_i \left(\frac{dW_i}{dt} \right)$

18. 11. 1911

Owner/Driver:

Policy No: (

Confirmed by:

Insured/Driver Liability: (

Year of registration

卷之四

() Willco's Guarantor's Information is Confidential & Strictly NO For or of public use

(Total Number of Cases)

Dr. Voynich (1857-1932) (1857-1932)

THE UNIVERSITY OF CHICAGO

1) Apply for Transit Allowance (

2) QQ Cluole / Post Repair Inspection

3) Upload Resume/ Photo (Repair Cost > \$5000)

!<A11f111

NA2103679

Driver/Owner:

“Compl. No.”

דערמאנען פארבאן;

CC Checked by (Name-Date):

2711

511

•

11/10/2011

Involved during

For Cherry

344

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	25/08/2021 16:29 (SGT)
Date of Accident	24/08/2021 14:10 (SGT)
Exact Location of Accident	Jln. Ahmad Ibrahim, Singapore
Additional Location Information	TOWARDS PIONEER ROAD NORTH ROUNDABOUT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ1849K
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	JEP INDUSTRADES PTE LTD
Company Reg No	1XXXXX591K
Email Address	a3669j@gmail.com
Mobile Phone No	(Phone) +65-90623147
Alternative Phone No	(Office) +65-62412522

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?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1598

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900023118-02
Cover Note Number	-

DRIVER

Name of Driver	POH THIAM SING
NRIC No	SXXXX486Z

Date Of Birth	24/04/1961
Occupation	Outdoor
Date Of Driving Pass	15/08/1983
Driving experience	38 YEARS
Gender	Male
Mobile Number	(Phone) +65-90623147
Alt. Phone Number	-
Email Address	a3669j@gmail.com
Address	BLK 687 JURONG WEST CENTRAL 1 #12-155
Address complement	-
Postcode	640687
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	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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 vehicle 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

PLEASE REFER TO SKETCH AND ATTACHMENT

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBP2369R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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) -

SKETCH PLAN

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. 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' 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.

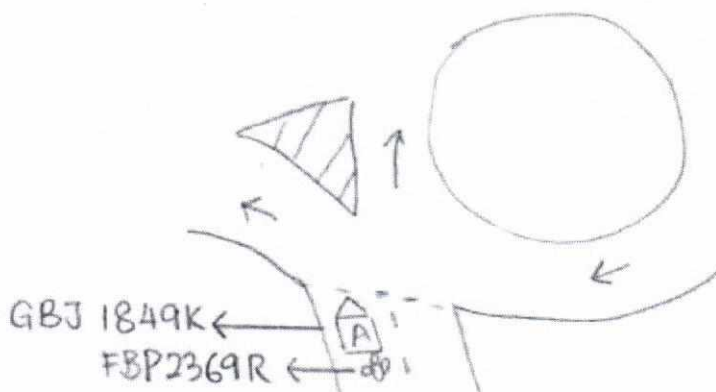


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Roundabout of
Jalan Ahmad
Ibrahim towards
Pioneer Road North

Describe Circumstances of the Accident

Refer to Attached

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

Witnessed by Reporting Centre Personnel

25/08/2021

On 24.08.2021 at about 14:10 hours at Roundabout of Jalan Ahmad Ibrahim towards Pioneer Road North, I was stationary on lane 2 at the above mentioned location and waiting for the oncoming traffic to clear.

Suddenly, I heard a loud bang and felt an impact from behind. When I alighted, I realised it was vehicle (B) that collided onto the rear right hand side portion of my vehicle (A).

Vehicle (A): GBJ 1849K

Vehicle (B): FBP 2369R

A handwritten signature in blue ink, appearing to be 'Ahmad Ibrahim', is written over a circular official stamp. The stamp is faint and contains text around its perimeter, which is partially obscured by the signature.

aw 25/08/2021

SINGAPORE ACCIDENT STATEMENT

Accident Date: 24/08/2021		Time: 14:10		(hh:mm) 24 hr format
Location Roundabout of Jalan Ahmad Ibrahim towards Pioneer Road North				
Vehicle Number GBJ1849K				
Insured Name JEP Industrades Pte Ltd				
NRIC/FIN 198602591K		Contact Number 6241 2522		
Make Nissan		Model NV200 (Puay Wai)		
Are you claiming under your own insurance policy for repair to your vehicle?				
() Yes If No, Pls select: (<input checked="" type="checkbox"/>) Third Party () Reporting				
Insurance Company AIG				
Type of Policy (<input checked="" type="checkbox"/>) Comprehensive () Third Party Fire & Theft () TP Only				
Policy Number 1900023118-02				
Name of Driver Poh Thiam Sing		() Same as Insured		
NRIC/FIN S1500486Z		Contact Number 9062 3147		
Date of Birth 24/05/1961				
Driving Pass Date 15/08/1983				
Occupation () Indoor (<input checked="" type="checkbox"/>) Outdoor				
Gender (<input checked="" type="checkbox"/>) Male () Female				
Email Address A3669J@gmail.com		() NO EMAIL		
Address of Driver BLK 687 Jurong West Central 1				
# 12-155 Singapore 640687				
Was driver an employee of the Insured's Company? (<input checked="" type="checkbox"/>) Yes () No				
If No, Relationship of the Driver with the Insured				
() Owner () Spouse () Friend () Relative () Children () Sibling				
Does the Driver Own Any Other Vehicle? () Yes () No				
If Yes, Vehicle Registration Number of Driver's Own Vehicle				
Insurance Company of Driver's Own Vehicle				
Weather Conditions () Clear (<input checked="" type="checkbox"/>) Raining () Others				
Road Surface () Dry (<input checked="" type="checkbox"/>) Wet () Others				
Was any foreign vehicle involved in this accident? () Yes (<input checked="" type="checkbox"/>) No				
Was anybody injured in the accident? () Yes (<input checked="" type="checkbox"/>) No				
If yes, injured detail				
Was there any video captured by Car Camera? () Yes (<input checked="" type="checkbox"/>) No				
Was the Accident reported to the Police? () Yes (<input checked="" type="checkbox"/>) No If yes attach police report				
DETAILS OF 3 rd party Name Nric Contact				
Veh B FBP2369R				
Veh C				
Veh D				
Veh E				
Veh F				

Driver Only



CERTIFICATE OF INSURANCE

NISSAN COMMERCIAL AUTO POLICY FOR TOWNSHIP

Name of Policyholder : JEP Industrades Pte. Ltd
 Period of Insurance : 13 Feb 2021 To 12 Feb 2022
 Engine No. : K9KE628D632186
 Chassis No. : VSKYBAM20Z0174040

Vehicle No. : GBJ1849K
 Policy No. : 1900023118-02
 Endorsement No. :
 Issued Date : 25 Jan 2021

ABOUT THE COVER

Make/Model : NISSAN NV 200

Engine Capacity/Tonnage : 0.6 Tonnage

Driver Restriction : NA

Sum Insured : Market Value
 Off Peak Car : No

First Year of Registration : 2019
 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 - \$600 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 Bl Timah Road Singapore 589623 64654091 64694092 64694093

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

3 TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513

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

5 Tan Chong Motor Sales Add: 17 Lor 6 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 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).

0500610530

TAN CHONG CREDIT PTE LTD - SMY

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.

AIGSGMOBILEAPP