

# 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 .....	25/09/2021 12:47 (SGT)
Date of Accident .....	15/09/2021 01:00 (SGT)
Exact Location of Accident .....	Bedok Reservoir Rd, Singapore
Additional Location Information .....	BEHIND BLK 121 CARPARK
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	GBE9567Y
-----------------------------------	----------

### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	CONNIE TIMBER TRADING
Company Reg No .....	53183708D
Email Address .....	connieyeo2011@yahoo.com
Mobile Phone No .....	(Phone) +65-92224565
Alternative Phone No .....	+65-92224565

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Dyna
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private use
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 .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	1800048539-03
Cover Note Number .....	-

### DRIVER

Name of Driver .....	YEO KWEE TIN @ KOH PHECK CHUI
NRIC No .....	S1179922A

Date Of Birth .....	24/02/1956
Occupation .....	Outdoor
Date Of Driving Pass .....	26/03/1975
Driving experience .....	46 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-92224565
Alt. Phone Number .....	-
Email Address .....	connieyeo2011@yahoo.com
Address .....	BLK 626 BEDOK RESERVOIR ROAD
Address complement .....	-
Postcode .....	470626
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	OWNER
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 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

REFER TO ATTACH.

#### 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 .....	SMY2730C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-

Postcode ..... -  
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... VEHICLE B  
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 willful 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.

Reg. No. 1101790  
 Blk C28 Bedok Reservoir Road  
 #02-1500 Singapore 470228  
 NP: 92224565  
 Email: connisyeo2011@yahoo.com

*[Handwritten signature]*

25/9/21 12:20h

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**

REFER TO ATTACHED

Describe Circumstances of the Accident

I was making a 3 point turn, vehicle B was parked stationary on the left, when my vehicle moved forward at that time, my vehicle rear left collided with vehicle B front right portion.

REFER TO ATTACHED

Declaration

CONNIE T. JTB TRADING

I/we declare the foregoing particulars are true in every respect.

DR: 623 Bedford Street  
#02-1590 Singapore 470028  
HP: 93291605  
Email: conniejtb2011@yahoo.com

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**ACCIDENT REPORTING**

LORRY NO. GBE9567Y

DATE : 15SEP21

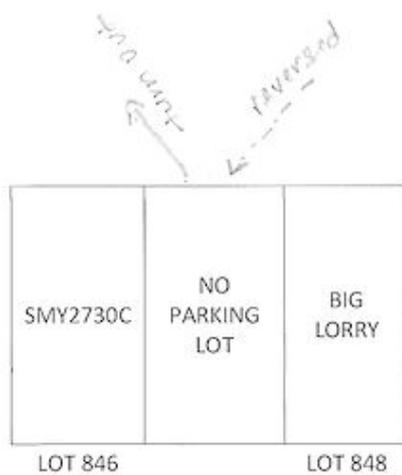
TIME : 1AM

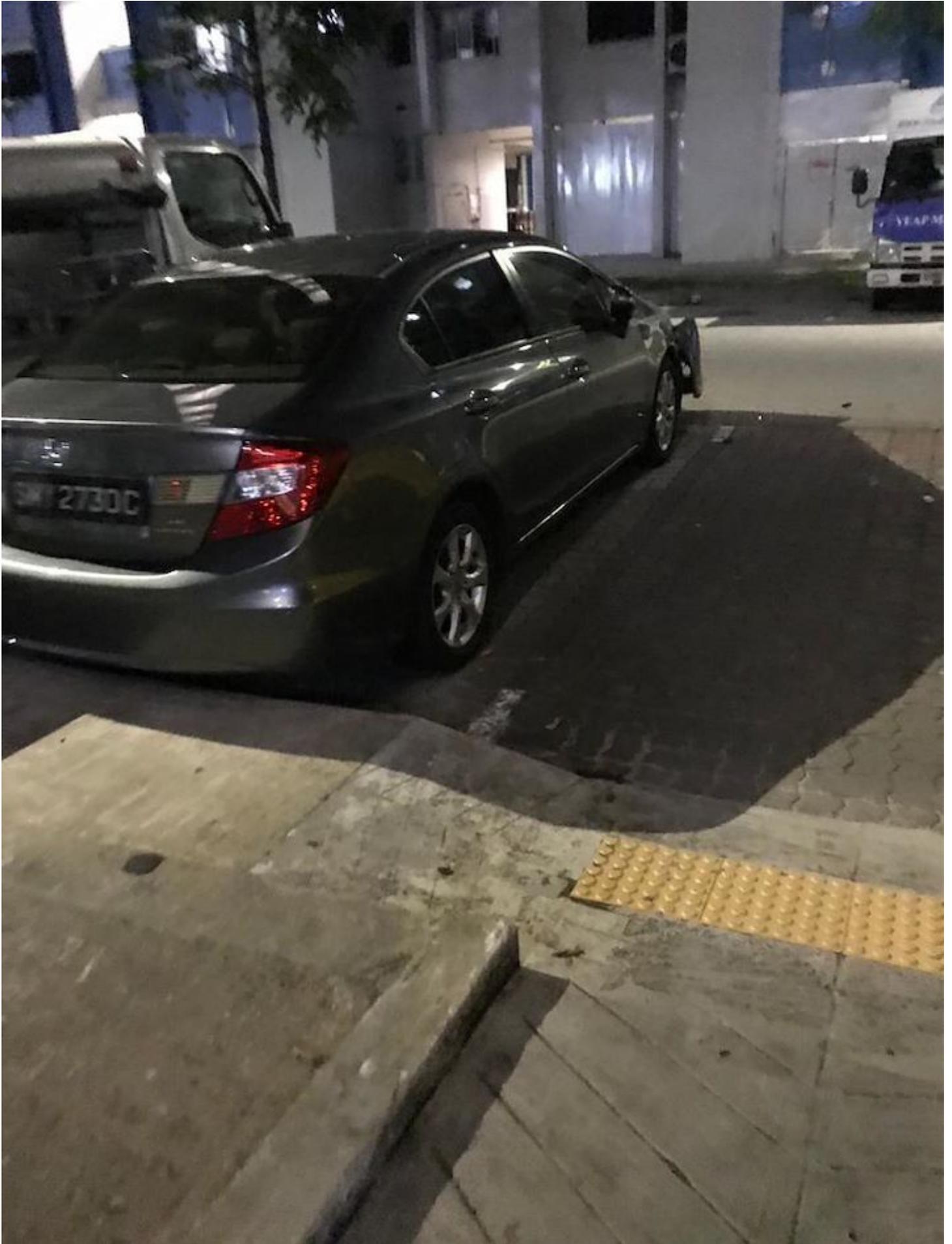
PLACE : BEDOK RESERVOIR ROAD, BEHIND BLOCK 121 CARPARK

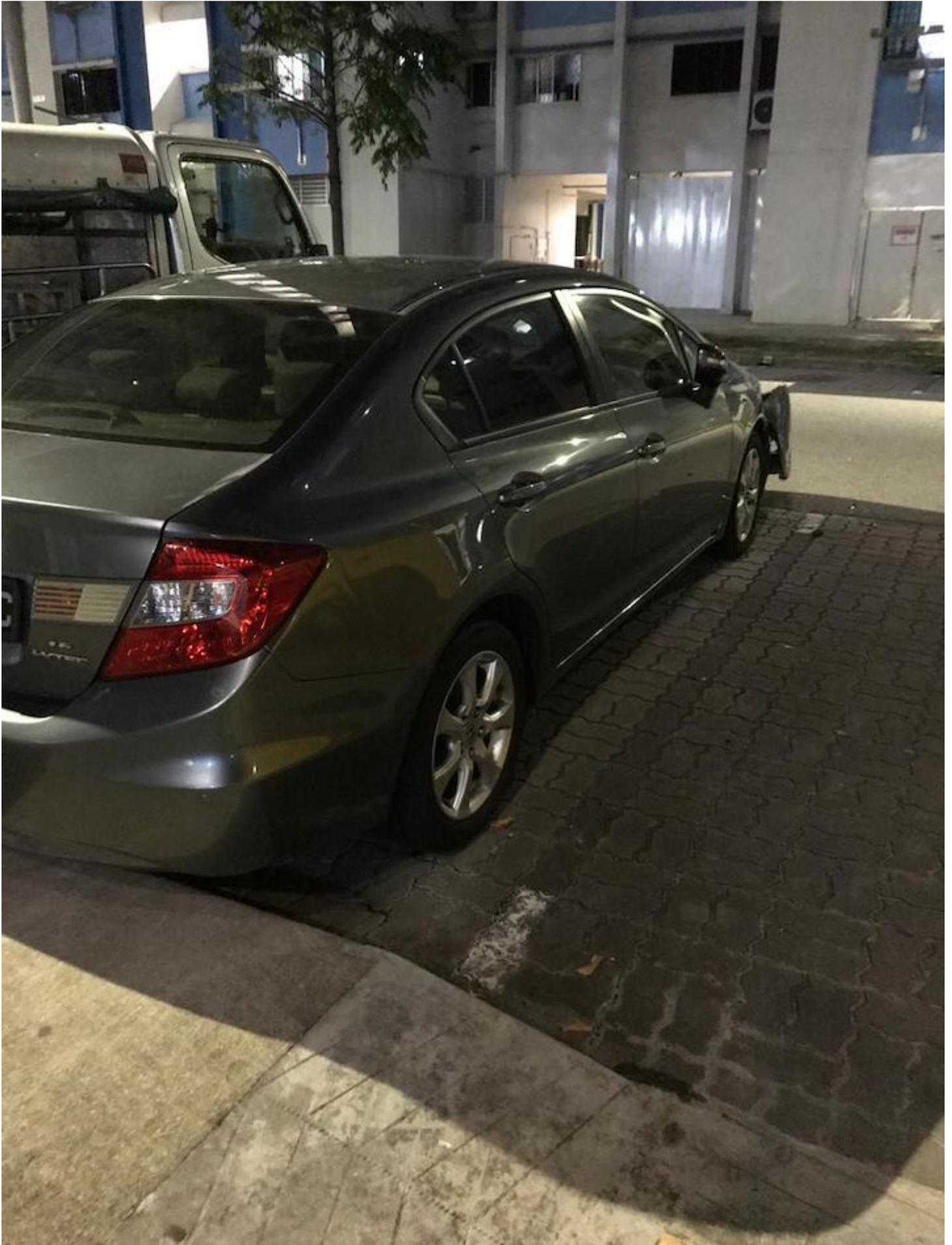
POLICY NO. 1800048539-03

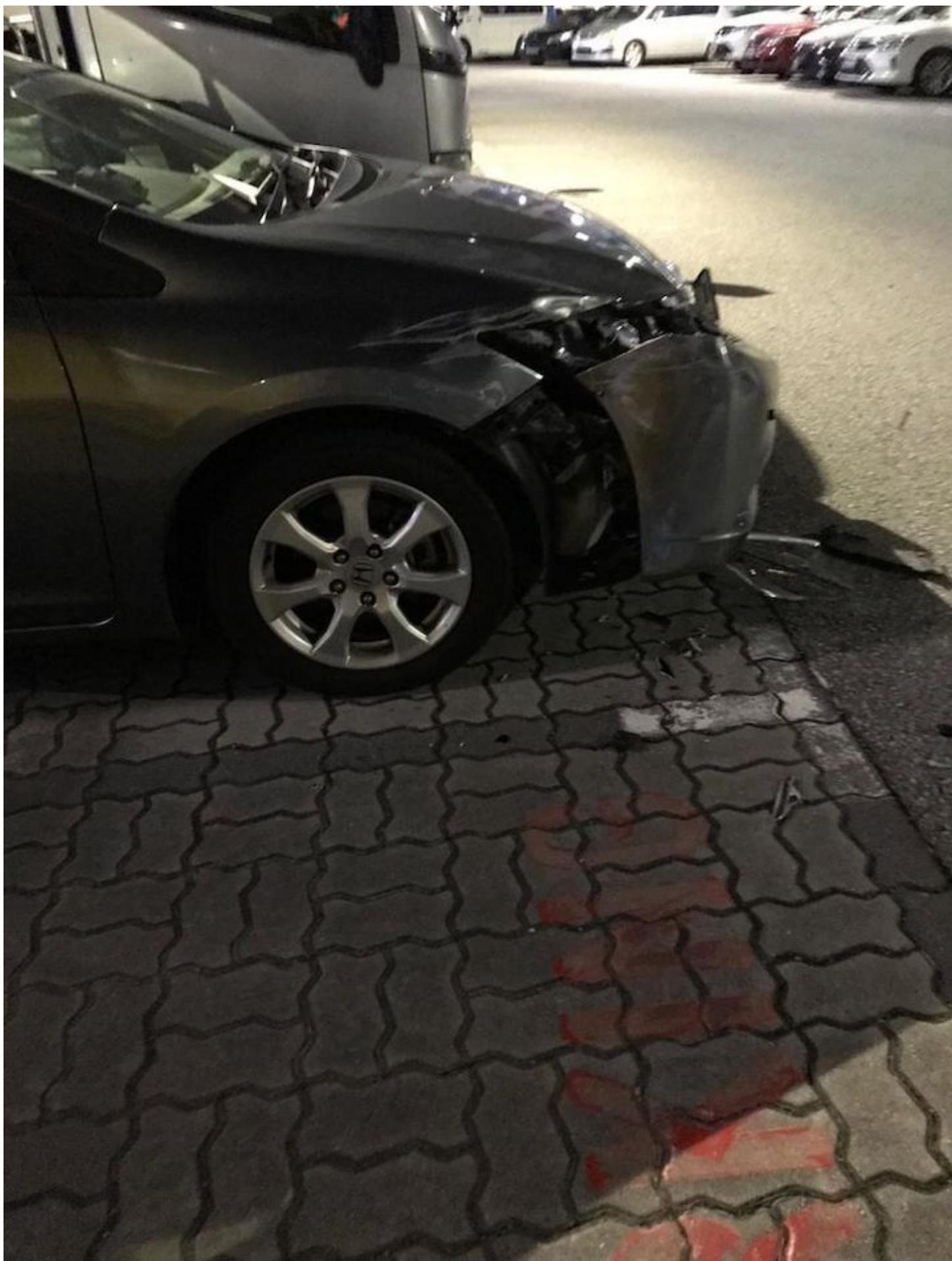
THE LIGHTINGS AT THE CAR PARK WAS DIMMED. I WAS MAKING THREE POINT TURN. WHEN DRIVING OFF AFTER THE TURN, THE REAR OF THE LORRY HIT VEHICLE SMY2730C.

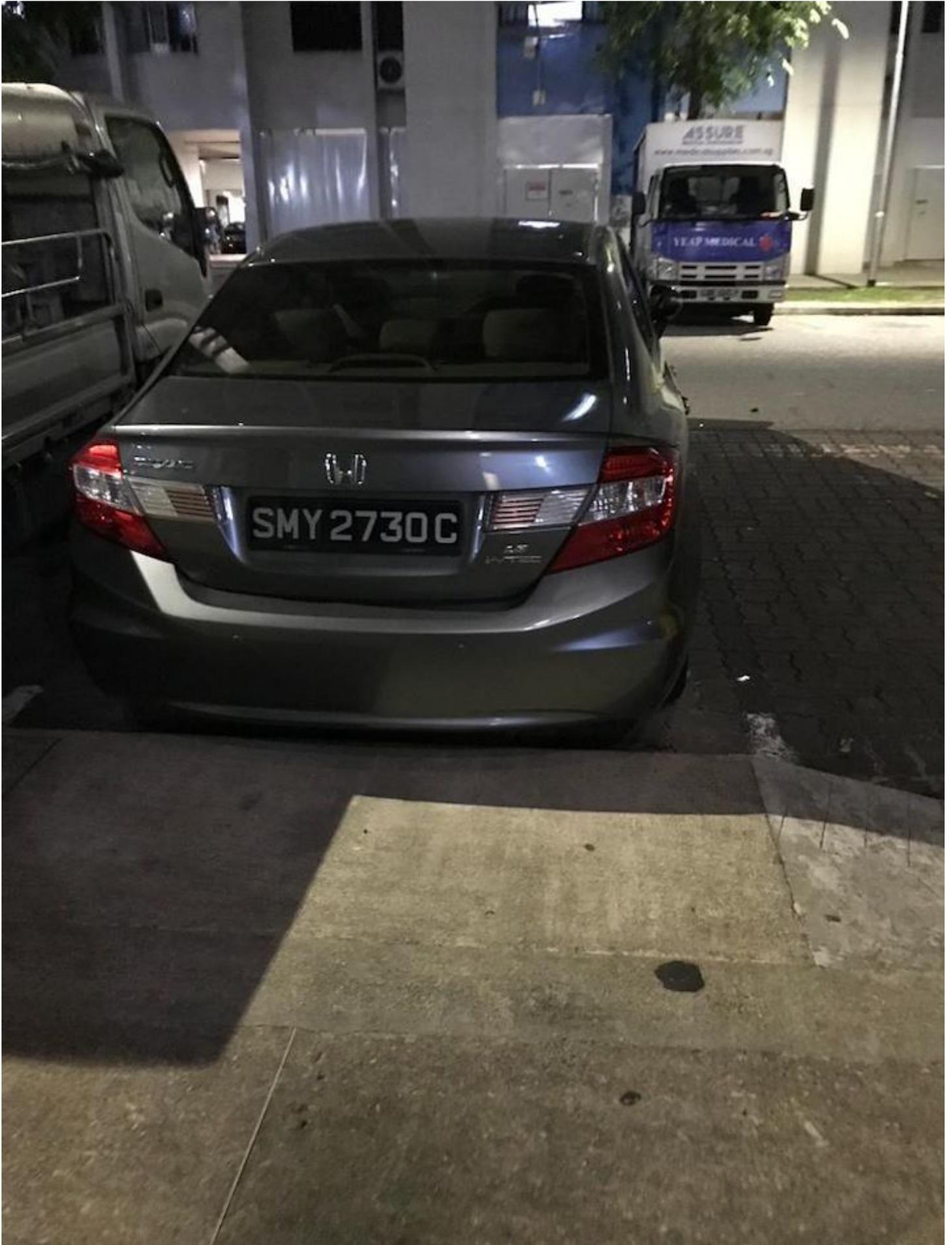
I LEFT MY CONTACT NUMBER ON THE VEHICLE'S WIPER FOR THE OWNER TO CONTACT ME SINCE IT WAS AROUND 1AM IN THE MORNING.

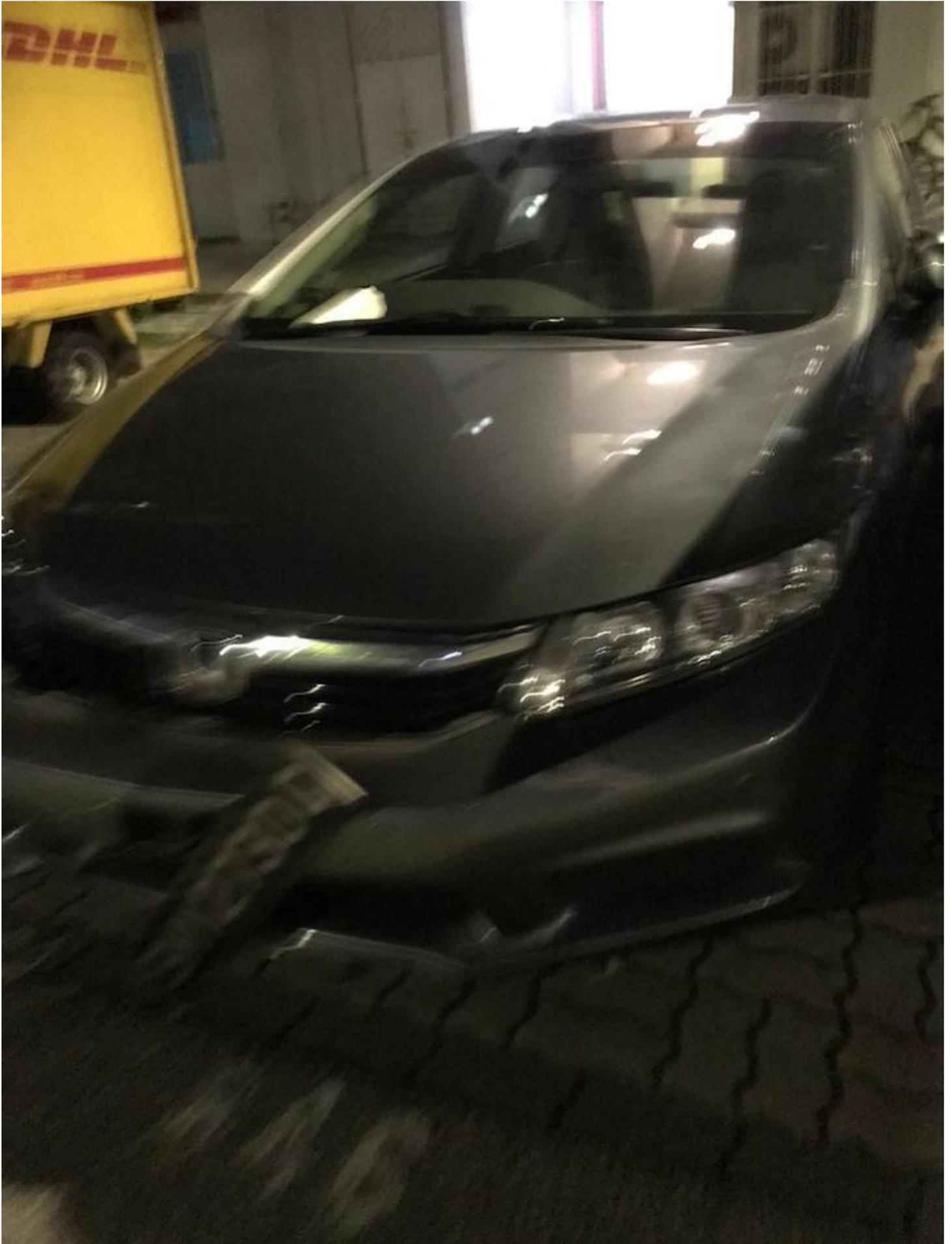


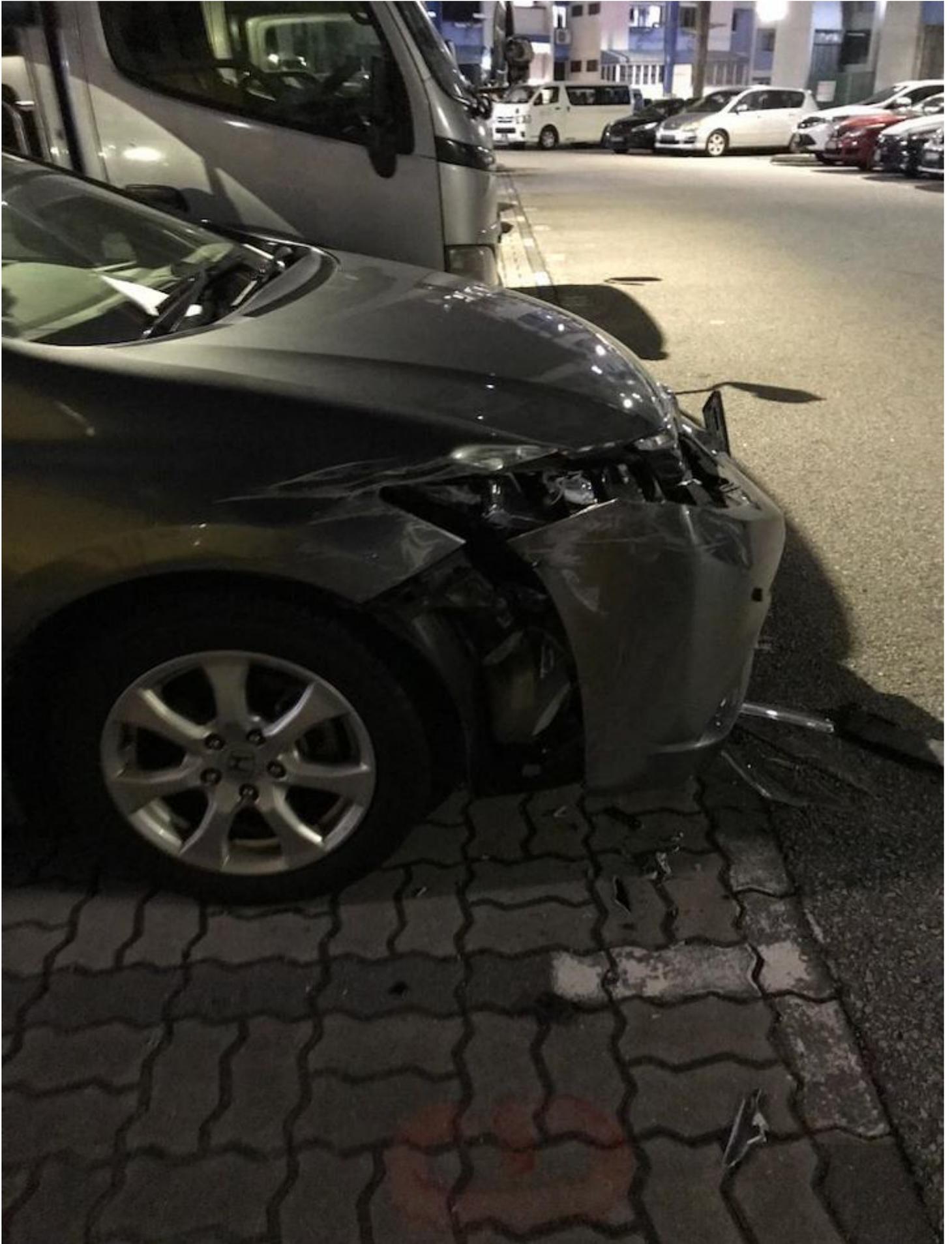


































# CERTIFICATE OF INSURANCE

## VEHICLE MAKE AND MODEL AND COMPULSORY VEHICLE

<b>Name of Policyholder</b>	: CONNIE TIMBER TRADING	<b>Vehicle No.</b>	: GBE9567Y
<b>Period of Insurance</b>	: 05 May 2021 To 04 May 2022	<b>Policy No.</b>	: 1800048539-03
<b>Engine No.</b>	: 1KD2603422	<b>Endorsement No.</b>	:
<b>Chassis No.</b>	: JTFAT35Y10K206337	<b>Issued Date</b>	: 03 May 2021

### ABOUT THE COVER

<b>Make/Model</b>	: TOYOTA DYNA 150 1.8 ton [Lorry]	<b>Sum Insured</b>	: Market Value	<b>First Year of Registration</b>	: 2016
<b>Engine Capacity/Tonnage</b>	: 1.82 Tonnage	<b>Off Peak Car</b>	: No	<b>Insuring with COE/PARF</b>	: Yes
<b>Driver Restriction</b>	: NA				

#### 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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 96 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

**Section 2**  
 Property Damage - \$0

**Windscreen** : \$100

**Named Driver and Excess** (where applicable)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).  
 For 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: HONG LEONG FINANCE LTD

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).

0504641000  
 ASSURE INSURANCE AGENCY  
 29 KELANTAN ROAD #01-111 KELANTAN COURT  
 SINGAPORE 200029  
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**  
 This computer generated document does not require a signature.

Assure Insurance Agency Pte Ltd

CONNIE TIMBER TRADING  
626 BEDOK RESERVOIR ROAD #02-1590  
SINGAPORE 470626  
TEL : 9222 4565  
EMAIL : [connieyeo2011@yahoo.com](mailto:connieyeo2011@yahoo.com)  
REG NO. 53183708D

23 September 2021

To Whom It May Concern

Dear Sir / Madam

**VEHICLE NO. GBE9567Y**

Please note that Yeo Kwee Tin, NRIC No. S1179922A is authorized to drive the lorry No. GBE9567Y during the date of accident.

Thank you.

Yours faithfully



Connie Yeo  
Sole Proprietor