

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 15/10/2021 11:12 (SGT)
Date of Accident 14/10/2021 08:10 (SGT)
Exact Location of Accident Singapore
Additional Location Information TAMPINES STREET 92
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GW8061S

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner VISION STATIONERY AND TRADING COMPANY
Company Reg No 27079400W
Email Address yewseng@visoffice.com
Mobile Phone No (Phone) +65-91091863
Alternative Phone No +65-91091863

VEHICLE PARTICULARS

Manufacturer Nissan
Model NV350 PANEL VAN 2.5 5MT 5DR
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 2488

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1800111702-03
Cover Note Number 05/09/2021 TO 04/09/2022

DRIVER

Name of Driver RAMLEE BIN RAHMAT
NRIC No S0066332H

Date Of Birth	04/05/1955
Occupation	Outdoor
Date Of Driving Pass	10/11/1986
Driving experience	34 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94783300
Alt. Phone Number	-
Email Address	yewseng@visoffice.com
Address	APT BLK 447 TAMPINES ST 42 #04-68 (S) 520447
Address complement	-
Postcode	-
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	Collided into Property
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 WITH ATTACHED.

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	SLA6391C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	GAN TIEN CHIEH
Contact Number	(Phone) +65-90010238
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.



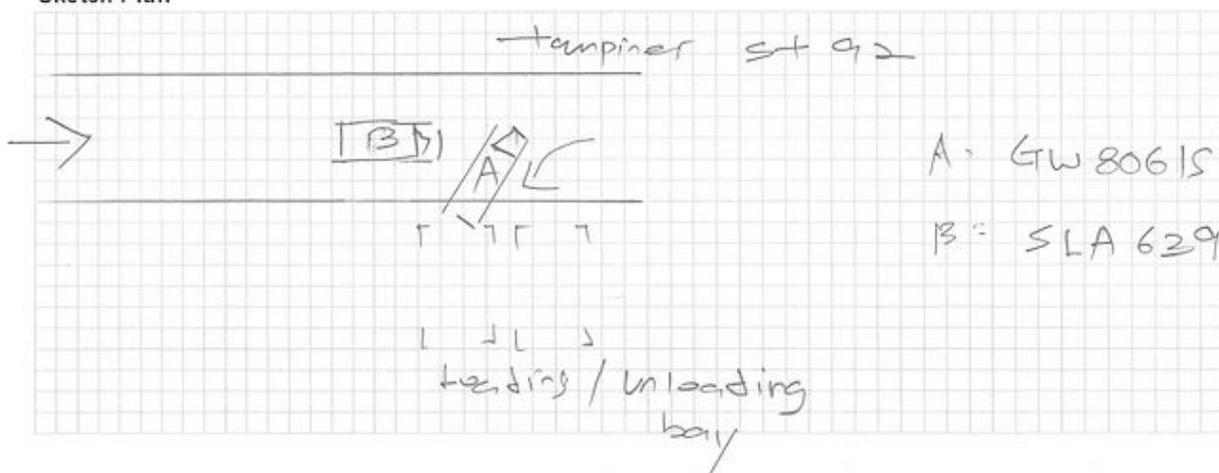
Policyholder's Signature / Date & Time

[Signature]

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

While I was doing reverse half way into loading
unloading bay at Tampines St 92.
Next moment, felt an impact from my left,
then realize was hit by car SLA6391K.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

[Signature] 15.10.21 10.28 AM

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

Witnessed by Reporting Centre
Personnel































AIG Asia Pacific Insurance Pte. Ltd
AIG Building
78 Shenton Way
#07-16

MOTOR ACCIDENT INTERVIEW FORM

NAME : Ramlee Bin Rahmat
VEHICLE NUMBER : GW80615
DATE/ TIME OF ACCIDENT : 14/10/2021 @ 0815h
PLACE OF ACCIDENT : tampines st 92
THIRD PARTY VEHICLE (IF ANY) : SLA 6351C

.....
WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

from tampines st 42 to tampines st 92

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?

No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

reverse hit

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder	: VISION STATIONERY AND TRADING COMPANY	Vehicle No.	: GW8061S
Period of Insurance	: 05 Sep 2021 To 04 Sep 2022	Policy No.	: 1800111702-03
Engine No.	: YD25418145A	Endorsement No.	:
Chassis No.	: JN1MC2E26Z0008112	Issued Date	: 18 Aug 2021

ABOUT THE COVER

Make/Model	NISSAN NV350 PANEL VAN		
Engine Capacity/Tonnage	1.5 Tonnage	Sum Insured	Market Value
Driver Restriction	NA	Off Peak Car	No
Person or Classes of Persons Entitled to Drive*		First Year of Registration	2016
		Insuring with COE/PAF	Yes

a) Any person who is driving on the Policyholder's name or with their permission.
 b) This Policy also indemnify the Policyholder or any authorized driver, third party claims for own liability.

You have to pay an additional sum of \$1,000 as "Excess and Deductible for Windscreen" (WDR) if you are of Full Automatic Drive license in Malaysia under the age of 23 and in Malaysia less than 3 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) or in connection with the Policyholder's service.
- 3) Use for social, domestic or pleasure purposes. This Policy does not cover a use for hire or reward, third party, hiring and... (other conditions apply) or in connection with... (other conditions apply) or in connection with... (other conditions apply).

Loss Of Use (7 Days) Commercial Auto

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 159), Section 9 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 must be carried out by one of the Approved Repairers. Within the first 3 years of the first registration of the Vehicle, the repairer must have a minimum of 10 years of accident repairs carried out at the Site Agent's workshop.
 For other Approved Reporting Centres/AIG Authorized Repairers, please contact our Customer Services Department at 1800-433-8233 (toll-free) or visit our website at www.aig.com.sg or call 416-89-5999 (toll-free). Simply search and download AIG 592 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. 159), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

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0320006000
 JOHN LEE JER LAN
 AIG BUILDING 78 SHENTON WAY #09-16
 SINGAPORE 079120
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

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