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§N0821CV0003 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 31/12/2021 12:55 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (31/12/2021 12:55 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding 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 31/12/2021 12:55 (SGT)
Date of Accident 29/12/2021 22:03 (SGT)
Exact Location of Accident Boon Lay Way, Singapore
Additional Location Information JUNCTION WITH JURONG EAST CENTRAL
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

2982

Vehicle Registration Number GBH3672A

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

HENG HUP HUAT FOODSTUFFS TRADING PTE LTD

2XXXXX464Z

charlesongjl@gmail.com

(Phone) +65-98079818

+65-98079818

VEHICLE PARTICULARS

INSURANCE COMPANY

Name of Insurance Company
Type of Coverage
Comprehensive
Fleet Policy
Policy Number
Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.
Comprehensive
No
2070060583-01

DRIVER

CC

Name of Driver CHONG TZE YING Passport No/FIN GXXXX395T

21/10/1994 Date Of Birth Outdoor Occupation 18/04/2017 Date Of Driving Pass 4 YEARS AND 8 MONTHS Driving experience Gender (Phone) +65-98079818 Mobile Number Alt. Phone Number charlesongjl@gmail.com Email Address 2 GAMBAS CRESCENT #03-09 Address Address complement 757044 Postcode No Is the driver the policyholder? 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 Collision - Head to Rear Type of Accident Clear Weather Conditions Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident No Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? DETAILS OF POLICE ACTION No Was the accident reported to the police? No Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO SKETCH PLAN ATTACHMENT(S) Yes Are accident photos available for attachment? Was there any video captured by Car Camera? No No Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNC2243X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-01
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode	
Insurance Company Name	10
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 Formmust 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)

l understand, acknowledge, agree and consent that :

- (a) My insurer , my w orkshop 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' law yers/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;

ZPOPRELIES

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- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

REMINA COH * PI Hepri

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

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Declaration

We declare the foregoing particulars are true in every respect.

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Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

Email: sm@idac.com.sg Tel no: 6555 6888 *If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week. Personal Particulars of Owner & Driver (Vehicle A) Date of Accident: 29/12/2021 (dd/mm/yy) Time of Accident: (24-HR-FORMAT) Vehicle No. : GBH 3672A Vehicle Make & Model / Engine (cc): Toyota Dyna Private Hire: (Y N Exact location of Accident: Boon Lay Way & Jurong East Central Junction Policyholder's Name / IC No.: Heng Hup Huat Foodstuffs Trading Pte Ltd 201736464Z Driver's Name / IC No.: Chong Tze Ying G2605395T (As Above) Driver's Contact No.: 98079818 Company Contact No / Owner Contact No: Driver's Address: 2 Gambas Crescent, #03-09, Nordcom Two, Singapore 757044 Owner Email address : CHARLESONGJL@GMAIL.COM Insurance Company : AIG Driver Email address : CHARLESONGJL@GMAIL.COM Relationship between Owner & Driver: (Please CIRCLE one only) Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: What do you wish to claim? (Please TICK one only) Own Insurance / Other Vehicle (The one you want to claim against) / Reporting (For Record Purpose) Exact purpose for which the vehicle Was being used at time of accident? Occupation (nature of job) Indoor/ V Outdoor Private use / Work purpose *No. of Passengers (Including Driver): *Passanger Name: Gender: *Passanger Name: Gender: Weather condition & Road conditions? (On the day of accident) ✓ Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Was there any video captured by your Car Camera? Yes / ✓ No Any Injuries: Yes / V No (If YES) Injured Person' Name: _____Injured Person in Which Vehicle: Injuries Sustain: Police Report filed: Yes / V No (If YES) Which Police Station: The Other Party(s) Details: 1. Driver's Name / IC No: TEO CHIN KWEI Vehicle No: SNC2243X Driver's Contact No: 96820976 ____Insurance Company : 2. Driver's Name / IC No (If Any): Vehicle No: Driver's Contact No: ____ Insurance Company: Contact No: *Independent Witness (If Any): Preferred Workshop Name: ______ Contact No: _____



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder

: HENG HUP HUAT FOODSTUFFS TRADING PTE LTD

Period of Insurance

: 02 May 2021 To 01 May 2022

Engine No.

: 1KD2784522

Chassis No. : KDY2318032685 Vehicle No. Policy No.

: GBH3672A : 2070060583-01

Endorsement No.

Issued Date

: 06 Apr 2021

ABOUT THE COVER

Make/Model

: TOYOTA DYNA 3.0 M

Engine Capacity/Tonnage: 1.65 Tonnage

Sum Insured : Market Value

First Year of Registration : 2018

Driver Restriction

: NA

Off Peak Car : No

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.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the 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

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 Trunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: ETHOZ Capital Ltd.

I/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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

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

0500718000 JG MOTOR AGENCY

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AIG.

80 CHANGI ROAD #04-06 CENTROPOD @ CHANGI