

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	23/05/2022 17:37 (SGT)
Date of Accident	21/05/2022 11:30 (SGT)
Exact Location of Accident	Thomson Ln, Singapore
Additional Location Information	TWDS THOMSON RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS1602C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	BIZLINK RENT-A-CAR PTE LTD
Company Reg No	200402911Z
Email Address	operations@bizlinkgroup.com.sg
Mobile Phone No	(Phone) +65-90126616
Alternative Phone No	(Office) +65-62856616

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	999993557
Cover Note Number	-

DRIVER

Name of Driver	LINCE SALIM
NRIC No	S8373632A

Date Of Birth	03/10/1983
Occupation	Indoor
Date Of Driving Pass	14/04/2008
Driving experience	14 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-83741868
Alt. Phone Number	-
Email Address	operations@bizlinkgroup.com.sg
Address	9 THOMSON LANE #22-06
Address complement	-
Postcode	297726
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 vehicle 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	CONNIE
Gender	Female

PASSENGER 2

Name	SHAWN
Gender	Male

PASSENGER 3

Name	SCARLETT
Gender	Female

PASSENGER 4

Name	FIE FONG
Gender	Female

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

I WAS ALONG THOMSON LANE, TURNING LEFT TO THOMSON ROAD. WHEN THE TRAFFIC LIGHT TURNED GREEN, I SLOWLY PROCEEDED TO MAKE MY LEFT TURN. VEHICLE IN FRONT OF ME APPLIED BRAKE TO STOP AND I ALSO STOP WHEN SUDDENLY, M/CAR (SKA77887G) CAME FROM MY REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE.

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	SKA7787G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-81183799
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

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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' 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;
 - (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.

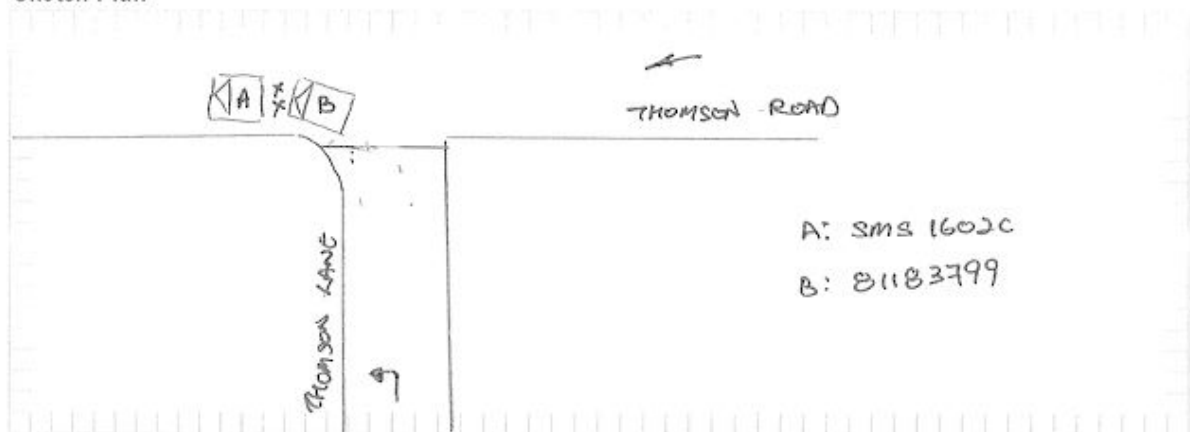


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

I WAS ALONG THOMSON LANE, TURNING LEFT TO THOMSON ROAD, WHEN THE TRAFFIC LIGHT TURN GREEN, I SLOWLY PROCEEDED TO MAKE MY LEFT TURN, VEHICLE IN FRONT OF ME, APPLIED BRAKE TO STOP AND I ALSO STOP WHEN SUDDENLY M/CAR SKA 77876 CAME FROM MY REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE.

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



















HOTLINE TEL: (65) 6419-3000

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1968

ROAD TRANSPORT ACT, 1987 (MALAYSIA) AND ROAD TRANSPORT (AMENDMENT) ACT 2019

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M 2.400

(The below excess is subject to GST)			
COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	REFER to ITEM 5
CERTIFICATE NO.	SMS1602C	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999993557	SUM INSURED	Market Value
		INSURING WITH COE/PARF	Yes
1) VEHICLE REGISTRATION NO.		SMS1602C	
2) NAME OF INSURED		BIZLINK RENT-A-CAR PTE LTD	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		01 July 2021	
4) DATE OF EXPIRY OF INSURANCE		30 June 2022	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*			
Any person who is driving on the Insured's order or with their permission.			
S\$1,200.00 Section 1 Excess is applicable for driver who is between 23 years to 69 years old with 2 years driving experience.			
Driver has to be between 23 years to 69 years old with minimum 2 years driving experience.			
<p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</p>			
6) LIMITATION AS TO USE*			
1) Use for social, domestic, pleasure purposes and business purposes of Insured 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.			
The Policy does not cover: 1) Use for livery, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.			
LOSS OF USE		Not included	
HIRE PURCHASE COMPANY		HONG LEONG FINANCE LTD	
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.			

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019.

Issued in Singapore: 12 Jul 2021

AIG Asia Pacific Insurance Pte. Ltd.

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 Liew Ooi Lin May
 AIG Building
 78 Shenton Way #01 Gems Room
 Singapore 079120

AUTHORIZED REPRESENTATIVE

ORIGINAL

SSPOEC