# **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 Actual 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.

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   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 04/10/2022 17:50 (SGT) Reported by Driver Date of Accident 03/10/2022 15:10 (SGT) Exact Location of Accident Waterloo St, Singapore Additional Location Information Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

No - Claiming third party

Commercial vehicle

Manual

2982

Vehicle Registration Number **GBK5242D** 

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner DO BETTER TRADING PTE LTD Company Reg No 201707281E Email Address doreen.chiam@easternharvest.com.sg Mobile Phone No (Phone) +65-97217405 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna Variant Exact purpose for which vehicle was being used at time of **Employment** 

accident Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 2070126346-02

DRIVER

Name of Driver Paul Liew Tien Soon NRIC No S8155150B Date Of Birth 18/02/1981 Occupation Outdoor

Date Of Driving Pass 05/01/2018 Driving experience 4 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-86788836 Alt. Phone Number Email Address doreen.chiam@easternharvest.com.sg Address Blk 636C Senja Road #18-339 Address complement Postcode 673636 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 Side Swipe Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement 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 the sketch plan. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident The video is with the owner. **DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number Vehicle Manufacturer	SLS6438P
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Tan Mei Ling Magdalen

NRIC No	S1503210C
Contact Number	(Phone) +65-91386820
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 Actual Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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.
- 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")

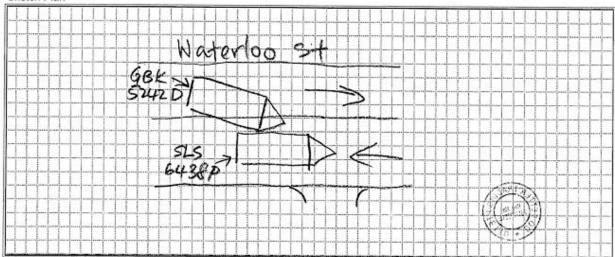
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) SOH

Sketch Plan



3rd Oct 2012 ovound 3:10 pm, I turn is arloo st from middle Road, When i was going of to the justion and there was no single sign while checking the side mirror and suddenly wed up and bang on my veolile side abor. The go against the traffic direction and hit on to body was after injured	to of an SUS 6434, Car SL o my V
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Declaration

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



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) 30H JIT HOON

2





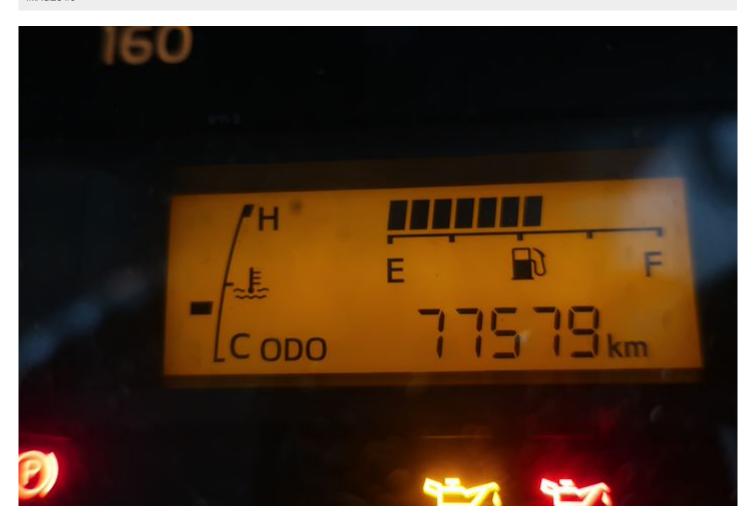


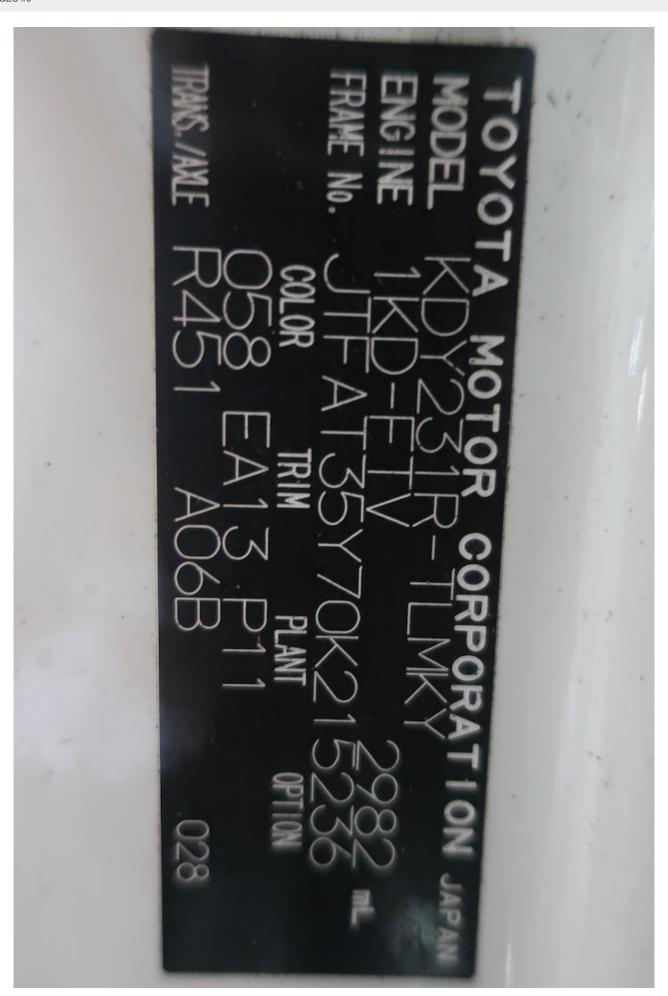












#### COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : DO BETTER TRADING PTE. LTD

Period of Insurance Engine No.

: 28 Aug 2022 To 27 Aug 2023

: 1KDB039191

Chassis No.

: JTFAT35Y70K215236

Vehicle No.

: GBK5242D

Policy No.

Issued Date

: 2070126346-02

Endorsement No.

: 26 Jul 2022 17:30

ABOUT THE COVER

Driver Restriction

Make/Model

: TOYOTA DYNA 150 1.8 ton [Lorry] Engine Capacity/Tonnage : 1.75 Tonnage Sum Insured : Market Value

: NA

Off Peak Car : No

First Year of Registration : 2020

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 \$553,000 as "Young and/or Inexpendenced 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 expendence

Age Condition : All Age Condition

Limitation as to use\* :

1) Use in connection with the Policyholder's business
2) Use for the camage of passenger (other than for here or reward) in connection with the Policyholder's business
3) Use for social, demestor or pleasure purposes. This Policy does not cover a) use for hire or reward, driwing tuition, driwing test, roong, pace-making, reliability that or speed-testing, b) use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle, and c) use for any purpose in connection with Motor Trade

Loss Of Use (10 Days) Commercial Auto

\* Umitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cop. 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 - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

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# APPROVED REPORTING CENTRESIAUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repaires. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop. For other Approved Reposition Centrestalfo, Authorised Repaires, please contact our 24-hour accident emergency hothre at +65 6338 5200. Alternatively, You may refer to AIG website www.aig.sg.cr AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

# IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

IWW 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, 1907 (Malaysia), Road Transport (Amendment). Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0502388000

TH INSURANCE SPECIALIST AGENCY

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

71 BUKIT BATOK CRESCENT #11-07 PRESTIGE CENTRE SINGAPORE 658071

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Yen Linn Elean Gob

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