



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 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	25/10/2022 12:00 (SGT)
Reported by	Driver
Date of Accident	21/10/2022 15:15 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	(CHANGI) BEFORE BEDOK RESERVOIR ROAD EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD6852Z
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	TS CHOICE D'COR & TRADING
Company Reg No	5XXXX732K
Email Address	abc8627e@gmail.com
Mobile Phone No	(Phone) +65-91478201
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	AIIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210023608-01

DRIVER

Name of Driver	CHIA TECK SOON
NRIC No	SXXXX647G
Date Of Birth	14/09/1961
Occupation	Outdoor

Date Of Driving Pass	02/08/1982
Driving experience	40 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91478201
Alt. Phone Number	-
Email Address	abc8627e@gmail.com
Address	BLK 402 BEDOK NORTH AVENUE 3 #10-281
Address complement	-
Postcode	460402
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	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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
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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20221021/7053 (TYPE OF COLLISION IS HEAD TO SIDE)

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY2841L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHIA TECK SOON
Gender	Male
Phone No	(Phone) +65-91478201
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	GBD6852Z
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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

Sketch Plan

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

KE (CHAUN) BEFORE BEAK PASARVOIR ROAD

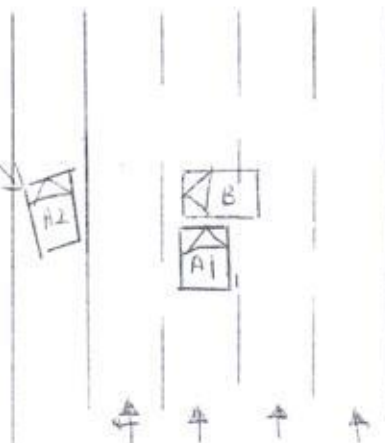
Witnessed by Reporting Centre Personnel

POED

Van A: GRD6852Z

Van B: GY2841 L

Road Shoulder



Describe Circumstances of the Accident

Handwritten notes in the accident description area:

- Refer
- 50
- TLW
- Police
- Refer A
- 11/2022/021/7053

Declaration

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



Policyholder's Signature / Date & Time

Handwritten signature of the driver.

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

Witnessed by Reporting Centre Personnel

Handwritten signature and date "26/10/2022" of the reporting centre personnel.



SINGAPORE POLICE FORCE



T/20221021/7053

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20221021/7053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/10/2022 20:49		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHIA TECK SOON			Address: 402 BEDOK NORTH AVENUE 3 #10-281 SINGAPORE 460402		
ID Type / ID No.: NRIC NO / S1512647G			Contact No.: Home/Office: Mobile: 91478201		
Nationality: SINGAPORE CITIZEN			Email: aaroniu3088@gmail.com		
Sex: Male	Age: 61	Date of Birth: 14/09/1961	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Driver		Driving Licence Information: Class:		Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/10/2022 15:15	Type of Location: Straight Road
Location: BEDOK RESERVOIR ROAD				
Weather: Raining		Road Surface: Wet		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBD6852Z	Lorry				Seriously Damaged	0
GY2841L	Van				Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20221021/7053

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20221021/7053

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHIA TECK SOON	ID No.	S1512647G
Related Vehicle	GBD6852Z (Lorry)	Contact No.	91478201
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	21/10/2022	Date	21/10/2022
No. of Days granted Medical Leave	04	Degree of	Slight

Brief Details.

On the stated time and venue, I was driving my vehicle GBD6852Z along PIE towards Changi Airport just before Bedok Reservoir Exit on lane 3. Suddenly a van (GY2841L) on lane 2 skidded and spun out of control and swerve to my lane colliding onto my vehicle. The impact was so huge, my vehicle veered to the left road shoulder. I alighted and took photos of the accident, EMAS and LTA came to the scene. The van (GY2841L) driver admitted that his van lose control and skidded onto my lorry (GBD6852Z). A few hours after the accident I felt pain and discomfort and consulted a doctor at clinic and was given 4 days mc.



**SINGAPORE
POLICE FORCE**



T/20221021/7053

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20221021/7053

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
21/10/2022 20:49

Classification Of Case:

3

SINGAPORE ACCIDENT STATEMENT

Accident Date: 21/10/22		Time: 15:15		(hh:mm) 24 hr format	
Location PIE (chang.) Before Bedok Reservoir Rd					
Vehicle Number GBD6852Z					
Insured Name TS Choice D'COR & Trading					
NRIC/FIN 52991732K			Contact Number 9147 8201		
Make Toyota		Model Dyna			
Are you claiming under your own insurance policy for repair to your vehicle?					
() Yes If No, Pls select: (<input checked="" type="checkbox"/>) Third Party () Reporting					
Insurance Company AIG					
Type of Policy () Comprehensive () Third Party Fire & Theft () TP Only					
Policy Number 7210023608-01					
Name of Driver Chia Teck Soon				() Same as Insured	
NRIC/FIN S1512647G			Contact Number 9147 8201		
Date of Birth 14/9/1961					
Driving Pass Date 02/08/1982					
Occupation () Indoor (<input checked="" type="checkbox"/>) Outdoor					
Gender (<input checked="" type="checkbox"/>) Male () Female					
Email Address abc4627e@gmail.com				() NO EMAIL	
Address of Driver 31K 402 Bedok North Ave 3 #10-281 (S) 460402					
Was driver an employee of the Insured's Company? () Yes (<input checked="" type="checkbox"/>) No					
If No, Relationship of the Driver with the Insured					
(<input checked="" type="checkbox"/>) Owner () Spouse () Friend () Relative () Children () Sibling					
Does the Driver Own Any Other Vehicle? () Yes (<input checked="" type="checkbox"/>) No					
If Yes, Vehicle Registration Number of Driver's Own Vehicle					
Insurance Company of Driver's Own Vehicle					
Weather Conditions () Clear (<input checked="" type="checkbox"/>) Raining () Others					
Road Surface () Dry (<input checked="" type="checkbox"/>) Wet () Others					
Was any foreign vehicle involved in this accident? () Yes (<input checked="" type="checkbox"/>) No					
Was anybody injured in the accident? (<input checked="" type="checkbox"/>) Yes () No					
If yes, injured detail Driver (GBD6852Z)					
Was there any video captured by Car Camera? () Yes (<input checked="" type="checkbox"/>) No					
Was the Accident reported to the Police? (<input checked="" type="checkbox"/>) Yes () No If yes attach police report					
DETAILS OF 2 nd party Name N/A Contact					
Veh B GY 2841L					
Veh C					
Veh D					
Veh E					
Veh F					

2 Driver only



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : TS CHOICE D'COR & TRADING
Period of Insurance : 24 Mar 2022 To 23 Mar 2023
Engine No. : 1KD2475069
Chassis No. : JTFAT35Y80K204181

Vehicle No. : GBD6852Z
Policy No. : 7210023608-01
Endorsement No. :
Issued Date : 24 Feb 2022

ABOUT THE COVER

Make/Model : TOYOTA DYNA 150 1.8 ton [Lorry]

Engine Capacity/Tonnage : 1.8 Tonnage

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2015

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 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; 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.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 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 - \$600 Theft - \$0 Flood Cover - \$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: Daimler Financial Services Africa & Asia Pacific 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).

0500656000

COWELL INSURANCE (AGENCY) P L

8 BURN ROAD #09-09 TRIVEX

SINGAPORE 369977 ANSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Kia Ling Lim