NATIONAL Assessment Centre	Services :	er rang	add the confirmation was strong to the confirmation of the confirm		
Daleln 09/12/22	Job description		Thate & Time Completed	Done	(),
REFNO NA/AIG 220 12311/03	SAS e-filing		•		
Youko GBM 77/R	E-mail (widow 8)	as, AP, 2hrs,	1		
60A OF/12/22 1710	i-Motor Clain	Form	:		
	i-Motor W/O				;•
OD/ (TP)/ Reporting Only	i-Photo Uploa	ded			
	Assessment/Sur	vey Report	1	ļ	
TP Insurer:	Ass't Report by	Fax / Hand t	0 Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tol:	Fax:	
TP Particulars: Veh No: 9	Q1002C.	. INC (
Owner / Driver: (Tel:)	
Policy No: () Perio	d: ()	Cover Type: ()	
Confirmed by : (Date:	Time:)	F - 7-40-10-10-10-10-10-10-10-10-10-10-10-10-10
			0%; P: 21-79%. F: 80	-100%]	
	arranty: YES ()		
Excess: (\$) Loading: \$1,000					
General Remarks:-		<u> </u>			
() Walk-In Customer's inform		fidential & St	nctly NO rate: di tepaner	The second secon	
() Total Loss Case : to e-mail Insurer		O / \ \ T	owing Co. (and a security of the second section in the second section is)
Drive-In ()/ Towed-In (); Invoice:	YES()/N	0(),1			
Remarks:- (1NC hotline: 6788 6616)			Date&Time Completed	Done	.by
1) Apply for Transport Allowance () / Con	urtesy Car ()				
2) QC Check / Post Repair Inspection	()				
3) Upload Resurvey Photo [Repair Cost > \$300	00] ()				
Injury:			79		
Date/fime Actions				rio de la compania d La compania de la co	
Date/Time Actions					
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	and the second s	a capat incommende daylor first garage seems (a cap	1		
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NA2003450		Invoice Pre	paration Checklist	. Ist Bill	Add Bi
and the annual series Property Libert Property is your		I) AR : Acciden	t Reporting (\$30); Assessment (\$100); INC	(\$30)	
Claimant's Particulars:-		3) TF : Towing	Fee	\$40/\$45	
Driver/Owner:		4) FT : Follow-7	Through Survey (Resurvey)	\$30	
Contact No:	to and topic the good topic time to a distance to a good time.	For claiming 6) TR : Re-inspe	against INC Only (wef 10 Jan 20	375 375	
Damaged Portion:	2002	7) N1 : Idac DA	+ SMRT Survey	2100	
		8) NTUC Addit			
QC Checked by (Engr-In-Charge):		*NS: Courtes	y Car / Tpt Allowasse Co-ordination	\$101	<u></u>
	a quality	*N7: Fost Re	pair Inspection	\$2.5	-
Auditors' Comments :-			ollect Excess Coordination P (Non INC) against INC	S20	
Çat_t;		9) N12: Idae N.		30	LIVE STE
Cat 2/3.		Invoice dated	Fue Charg	BANALI SO AL	first Arms office .
		0			

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
 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

- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudial policy liability.
 The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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 Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	Driver 08/12/2022 17:10 (SGT) North Bridge Rd, Singapore
DETAILS	OF OWN VEHICLE
Vehicle Registration Number	GBM771R
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	AJAX DELIVERY 2XXXXX838W
Manufacturer Model 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? Vehicle Category Transmission CC	Toyota Hiace - Employment No - Claiming third party Commercial vehicle Auto 2982
Name of Insurance Company Policy Number / Cover Note Number	AIG Asia Pacific Insurance Pte. Ltd. 7220124368
Name of Driver NRIC No Date Of Birth	AUNG KHIN SINT SXXXX419I

14/02/1994

Outdoor

Occupation

Date Of Driving Pass	30/11/2012
Driving experience	10 YEARS AND 1 MONTH
Gender	Male
Mobile Number	500 A 100 A
Alt. Phone Number	(Phone) +65-98319431
Email Address	
Address	aungikhinisint@gmail.com
Address complement	BLK 101 JURONG EAST ST 13
Address complement	#05-174
Postcode	600101
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	NO
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	DRIZZLING
Road Surface	Wet
	AAGT
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	
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)	0
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	-
Service and the service and th	-
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	V
Police Station Name	Yes
Police Station Phone No	Traffic Police
	(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	
PLS REFER TO THE POLICE REPORT	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTHER	VEHICLE PROPERTY 1
5-15 6. 6.1.1.1.	
Vehicle Registration Number	YQ1002C
Vehicle Manufacturer	-
Vehicle Model	_
Vehicle Variant	

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LIM YOCK JIN
NRIC No	SXXXX565I
Contact Number	(Phone) +65-96167926
Address	-
Address complement	
Postcode	_
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	-
No. Of Passanger (Including Driver)	-
ivo. Of rassenger (including briver)	-

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 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
- 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
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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
- (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
- (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.

AJAX LOSTS & TOT DTE LTD		
It! North Bridge Rd, 179098, Singapore, #04-27	$1 \wedge 1 \wedge$	^
UEN 2022I5838W	1/2/22	Hym 09/12/22
Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre
Sketch Plan	*	Personnel

A-GBMZZIR B-101002C Peninsula Plaza Coleman Ln

- 1				
PIS	reber	40	11.	police report: 7/2022/208/7056
	7	V 0	THE	100 11 de veport: 1/2022/208/2081
				1,700,6
				A .
aration				

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

AJAX LOSTS & TPT PTE LTD

111 North Bridge Rd, 179098, Singapore, #04-27

Actual Driver's Signature (if driver is not the policyholder)

/ Date & Time

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





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20221208/7056

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/12/2022 18:27		ade:	Vide Report No.:	Station Diary No.:			
Informant		lars					
Name of Informant: AUNG KHIN SINT			Address: 101 JURONG EAST STREET 13 #05-174 SINGAPORE 600101				
ID Type / ID No.: NRIC NO / S9474419I		91	Contact No.: Home/Office:	Mobile: 98319431			
Nationality: MYANMAR			Email: GANGOSUKEE@HOTMAIL.CO.UK				
Sex: Age: Date of Birth: Male 28 14/02/1994		Date of Birth: 14/02/1994	Type of Informant: Vehicle Owner				
Race: Burmese			Language: English	Institution / School Name:			
Occupation	:		Driving Licence Information: Class: 3	Date of Expiry:			

1989-0	mation of the Accide			
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident:	Type of Location: LOADING BAY
Location:		INO	08/12/2022 17:10	
NORTH BRID	GE ROAD			
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	7	raffic Volume:
Type of Collision	ON: I WAS DROPPED B	Y DELIVERY DRIVER AN	DIUTAN	Inyone conveyed by mbulance:

Vehicle No.	Type	Make	Model	Color	10-10	
SBM771R	Van	TOVOTA	THE RESERVE OF THE PARTY OF THE	COIO	Conditio	No of
ODW//IK Van	TOYOTA	HIACE	Green	Slightly	0	
			190		Damaged	

Details of Vo	ehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	T	
GBM771R AIG ASIA PACIFIC INSURANCE P	AIG ASIA PACIFIC INSURANCE DE			Expiry Date	
	LTD.	7220124368	28/10/2022	27/10/2023	





2 of 3

Report No. T/20221208/7056

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

CONTINUATION OF REPORT

	ans Injured: NIL		111		
venicle Owner			Use of	Pedestrian Cro	ssing: NA
Name	AUNG KHIN SINT			ID No.	
Related Vehicle	GBM771R (Van)				S9474419I
Hospital/Clinic	NIL			Contact No	98319431
				Class of Driving Licence &	Class: 3 Date of Expiry: NIL
Date	NIL		1	Expiry	
No. of Days gran Driver	ted Medical Leave	NIL	Date Degree o	NIL NIL	-
Vame		Department of the last of	_ Bogice (of NIL	
value	1 11/1 1/0 01/1 111		THE RESERVE OF THE PARTY		
	LIM YOCK JIN			ID No.	\$1226505L
	NIL NIL			ID No.	S1236565I
Related Vehicle	NIL			ID No. Contact No.	
Related Vehicle				Contact No. Class of Driving Licence &	
Related Vehicle lospital/Clinic	NIL		Date	Contact No. Class of Driving	96167926 Class: NIL

DELIVERY DRIVER HAD DROPPED HIS BEER BARREL DURING DELIVERY AND IT HIT MY VEHICLE. THE DRIVER DID NOT INFORM ME AND DENIED HITTING MY VEHICLE WHEN ASKED AND WAS ONLY CONFIRMED BY SECURITY GUARD OF THE BUILDING THAT IT WAS CAUSED BY HIM. UPON FURTHER ENQUIRY, DRIVER ADMITTED TO CAUSING THE DAMAGE ON MY VEHICLE AND APOLOGISED, FROM THERE, BOTH PARTIES EXCHANGED PARTICULARS FOR THE INSURANCE CLAIM AND I WILL BE PROCEEDING WITH THE INSURANCE CLAIM AGAINST THE





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

3 of 3 Report No. T/20221208/7056

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/12/2022 18:27
Officer In Charge Of Case: TP / TPIB / TAN JEOK LENG Contact No.: 65476151	Classification Of Case:
This report is lodged at Bukit Merah East NPO	C Kiosk 1



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : AJAX DELIVERY

Vehicle No. : GBM771R Period of Insurance : 28 Oct 2022 To 27 Oct 2023 Policy No. : 7220124368 Engine No. : 1TR2464418

Endorsement No. Chassis No. : TRH2005053027 **Issued Date** : 28 Oct 2022 21:41

ABOUT THE COVER

Make/Model : TOYOTA HIACE [Van]

Engine Capacity/Tonnage : 1.42 Tonnage Sum Insured : Market Value First Year of Registration : 2022 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 (nexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less

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 1960, Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

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 holline at +65 8338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from Apple App Store or Google Play Store.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

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 1960, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504710000

1F INSURANCE AGENCY PTE LTD

8 KAKI BUKIT AVE 4 #07-39 PREMIER @ KAKI BUKIT SINGAPORE 415875

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.