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 12/12/2022 14:22 (SGT) Reported by Driver Date of Accident 09/12/2022 20:20 (SGT) Exact Location of Accident Belilios Ln, Singapore Additional Location Information **BLK668 BELILIOS LANE CARPARK** Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number GBK122A INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner PAKMAN PACKAGING Company Reg No 44470100A Email Address ku_jeff@yahoo.com.sg Mobile Phone No (Phone) +65-97912421 Alternative Phone No VEHICLE PARTICULARS Manufacturer Toyota Model Hiace 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 - Reporting only Vehicle Category Private car Transmission Manual CC 2500 **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210138405-01

DRIVER

Name of Driver KU WEN JYE, JEFFREY NRIC No S7804592B Date Of Birth 14/02/1978 Occupation Indoor

Date Of Driving Pass 25/05/2005 Driving experience 17 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-97912421 Alt. Phone Number Email Address ku_jeff@yahoo.com.sg Address BLK17 JOO SENG RD #05-135 Address complement Postcode 360017 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 Collided into Parked Vehicle Weather Conditions Raining Road Surface Wet 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 PASSENGER 1 Name **CHANG KIANG PAK** Gender **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1**

PC8121B

Toyota

Hiace

Accident report SC1R22CC0004

Vehicle Model

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	GOPIANAND S/O KALIPERMAL
NRIC No	S8524986Z
Contact Number	(Phone) +65-81206112
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

- 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.
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- 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.
- 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.
- 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)

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 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

PARKED CAR

BLK 668

BELI LIOS LANE

CARPARK

CARPARY LOTS

1 W	as dri	ving o	nut of	the co	erpar	(10	when	1 accid	lentally	
rushed	against	the	front	right	of	the	vehicle	parked	beside	me.
										1000
			111							
							35-55-55m			
						100000				
					55150					

IWe declare the foregoing particulars are true in every respect.

PACY (44470100A) C) (44470100A) C)

Policyholder's Signature / Date & Time

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

WWW.

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : PAKMAN PACKAGING Vehicle No. : GBK122A : 13 Nov 2022 To 12 Nov 2023 Period of Insurance Policy No. : 7210138045-01

: 1KDB014074 Endorsement No. Engine No.

Chassis No. : JTFHT02P000249717 Issued Date : 09 Nov 2022 9:32

ABOUT THE COVER

Engine Capacity/Tonnage : 1.1 Tonnage Sum Insured : Market Value First Year of Registration : 2019 Driver Restriction : NA Insuring with COE/PARF : Yes Off Peak Car : No

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 heishe meets the specified age condition.

: TOYOTA HIACE [Van]

You have to pay an additional sum of \$\$\$3,000 as "Young and/or Inexperienced Driver Excess" ("VIDR") 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.

Make/Model

Age Condition : All Age Condition

Limitation as to use*

1) Use in connection with the Policyholder's business.
2) Use for connection with the Policyholder's business.
2) Use for the carriage of passenger (other than for him or reward) in connection with the Policyholder's business.
3) Use for social, domestic or pleasure perposes. This Policy does not cover a) use for him or reward, driving busine, driving test, racing, pace-making, reliability trial or speed-testing; b) use whist drawing a trailor 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

* 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 AND PROPERTY OF PROPER

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 must be carried out by one of our Authorised Repairers. 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 Agency Reporting Centres/AIG Authorised Repairers, pleade contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.sg or AIG SC Mobile App. Simply search and download "AIG SC" from Apple App Store or Google Play Store.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MERCEDES BENZ FINANCE CO LTD

If 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, 1969 (Malaysia).

CHAUTO SOLUTION

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

78 SHENTON WAY #01-K1 GEM ROOM, AIG BUILDING SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AUTHORIZATION LETTER

Date: 12/12/2022	
To Whom It May Concern:	
PAKMAN PACKAGING	44470100 A
	N JYE JEFFREY , IC S 7804592 B

to make accident report behalf of company .

Your Sincerely

Signature / Company Stamp



AIG Asia Pacific Insurance Pte. Ltd AIG Building 78 Shenton Way

MOTOR ACCIDENT INTERVIEW FORM

NAME	: KU WEN JYE JEFFARY
VEHICLE NUMBER	: C18K 122A
DATE/ TIME OF ACCIDENT	: 09/09/2022 2020 hrs
PLACE OF ACCIDENT	BUK GEST BELILIOS LANG CARPARK
THIRD PARTY VEHICLE (IF ANY)	: PC 8121 B
	AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?
Parked at the carp	park lot and healing home
POLICE CONDUCT ANY BREATHE-ANALY	KS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC SER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?
WHAT IS THE TYPE OF COLLISION AND T	THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?
WERE YOU OR YOUR PASSENGER/S INJ FOR INVESTIGATION?	URED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
N.A.	
Delt	
NAME: KU WEN JYE JEFFR	EY
I AFFIRMED THE ABOVE INFORMATION	I IS GIVEN TO MY BEST KNOWLEDGE

	UNDERTAKING
AN MEN IYE	TEFFREY, (NRIC No. \$ 18045828), hereby confirm that the at lodged by me on 12/12/1422 at 1345 hours pertaining to
Singapore Accident Statemer	at lodged by me on /2//2/22 at 1345 hours pertaining to
the accident involving moto	r car Reg. No: GBK 122A in which I was the driver are true and
	nowledge, information and belief.
	C207220 28
i, Ku Wan Jya	JEFFREY (NRIC No. \$1904572B), am the owner of motor car
Reg. No: GBK 1221	JEFFREY (NRIC No. \$1804572B), am the owner of motor car and the policyholder of policy no. 1210138045~01
We acknowledge that the in	surer, AIG Asia Pacific Insurance Pte. Ltd. is not liable under the contract of
insurance if there is (a) a b	reach of policy terms and conditions and/or (b) cover under the policy is
excluded due to the operation	on of an exclusion(s) under the policy terms and conditions.
In the event that an unrelate	d/unreported third party property or injury claim arises or evidence emerges
that:	
a) there is a breach of p	policy terms and conditions; and/or
b) Cover under the pol	icy is excluded due to the operation of an exclusion(s) under the policy terms
and conditions,	
we irrevocably jointly and se	everally undertake to absolve my insurer from all liability under the contract
of insurance and we further	jointly and severally undertake to re-pay any and all sums paid by my insurers
pursuant to the contract of i	nsurance upon my /our receipt of a written demand from the insurers.
Signature	-
Name of Policyholder	:
NRIC No.	1
Date	<u> </u>
	10 DA
Signature	: Jack
Name of Driver	KN MEN JAE JULGEREL
NRIC No.	3 78045928
Date	12/12/2022

















