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# SINGAPORE ACCIDENT STATEMENT

### 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

- 9. Intrinsict of the insurance of this Form by insurance companies is not an admission of 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.

ACCIDEN'	T STATEMENT
Date of Submission Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	01/03/2023 17:36 (SGT) Driver 26/02/2023 21:20 (SGT) Braddell Rd, Singapore TOWARDS CTE Singapore
DETAILS OF	F OWN VEHICLE
Vehicle Registration Number	GBF7949L
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes MAJESTIC FRUITS PTE LTD 2XXXXX347N alfredcheong20@gmail.com (Phone) +65-90294641
VEHICLE PARTICULARS	
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 - Reporting only Commercial vehicle Manual 2982
INSURANCE COMPANY	

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7220015717

### DRIVER

Name of Driver ALFRED CHEONG NRIC No SXXXX438A Date Of Birth 18/02/1999 Occupation Outdoor

Date Of Driving Pass	13/03/2020
Driving experience	2 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90294641
Alt. Phone Number	-
Email Address	alfrodchoona?()@amail.com
Address	alfredcheong20@gmail.com BLK 224 ANG MO KIO AVENUE 1 #07-551
Address complement	BLK 224 ANG MO KIO AVENUE 1 #U7-551
Postcode	- FC0004
Is the driver the policyholder?	560224
	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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet
	wet
OTHER INFORMATION	
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)	1
Has the driver been approached by unknown person(s)	2
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	
original language used in the statement	-
DETAILS OF POLICE ACTION	
DETAILS OF FOLIOE NOTION	
Was the assidant reported to the police?	
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 ATTACHMENT	
ATTACHMENT(S)	
Are accident photos available for attachment?	Voc
W H	Yes
was there any video captured by Car Camera?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
V-L-1 D	
Vehicle Registration Number	SMQ2516Y
Vehicle Manufacturer	
Vehicle Model	_
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	THNG JOO SENG
NRIC No	SXXXX955G

SXXXX955G

Contact Number	(Phone) +65-98573071
Address	-
Address complement	-
Postcode	-
Insurance Company Name	=
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number	SLQ981L
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	:-
Vehicle Category	Private car
Name of Driver	VICTOR HENG FOK LIANG
NRIC No	SXXXX892E
Contact Number	(Phone) +65-97240429
Address	-
Address complement	
Postcode	-
Insurance Company Name	_
Nature Of Damage	2
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	
	1.T.

### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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. The report will be forw arded 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknow ledge, 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.

Sketch Plan

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

- Refer Attach

Describe Circumstances of the Accident	
— Refer Attach —	

## Declaration

We declare the foregoing particulars are true in every respect.

×

Policyholder's Signatur Time A

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

Witnessed by Reporting Centre
Personnel

Accident Date: 26/02/2023

Accident Time: 9.20pm

Location: Braddell Road

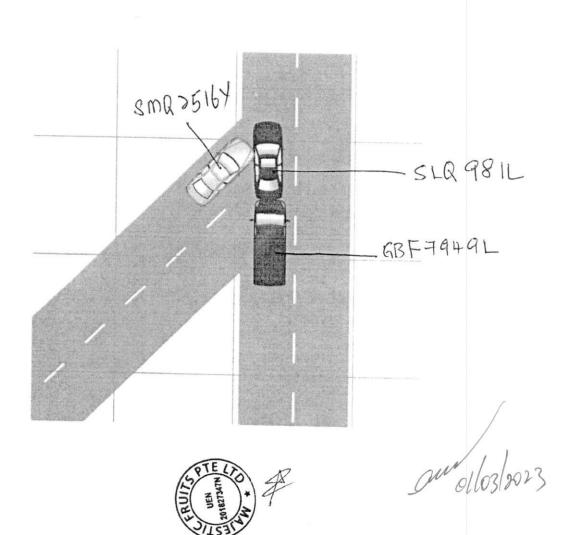
Vehicle

A) GBF 7949 L

B) SLQ 981 L

C) SMQ 2516 Y

On 26/02/2023, 9.20pm I was traveling along Braddell road towards CTE on the extreme left lane. In front of my car was SLQ 981 L. When I was about to reach the exit of Bishan flyover, I noticed a car SMQ 2516 Y was exiting from the Bishan flyover without stopping on the stop line and collided on to SLQ 981 L. I horned when I notice before the collision between SLQ 981 L and SMQ 2516 Y but SMQ 2516 Y did not stop and proceeded and hit onto SLQ 981 L. I also applied emergency brake, due to wet floor on raining day, my car slipped and collided onto SLQ 981 L.





	SINGAPORE ACCIE	DENT STATEMENT		
100 AF 105 AF 107	BASIC INFO	DRMATION		
Date of Accident:	26 FeB 2023	Time of Accident:	9 20 PM	
Exact Location:	Braddel	I Road Towards CT	12	
	DETAILS OF O	WN VEHICLE		
Vehicle Registration No.	GB= 7949L	NRIC / FIN / Passport no:	59924438A 7	
Name of Registered Owner:			UEN ( 20182734 H)N	
Owner's Email:	PHERROCHBONG 20		01110	
Owner's Address:		Ove 1 10-763		
Vehicle Make:	Toyota/Hace ox 3.0m		HIGGE DX 3.0 M	
Engine Capacitty (cc):	2982 cc	Transmission:	Auto / Manual	
Type of Claim:	Own Damage / Third Part			
Vehicle Category:	Private / Commercial / Mot	Private / Commercial / Motorcycle / Private Hire		
Name of Insurance Co:	Ala			
Type of Policy:		arty / Third Party, Fire & Thef	)	
Policy Number:	7220015			
Name of Driver:	PIPRED CHEON	CONTRACTOR OF THE PROPERTY OF	Miles Carron	
NRIC / FIN / Passport no:		Date of Birth:	same as	
Occupation:	59926438 A Indoor / Outdoor		18 02 1999	
Contact Number:	90294641	Driving Pass Date: Gender:	Male / Female	
Address:			Male / Female	
Relationship with Owner:	Owner / Employee / Spouse			
Translater Name:	Owner / Employee / Spouse	7	JET	
Translater Contact no:		Translater NRIC:		
Translater Contact no:	CENERAL INFORMATIO	Translater email:		
Type of Collision:	GENERAL INFORMATION			
Weather Condition:	Chain collision) Side Swip	<del></del>		
Video available:	Clear (Raining / Others:	Road Surface:	Dry (Wet	
	Yes (No)			
Was anybody injured?	Yes (No	Police Report Made?	Yes (No)	
No. of passenger onboard (in	icluding driver):			
	DETAILS OF OT	THER VEHICLE	7	
	Vehicle 1	Vehicle 2	Vehicle 3	
Vehicle Registration No:	SMQ 2516Y	SLQ 981 L		
Vehicle Make / Model:		Toyota PRIUS HYPRID		
Name of Driver:	THNG JOO SENG	VICTOR HANG POK LAANG		
NRIC / FIN / Passport no:	516159656	57400892E		
Contact Number:	9857 3071	9724 0429		
Name of Insurance Co:		1111		
The state of the s	DETAILS OF	F WITNESS		
Name:		Contact Info:	Î .	
	DETAIL O OF THE		VAC ASSESSMENT OF THE SECOND O	
	DETAILS OF INJ		Davas 2	
Name / in which vehicle?:	F elsuli I	Person 2	Person 3	

Signature of Driver

Date and time



## **CERTIFICATE OF INSURANCE**

## COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder

: MAJESTIC FRUITS PTE LTD

Period of Insurance

: 16 Mar 2022 To 15 Mar 2023

Engine No. Chassis No. : 1KD2666377 : KDH2015024900 Vehicle No.

: GBF7949L

Policy No. Endorsement No. : 7220015717 : 000000000434397

**Issued Date** 

: 28 Feb 2022

#### **ABOUT THE COVER**

Make/Model

: TOYOTA HIACE [Van]

Engine Capacity/Tonnage: 1.43 Tonnage Driver Restriction

: NA

Sum Insured: Market Value Off Peak Car : No

First Year of Registration : 2017

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 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\*

Use in connection with the Policyholder's business.
 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.

Loss Of Use (7 Days) Commercial Auto

\* 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

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 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: United Overseas Bank Limited

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 (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).

0504710000

1F INSURANCE AGENCY PTE LTD

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

68 KAKI BUKIT AVE 6 #01-22 ARK@KB

SINGAPORE 417896

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

## **Enquire Vehicle Transfer Fee**

## **Vehicle Details**



Vehicle No. GBF7949L

Make / Model

TOYOTA / HIACE DX 3.0 M Vehicle Type: Vehicle Attachment 1: A50 - Goods (Closed) Van/Van Panel (Delivery) No Attachment Vehicle Scheme : Chassis No.: Normal KDH2015024900 Propellant: Engine No.: Diesel 1KD2666377 Motor No.: Engine Capacity: 2982 cc Power Rating: Maximum Power Output: Maximum Laden Weight: Unladen Weight: 3225 kg 1800 kg Year Of Manufacture: Original Registration Date: 2016 16 Mar 2017 Lifespan Expiry Date: COE Category: 15 Mar 2037 C - Goods Vehicle & Bus PQP Paid: COE Expiry Date: \$45,108.00 15 Mar 2027 Road Tax Expiry Date: PARF Eligibility Expiry Date: 15 Mar 2023 Inspection Due Date: Intended Transfer Date : 15 Mar 2023 02 Mar 2023 CO2 Emission: CEV/VES Rebate Utilised Amount: 212.00 (g/km) CO Emission: HC Emission: NOx Emission: PM Emission: