

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 First Submission	19/09/2024 16:26 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	19/09/2024 13:26 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	GOLDHILL PLAZA CARPARK ENTRANCE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ7870T
-----------------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG AI PUNG
NRIC No	S1529510D
Email Address	felicianap88@gmail.com
Mobile Phone No	(Phone) +65-96688918
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Gla180
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1332
Vehicle Fuel	-
First Registration Date	29/02/2024
Chassis no	W1N2477842J5868642
Effective Date/Time of Ownership	29/02/2024 00:00 (SGT)

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7240023684

DRIVER

Name of Driver	NG AI PUNG
NRIC No	S1529510D
Date Of Birth	11/11/1962
Occupation	Indoor
Driving Pass Date	16/12/2019
Driving License Pass Class	3A
Driving License Validity	Valid
Driving experience	4 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96688918
Alt. Phone Number	-
Email Address	felicianap88@gmail.com
Address	BLK 613 YISHUN STREET 61 #10-67
Address complement	-
Postcode	760613
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

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)	2
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	-

PASSENGER 1

Name	SOPHIA KOH
Gender	Female

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

REFER TO ATTACHMENT

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	REFER KERLYN ONG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJX7507P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

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 reputate 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 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.
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.

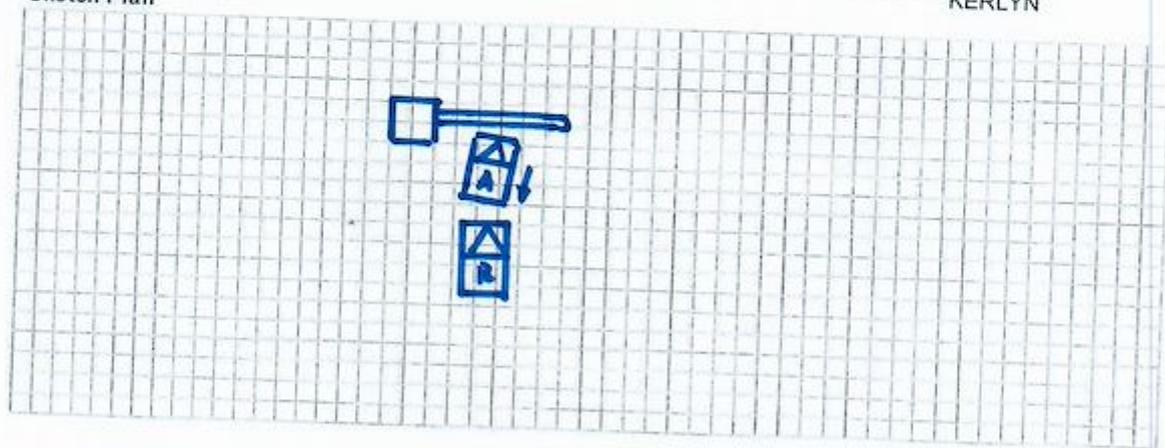
[Handwritten Signature]

Policyholder's Signature / Date & Time
19/09/2024 1519

Kerlyn Ong Kai Li
DID: 6771 4420 HP: 9186 5113
Email: kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Reporting Centre
Personnel **KERLYN**

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

Sketch Plan



Describe Circumstances of the Accident

I WAS DRIVING MY CAR (SMZ7870T) AT GOLDHILL PLAZA CARPARK ENTRANCE.
THE GANTRY WASNT WORKING, SO I TRIED TO REVERSE MY CAR TO RE-TRY.
WHILE I WAS REVERSING, MY CAR HAD SWERVED BACKWARD AND COLLIDED ONTO
VEHICLE B (SJX7507P) FRONT PORTION.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time 19/09/2024 1519

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

Kerlyn Ong Kai Li
DID: 6771 4420 HP: 9186 5113
Email: kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Witnessed by Reporting Centre
Personnel KERLYN





























POLICY SCHEDULE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Policy No. : 7240023684
 Period of Insurance : 29 Feb 2024 to 28 Feb 2025

Issued Date : 26 Feb 2024 11:08

ABOUT THE POLICYHOLDER

Name of Policyholder : NG AI PUNG
 Address : 613 YISHUN STREET 61
 #10-167
 SINGAPORE 760613
 Occupation/Nature of Business : Homemaker/Housewife

ABOUT THE VEHICLE

Registration No. : SMZ7870T
 Chassis No. : W1N2477842J586864
 Seating Capacity : 5
 Make/Model : MERCEDES BENZ GLA180
 Hire Purchase Company/Employer's Loan : Mercedes-Benz Financial Services Singapore Ltd.
 Engine Capacity/Tonnage : 1,332.00 CC
 Engine/Motor No. : 28281480113864
 Body Type : SUV
 First Year of Registration : 2024

ABOUT THE COVER

Sum Insured : Market Value
 Driver Restriction : NA
 Person or Classes of Persons Entitled to Drive :
 a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 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 S\$53,000 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.
 Off Peak Car : No
 Insuring with COE/PARF : Yes
 Age Condition : All Age Condition
 Mileage Condition : Unlimited Mileage
 Limitation as to use :
 Use only for social, domestic and pleasure purposes and for the Policyholder's business.
 This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.
 Mileage Declaration : km

Other Key Policy Benefits :

Act of God, Windscreen / Windows, Dealer + AIG Authorised Workshops, New For Old (36 months), Medical Reimbursement- \$1000, Loss of Use 2000cc, Strike, Riots and Civil Commotions, PA to Authorised Driver / Unnamed Passengers- \$10000, PA Insured- \$100000, Fixture and Accessories (Cosmetic)- \$5000, Solar Film- \$1150, Personal Effects- \$1000, Key Replacement Cover- \$2000, Loan Protection, In-Car Camera Excess Waiver, Glass Roof/ Moon Roof/ Sun Roof/ Panoramic Glass Roof

EXCESS

Section 1
 Fire - \$0 Own Damage - \$800 Theft - \$0 Theft Outside Singapore Cover - \$0
 Flood Cover - \$800

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver

NG AI PUNG - \$800 (Own Damage), \$800 (Flood Cover)

PREMIUM

Premium	: \$	1,992.99
GST (9%)	: \$	179.37
Total	: \$	2,172.36

Your Premium includes the following discount(s):
 Safe Driver Discount - 5.00%, No Claim Discount - 30%

1007823734/A/Cx/DocId