

## 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 .....	06/11/2024 15:26 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	05/11/2024 17:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	17 FERNVALE CLOSE B1 CARPARK
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMC1869J
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LIM SIA SEE ERNEST (LIN ZHENGXI ERNEST)
NRIC No .....	S7208602C
Email Address .....	ernest.limss@gmail.com
Mobile Phone No .....	(Phone) +65-96271855
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Mercedes
Model .....	EQC 400
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 .....	0
Vehicle Fuel .....	-
First Registration Date .....	26/05/2023
Chassis no .....	W1K2938902F0593096
Effective Date/Time of Ownership .....	26/05/2023 00:00 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7230049602-01

#### DRIVER

Name of Driver .....	LIM SIA SEE ERNEST (LIN ZHENGXI ERNEST)
NRIC No .....	S7208602C
Date Of Birth .....	15/03/1972
Occupation .....	Indoor
Driving Pass Date .....	28/02/1991
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	33 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96271855
Alt. Phone Number .....	-
Email Address .....	ernest.limss@gmail.com
Address .....	17 FERNVALE CLOSE #10-33
Address complement .....	-
Postcode .....	797478
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 .....	Collided into Parked Vehicle
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) .....	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? .....	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? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SKP288Y
Vehicle Manufacturer .....	BMW

Vehicle Model .....	420i
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	CHONG YIN PENG DENISE NATALIE
Passport No/FIN .....	SXXXX136D
Contact Number .....	(Phone) +65-98786890
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

# SKETCH PLAN

## IMPORTANT NOTICE

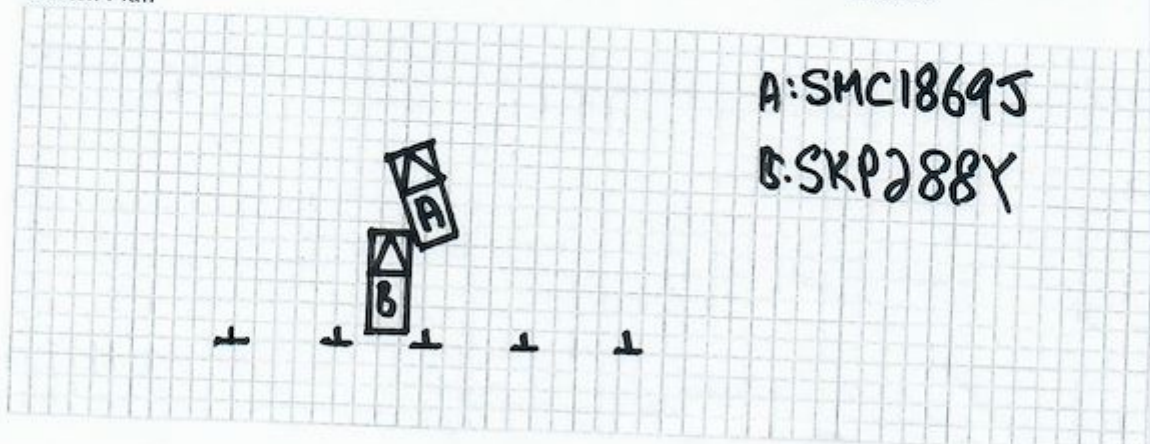
1. Please report correctly the details of the accident to speed up the claims process.
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving 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.

  
Policyholder's Signature / Date & Time

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

**Go Chee Han**  
DID : 6771 4336 HP : 9181 7717  
Email : cheehan.go@cyclecarriage.com.sg  
-Cycle & Carriage Industries Pte Ltd  
Customer Service Centre - Pandan Loop  
Personnel

Sketch Plan



Describe Circumstances of the Accident

WHILE REVERSING INTO THE PARKING LOT , ACCIDENTALLY BRUSHED ONTO CAR "B" ,  
MANAGED TO CONTACT THE OWNER AND EXCHANGE DETAILS FOR INSURANCE CLAIM.

Declaration

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date &  
Time

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

**Go Chee Han**  
DID : 6771 4336 HP : 9181 7717  
Email : cheehan.go@cyclecarriage.com.sg  
Cycle & Carriage Industries Pte Ltd  
Witnessed by Reporting Centre  
Personnel









































**AIG****CERTIFICATE OF INSURANCE****MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE**

Name of Policyholder : LIM SIA SEE, ERNEST (LIN ZHENGXI, ERNEST)  
 Period of Insurance : 26 May 2024 To 25 May 2025  
 Engine/Motor No. : 78099820055965  
 Chassis No. : W1K2938902F059309

Vehicle No. : SMC1869J  
 Policy No. : 7230049602-01  
 Endorsement No. :  
 Issued Date : 26 Apr 2024 14:53

**ABOUT THE COVER**

Make/Model : MERCEDES Benz EQC 400 / EQC 400 AMG Line  
 Engine Capacity/Tonnage : 0.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\* :  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2023  
 Insuring with COE/PARF : Yes

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\$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

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.

Loss of Use 2000cc

\* 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****Section 1**

Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$2000

**Section 2**

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

LIM SIA SEE, ERNEST (LIN ZHENGXI, ERNEST) - \$2000 (Own Damage), \$2000 (Flood Cover)

**APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)**

1. Cycle & Carriage Eunice Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818
2. Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 126378 62061818

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](http://www.aig.sg).

**IMPORTANT NOTES**

Hire Purchase Company/Employer's Loan: MayBank

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).

0504688202

CYCLE &amp; CARRIAGE - ANDREA

239 ALEXANDRA ROAD

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

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