

## 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 .....	09/11/2024 13:19 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	08/11/2024 17:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	AYE (NEXT EXIT YUA CHING)
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SJC2042G
-----------------------------------	----------

#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	CAVIN NG WEE PING
NRIC No .....	S7342372D
Email Address .....	CAVINNG73@GMAIL.COM
Mobile Phone No .....	(Phone) +65-96612994
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Suzuki
Model .....	SWIFT SPORT 1.6 A
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? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1586
Vehicle Fuel .....	Petrol
First Registration Date .....	01/02/2008
Chassis no .....	ZC31S202217
Effective Date/Time of Ownership .....	10/09/2014 11:09 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	2100480962-07

#### DRIVER

Name of Driver .....	CAVIN NG WEE PING
NRIC No .....	S7342372D
Date Of Birth .....	16/11/1973
Occupation .....	Indoor
Driving Pass Date .....	27/07/1992
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	32 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96612994
Alt. Phone Number .....	-
Email Address .....	CAVINNG73@GMAIL.COM
Address .....	BLK 168 HOUGANG AVENUE 1 12-1403 SINGAPORE 530168
Address complement .....	-
Postcode .....	-
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 .....	Chain Collision
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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 .....	PASSENGER
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 WITH 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

Vehicle Registration Number .....	YN8820C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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) .....	-

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SLX3228Y
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	CAVIN NG WEE PING
Gender .....	Male
Phone No .....	(Phone) +65-96612994
Address .....	BLK 168 HOUGANG AVENUE 1 12-1403 SINGAPORE 530168
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SJC2042G
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	-

**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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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 9/11/2024 @ 1130h	 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)
Sketch Plan		
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">  </div> <div style="width: 55%;"> <p>A. SJC 2042H</p> <p>B: YN 8820C</p> <p>C. SLX 3228Y</p> </div> </div>		





Describe Circumstance of the Accident


I drove my car SJ200H24 along aye in the middle lane. Vehicle in front brake and I follow to brake. Next moment, long YN8820C hit onto the rear of my car. The impact push me forward to hit the rear of car SLX32284. After the incident, I felt not comfortable and want to seek medical check.

Note: Please note that your insurer may have 14 days time frame for you to submit an own damage claim under your own policy, please check your policy for more information.

Declaration

I/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  
9/11/2024 @ 1130hrs

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



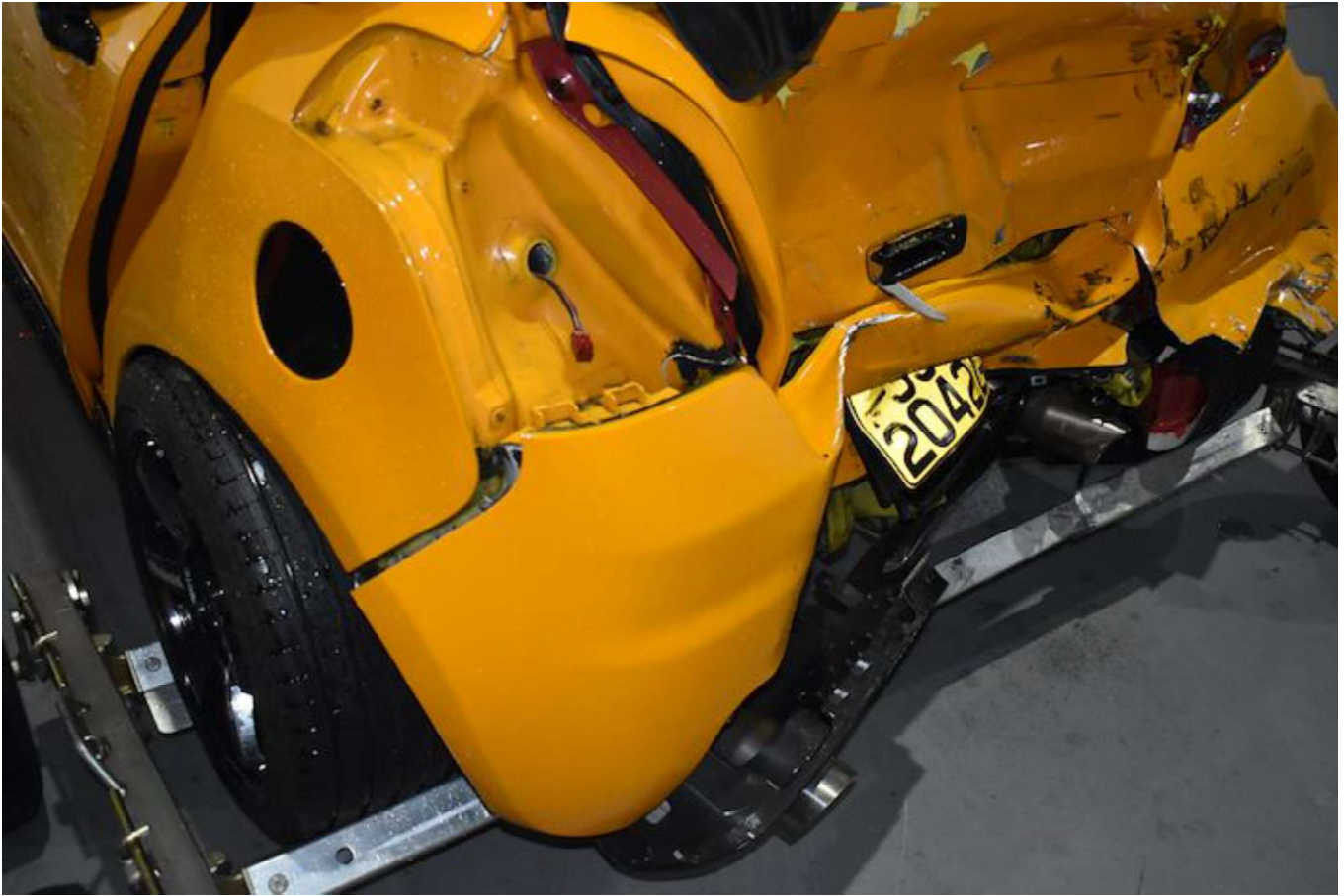














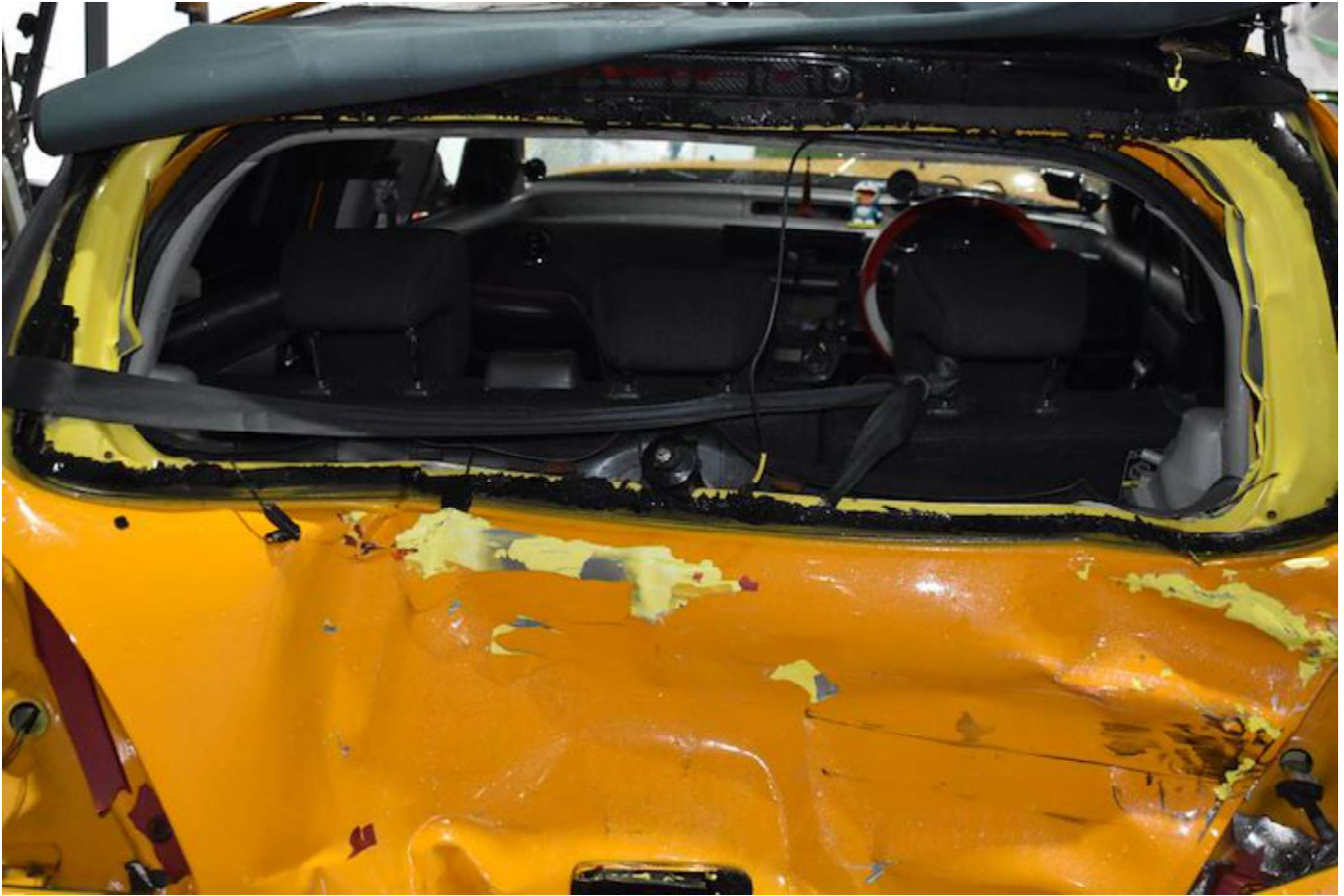








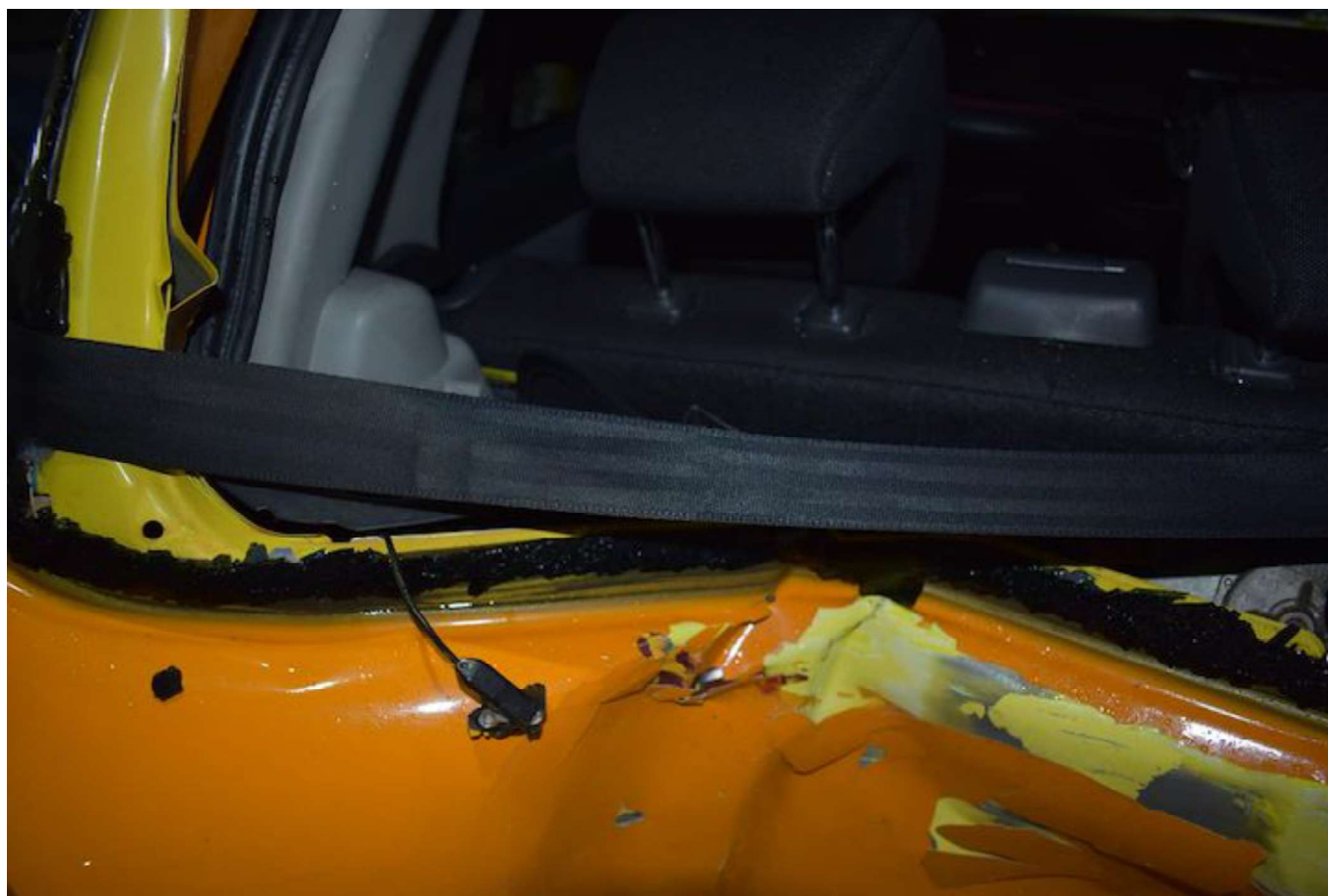






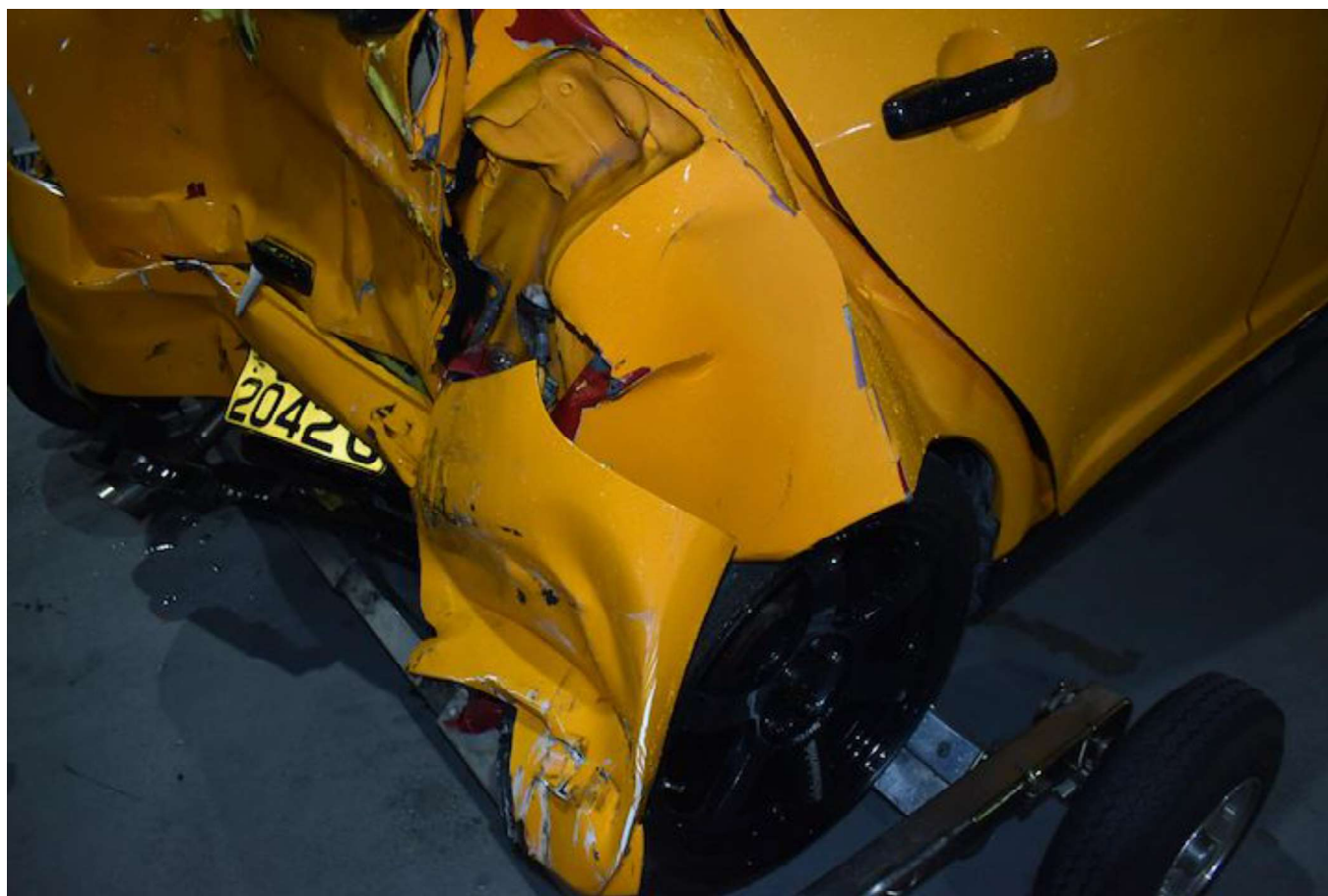




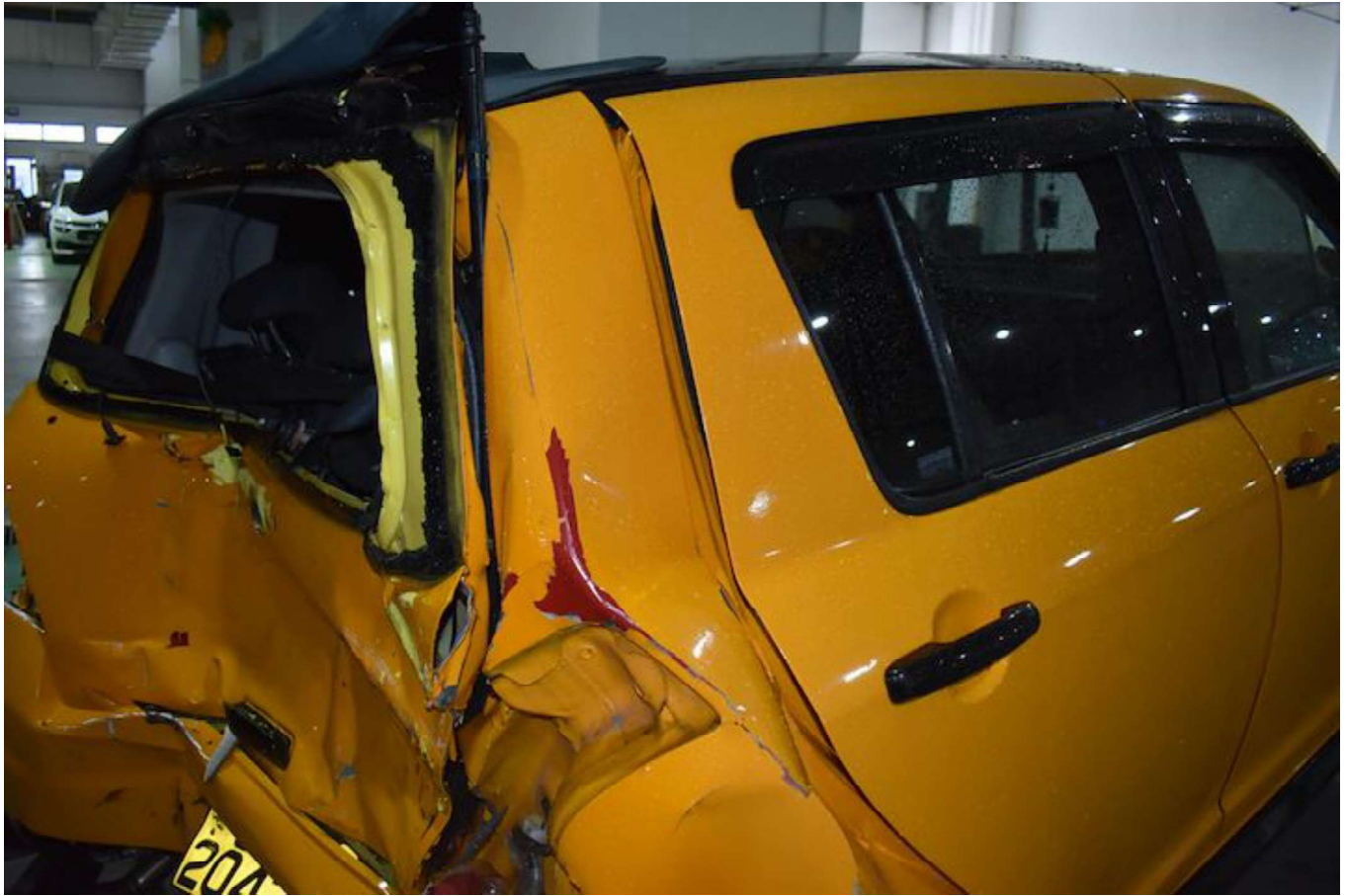


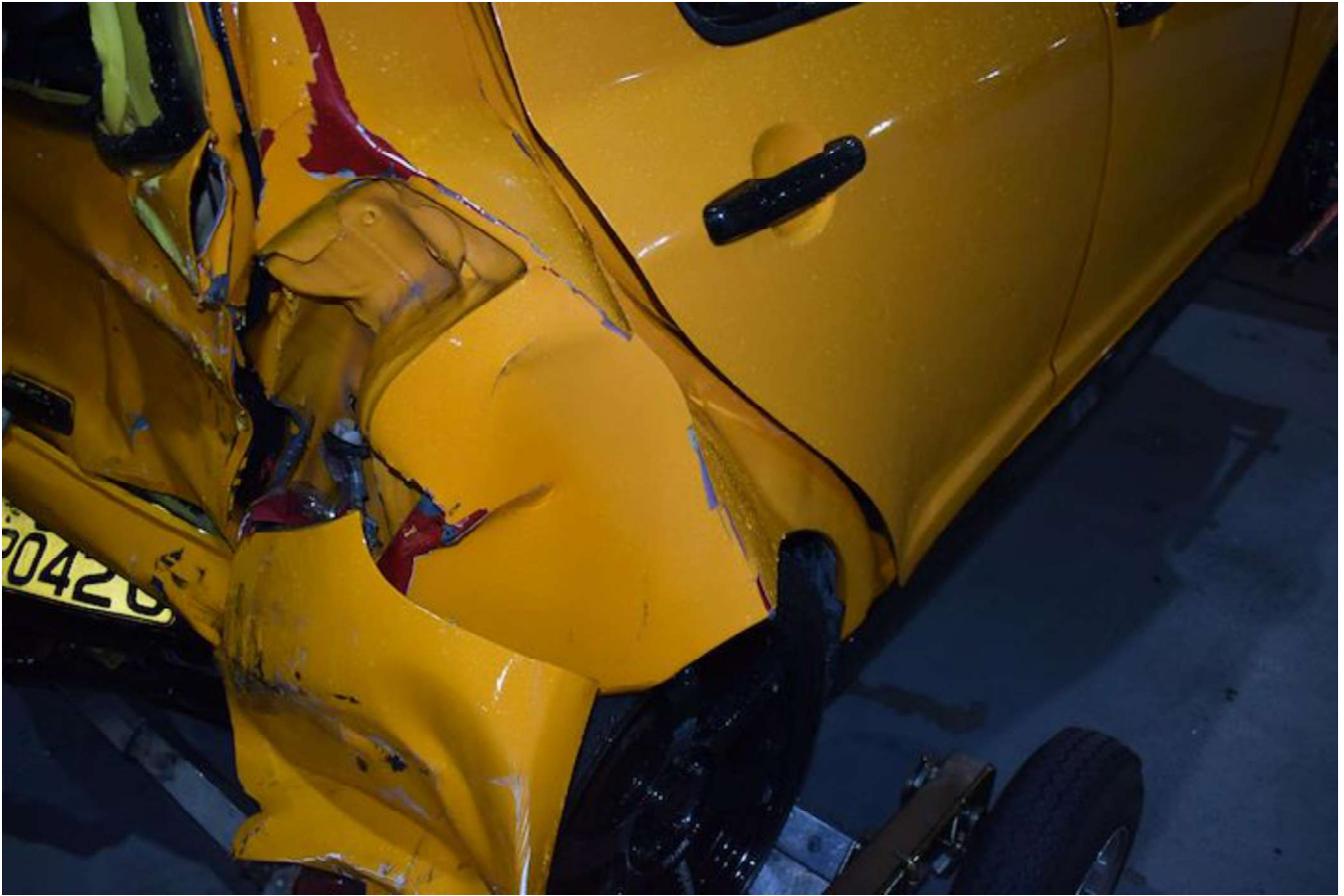






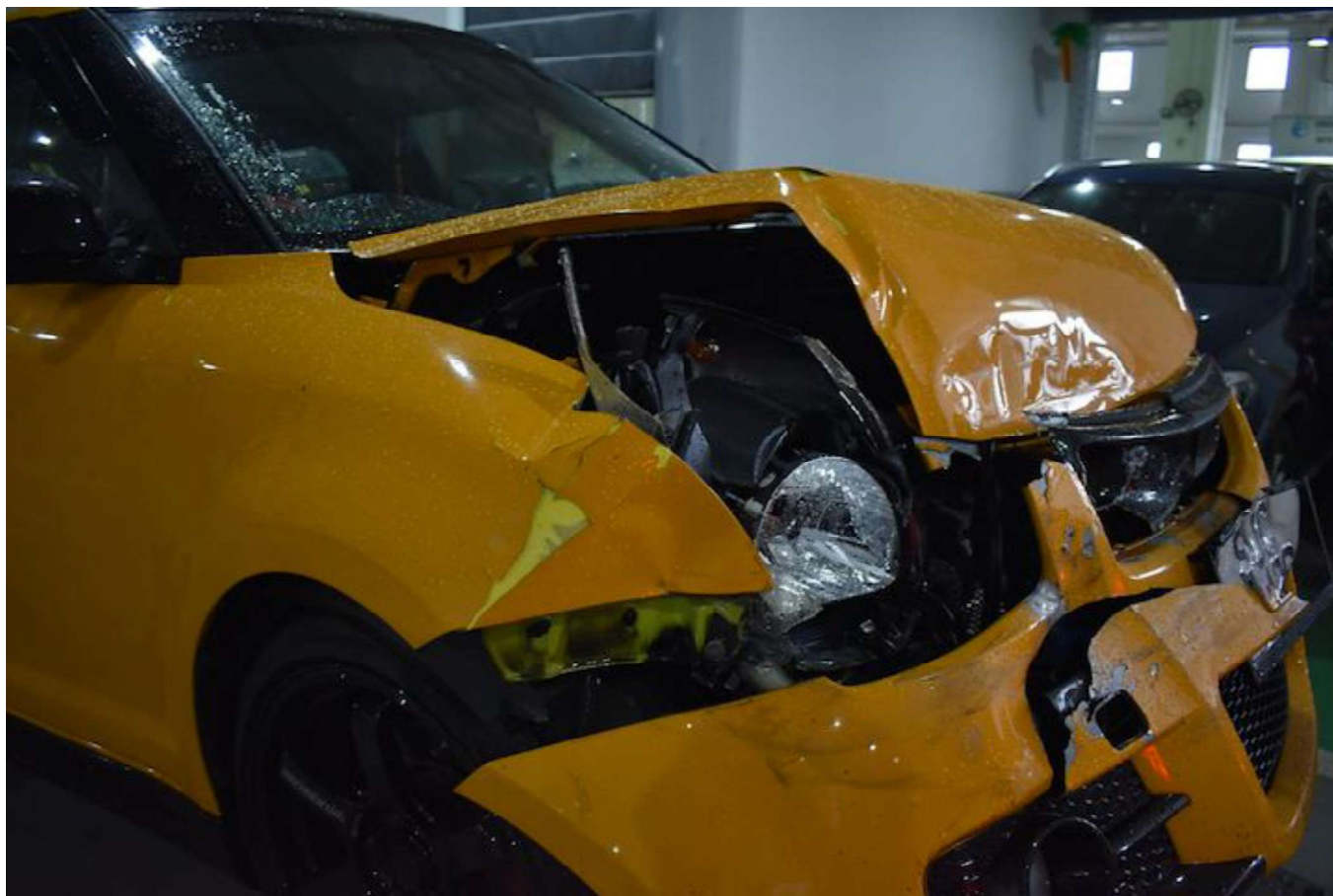


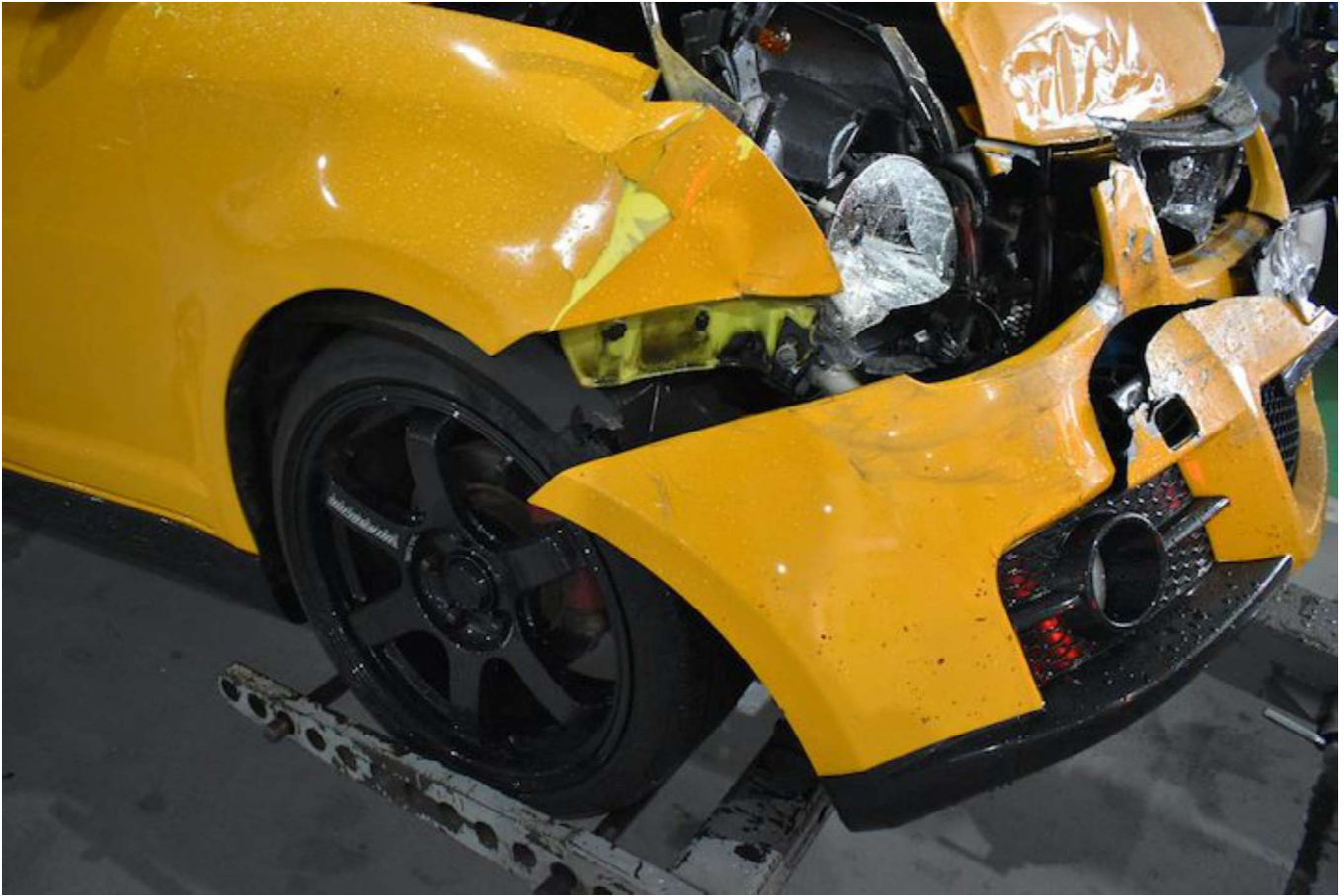




















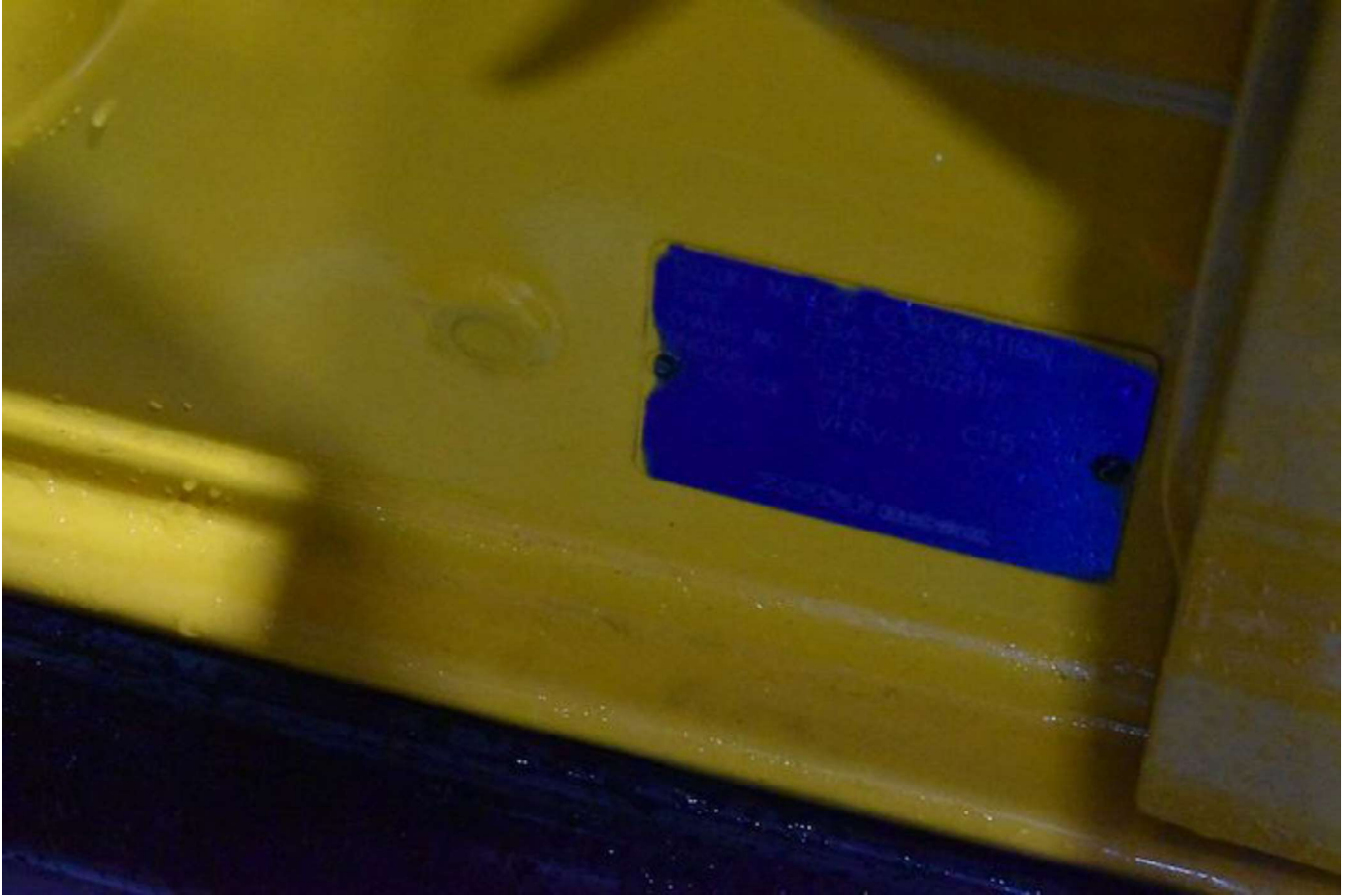








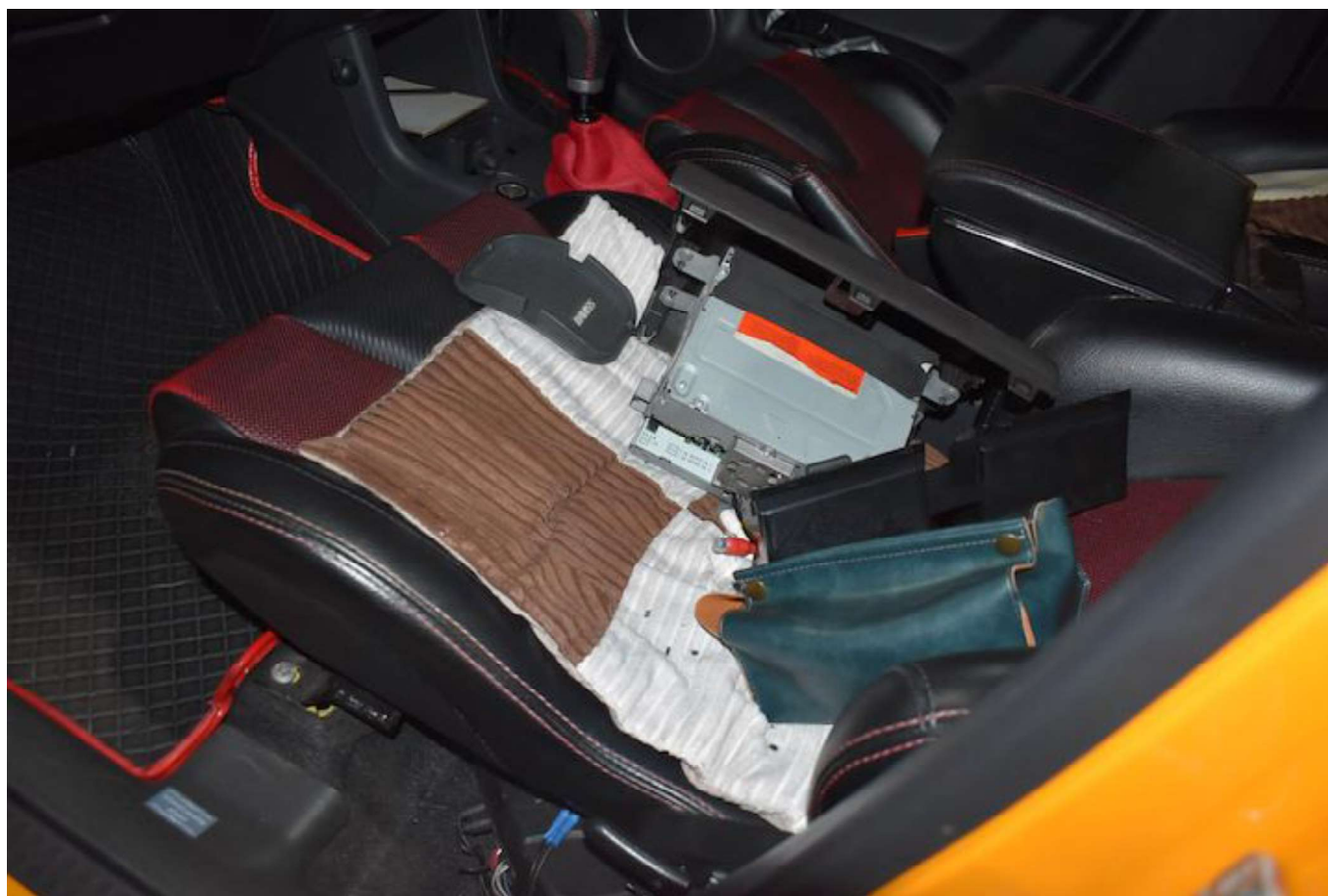






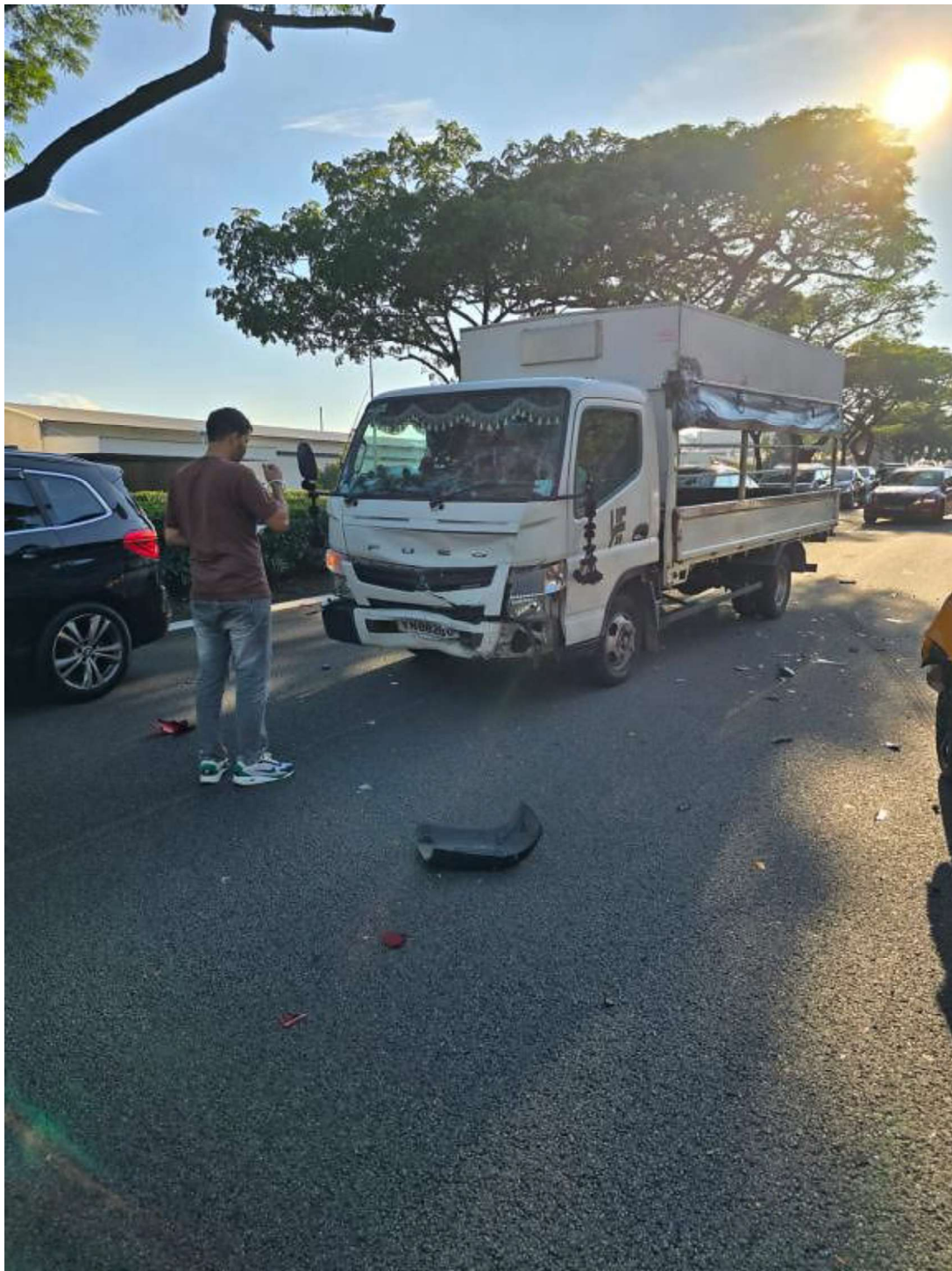




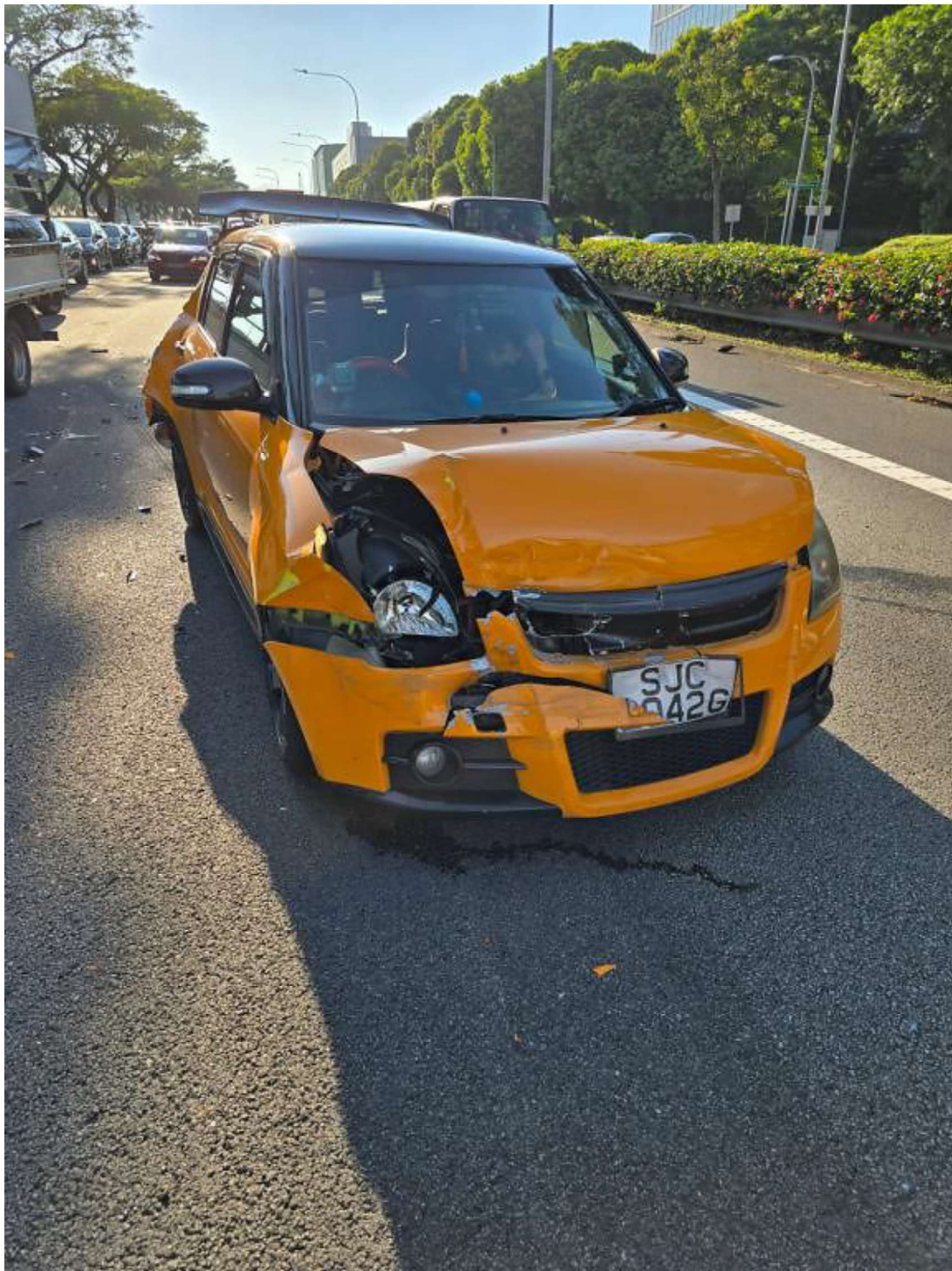


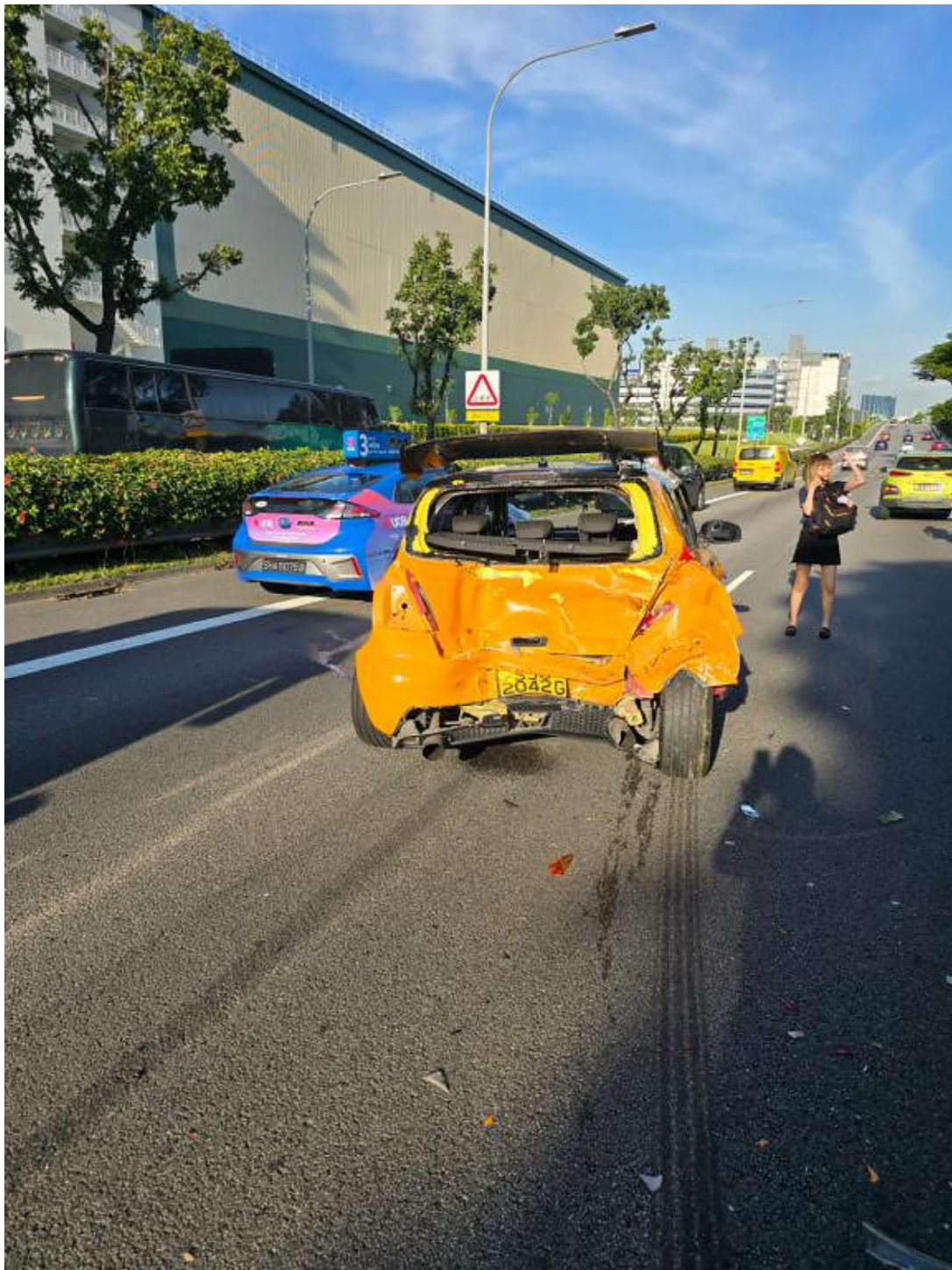




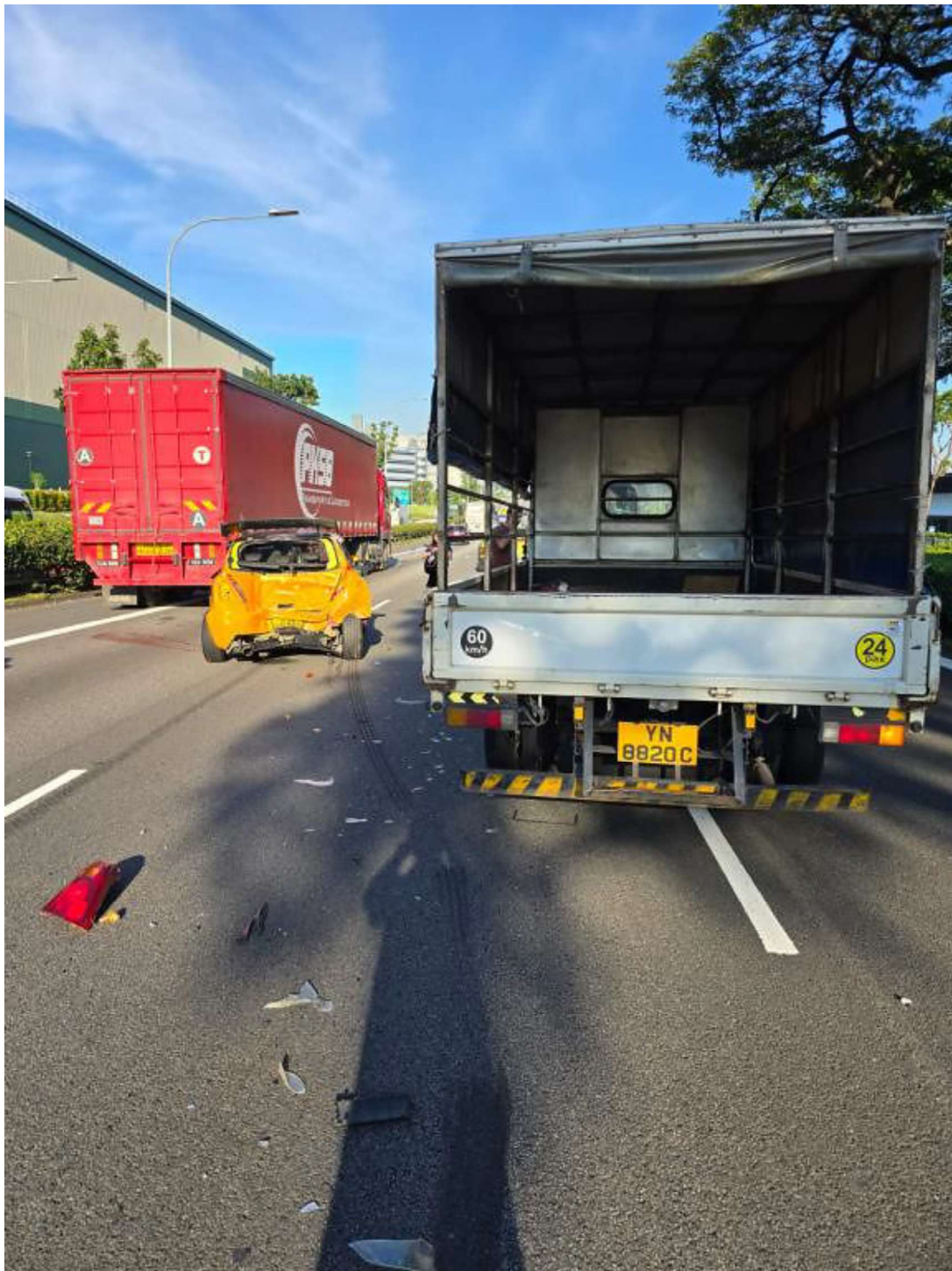








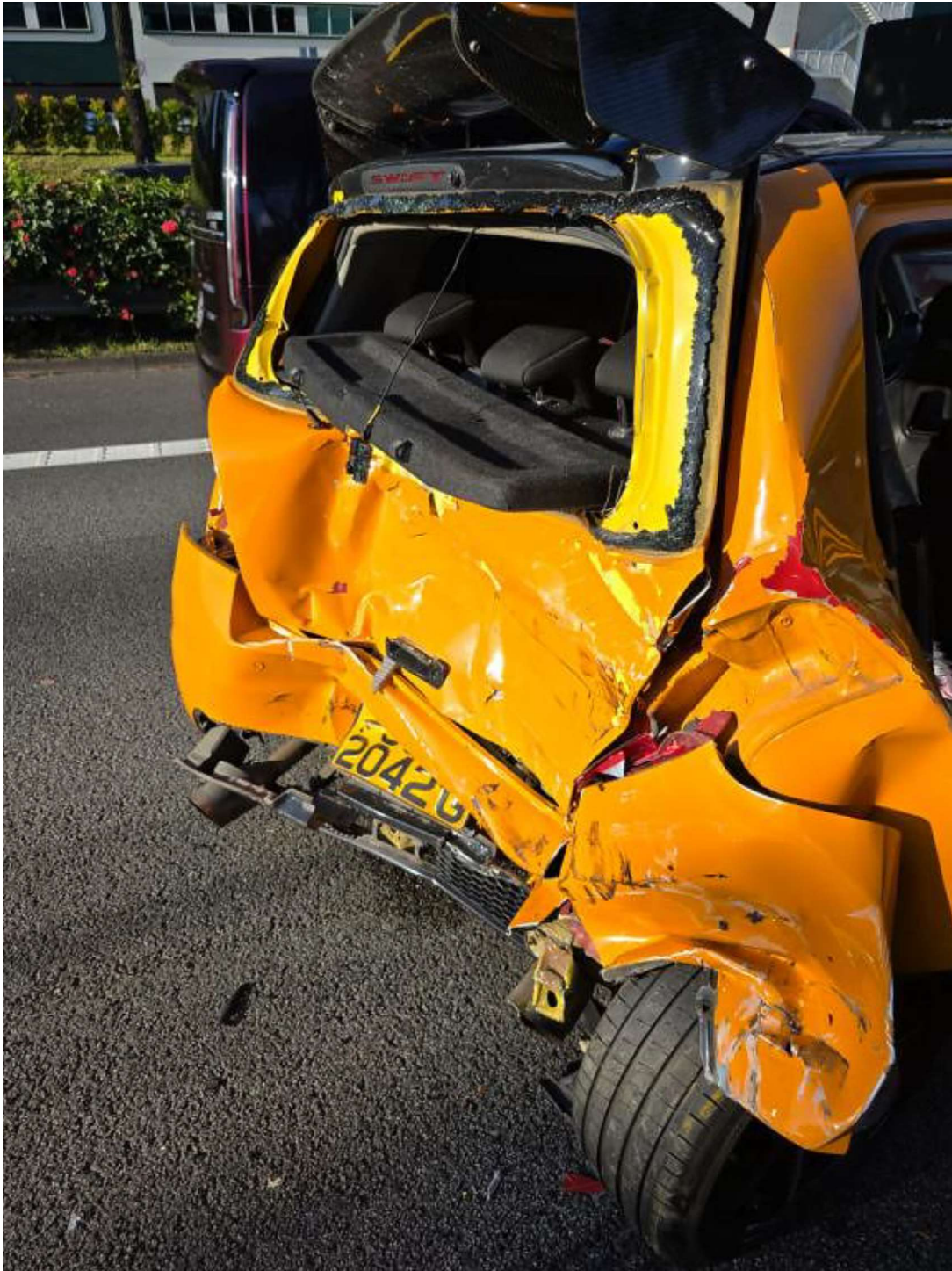




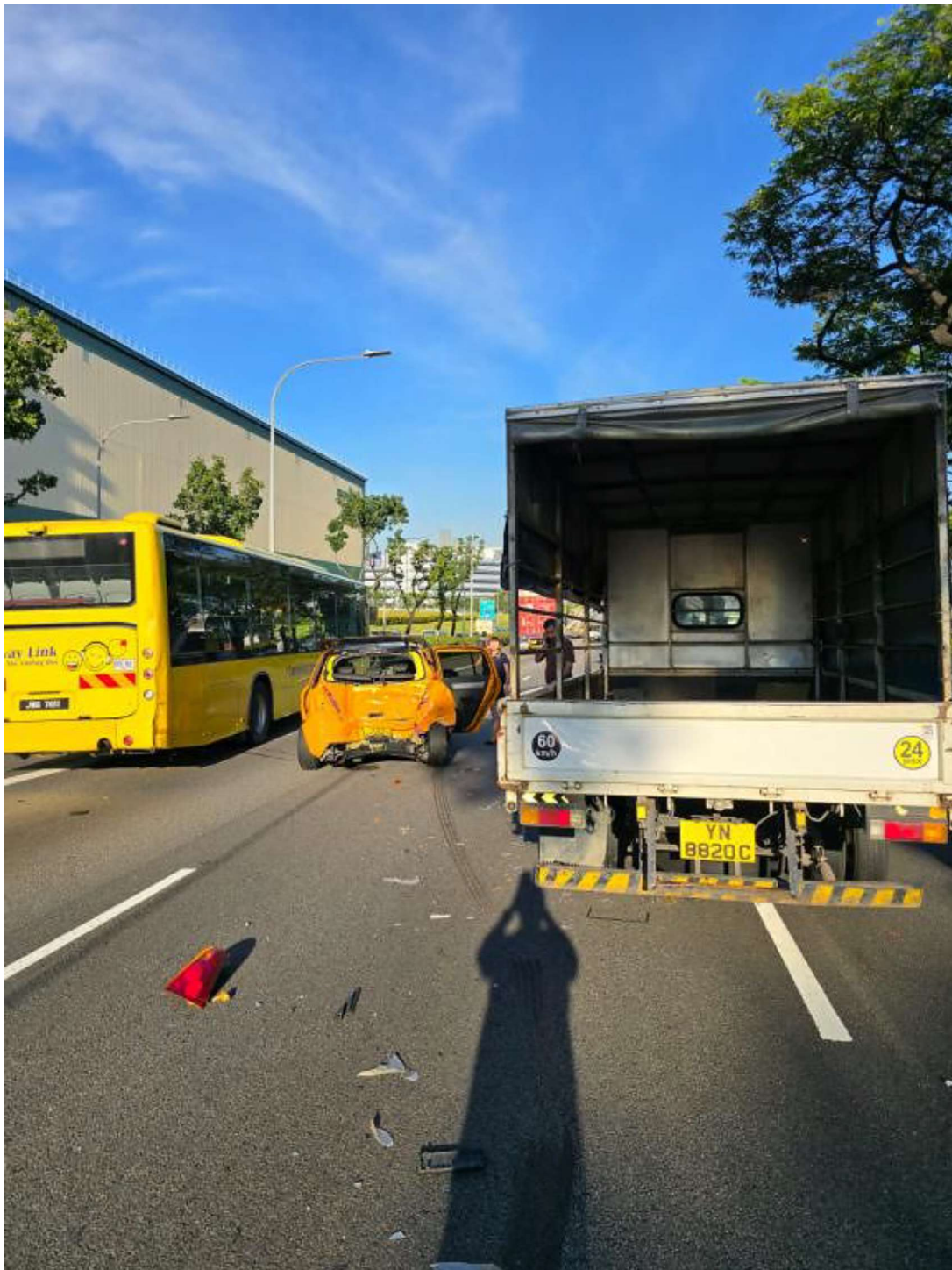












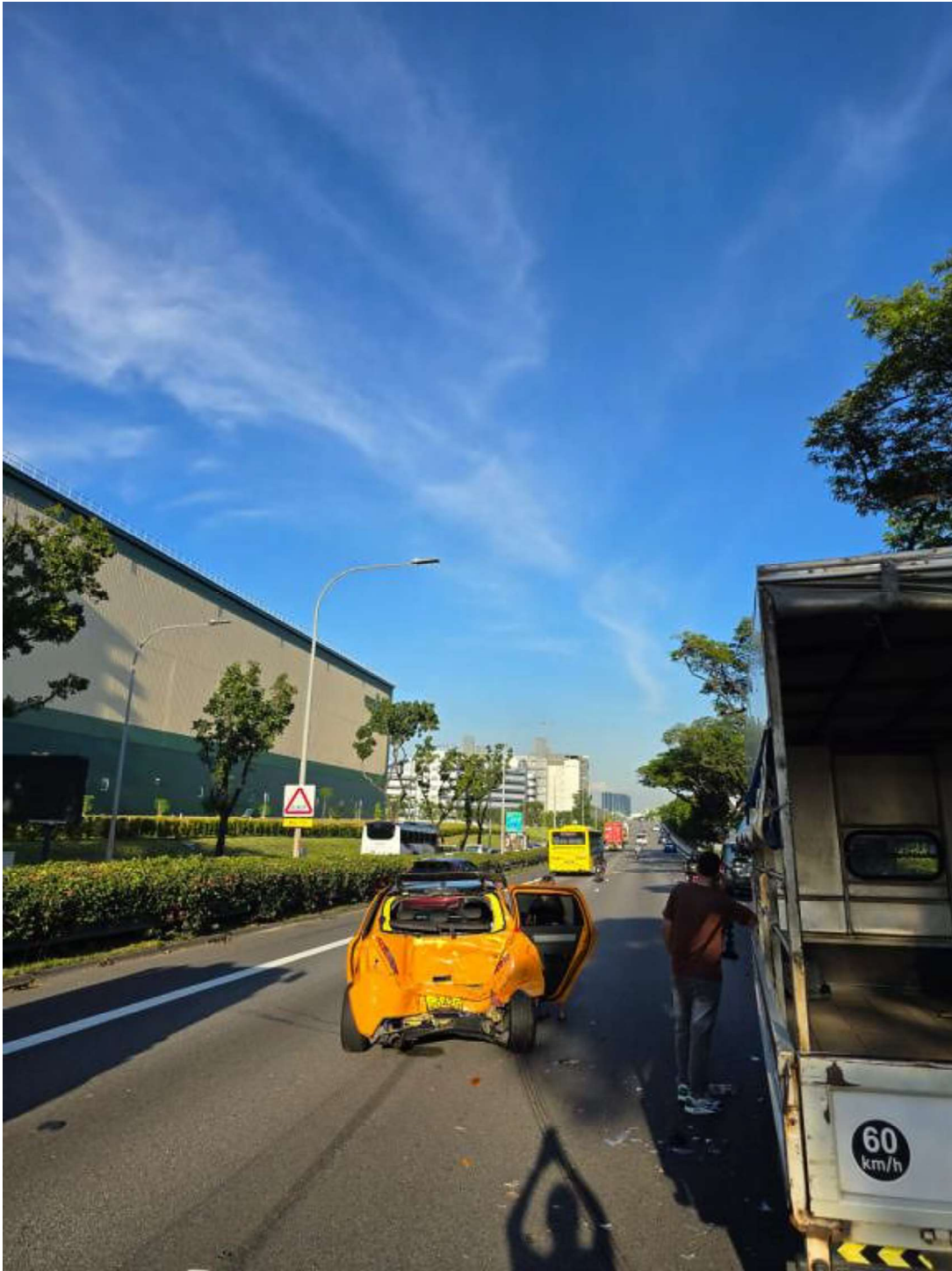












<b>AIG</b>		<b>CERTIFICATE OF INSURANCE</b>	
<b>PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE</b>			
<b>Name of Policyholder</b>	: Cavin Ng Wee Ping	<b>Vehicle No.</b>	: SJC2042G
<b>Period of Insurance</b>	: 01 Feb 2024 To 31 Jan 2025	<b>Policy No.</b>	: 2100480962-07
<b>Engine/Motor No.</b>	: M16A1300389	<b>Endorsement No.</b>	:
<b>Chassis No.</b>	: ZC31S202217	<b>Issued Date</b>	: 05 Dec 2023 17:16
<b>ABOUT THE COVER</b>			
<b>Make/Model</b>	: SUZUKI SWIFT SPORT	<b>Sum Insured</b>	: Market Value
<b>Engine Capacity/Tonnage</b>	: 1,586.00 CC	<b>First Year of Registration</b>	: 2008
<b>Driver Restriction</b>	: NA	<b>Off Peak Car</b>	: No
<b>Person or Classes of Persons Entitled to Drive*</b>	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.		
<b>Age Condition</b>	: 40 years old and above	<b>Mileage Condition</b>	: Unlimited Mileage
<b>Limitation as to use*</b>	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 speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.		
<small>* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1995, Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.</small>			
<b>EXCESS</b>			
<b>Section 1</b>			
Fire • \$0 Theft • \$0 Theft Outside Singapore Cover • \$0			
<b>Section 2</b>			
Property Damage • \$0			
<b>Windscreen</b> : NA			
<b>Named Driver and Excess</b> (where applicable)			
Cavin Ng Wee Ping			
<b>APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)</b>			
<small>Approved Reporting Centres/ AIG 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 hotline at +65 6335 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.</small>			
<b>IMPORTANT NOTES</b>			
Hire Purchase Company/Employer's Loan: NA			
<small>[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 1995, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).]</small>			
0503277000 CHIA CHEOW KOON JANICE BLK 779 WOODLANDS CRESCENT #05-79 SINGAPORE 730779 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.		<b>AIG Asia Pacific Insurance Pte. Ltd.</b> This computer generated document does not require a signature.	
<small>Co. Reg. No. 104334941000   Copyright © 2019 AIG Asia Pacific Insurance Pte. Ltd.</small>		<small>APSGMOB1.CAPP</small>	
78 Shenton Way #09-18 AIG Building 5079129   T: +65 6419 3000   www.aig.sg		AIG Asia Pacific Insurance Pte. Ltd.	