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.

- 4. The issue and acceptance of this is form by instrained 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 24/12/2024 10:21 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 23/12/2024 19:15 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS TUAS AFTER WHITELY RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGJ3932E

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **CHOON TUCK KIONG** NRIC No SXXXX725G Fmail Address xr2008244@hotmail.com Mobile Phone No (Phone) +65-92346382 Alternative Phone No +65-97503359

VEHICLE PARTICULARS

Manufacturer

Toyota Model Prius 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 1800 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7230091327-01

DRIVER

Name of Driver **CHOON TUCK KIONG** NRIC No SXXXX725G Date Of Birth 09/05/1975 Occupation Indoor Driving Pass Date 16/03/2004 Driving License Pass Class 3 Driving License Validity Valid Driving experience 20 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-92346382 Alt. Phone Number +65-97503359 Email Address xr2008244@hotmail.com Address BLK 469 JURONG WEST STREET 41 #06-491 Address complement Postcode 640469 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 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? 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? Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT **REF ATTACH** ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1**

SNH3335G

Toyota

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model	Yaris
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KELVIN
Contact Number	(Phone) +65-96787213
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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5. Any false reporting may be referred to the Traffic Police Department for investigation.

- 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.
- 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.

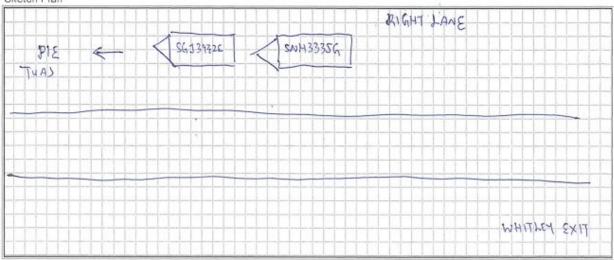
Policyholder's Signature / Date & Time

24 9EC 24 0930 + 14 FC 24 0930

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

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

Sketch Plan



1

<u></u>
Describe Circumstance of the Accident
I was driving along PIE towards that at 1915hrs on 23 DEC 2024 and
Describe Circumstance of the Accident 1 was driving along PIE towards that at 1915 hrs on 23 PEC 2024 and the vehicle in front stop and I manage to stop in time but the vehicle behind hit the rear of my vehicle.
but the rear of my vehicle.

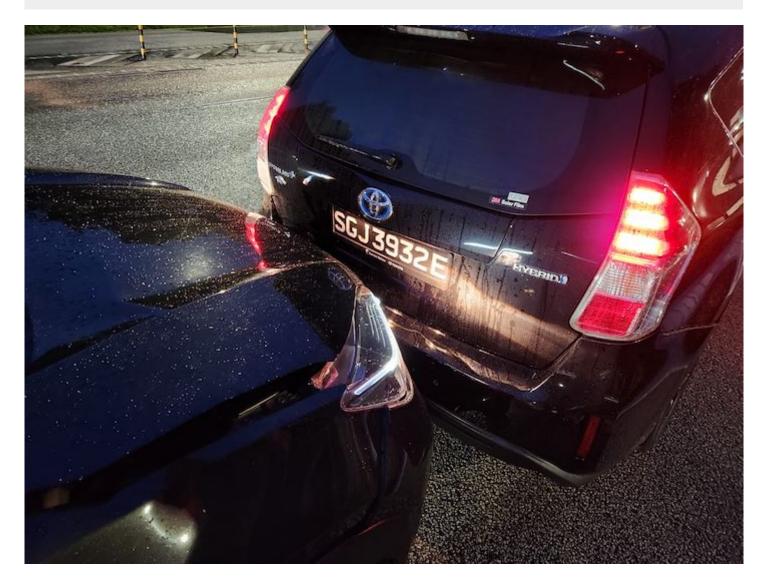
Declaration

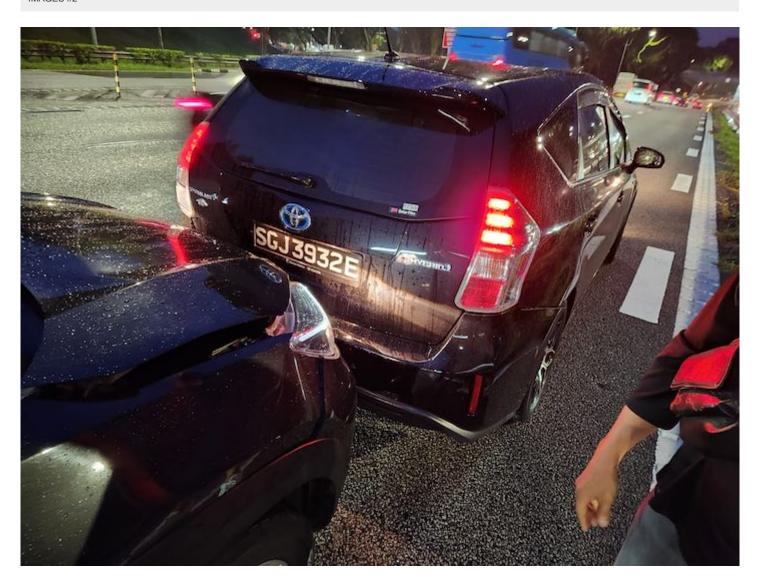
I/We declare the foregoing particulars are true in every respect.

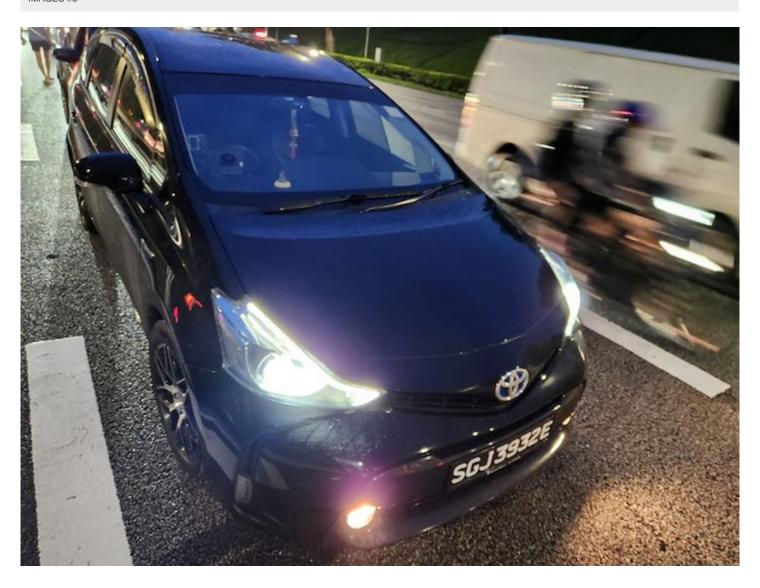
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

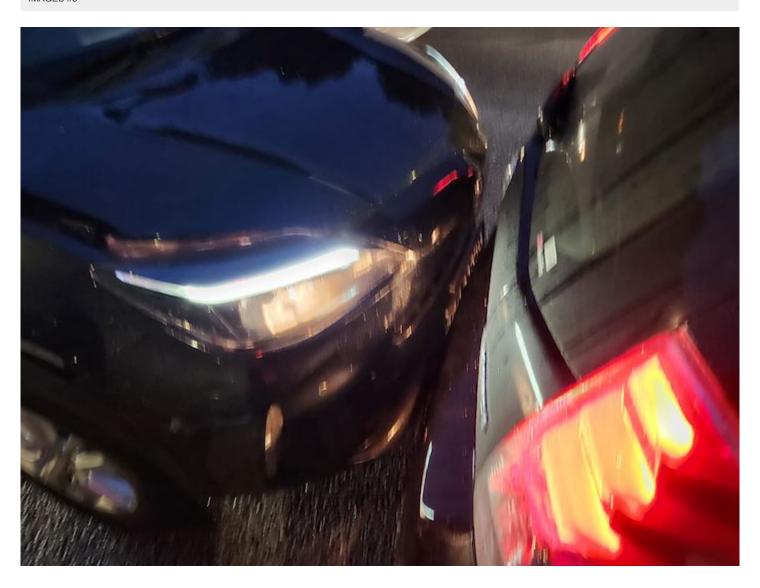
2







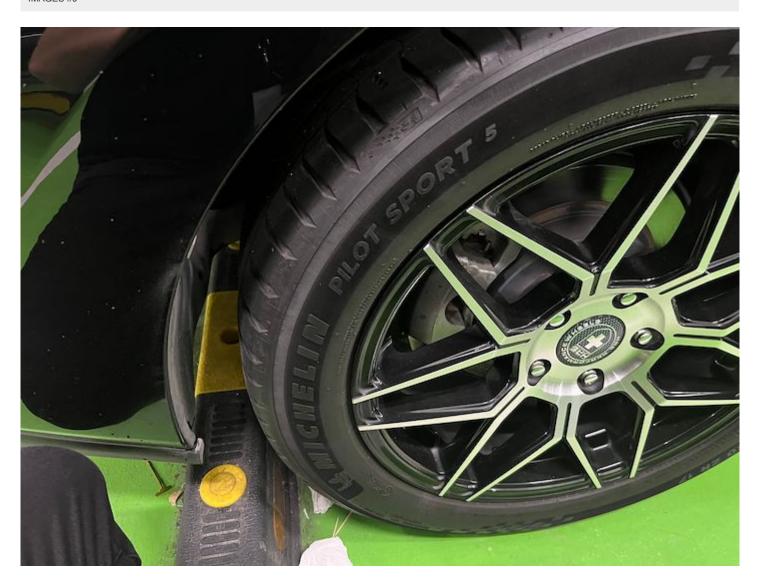


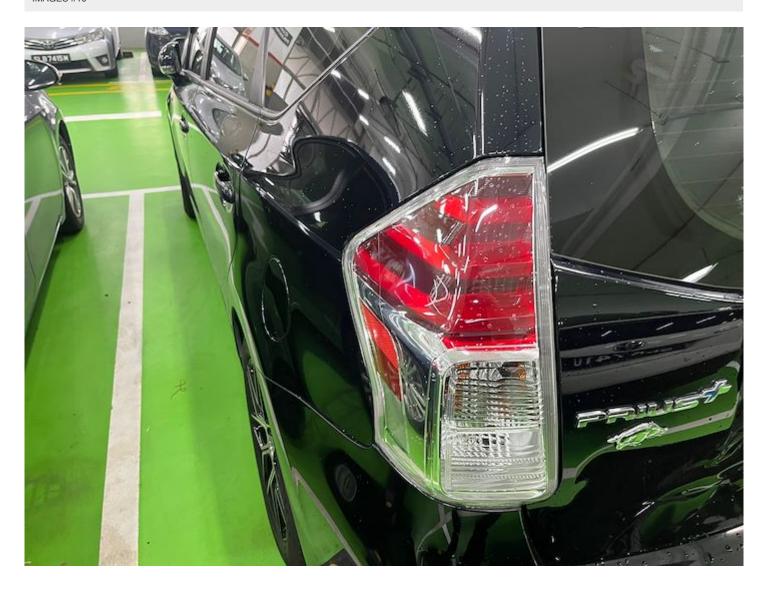








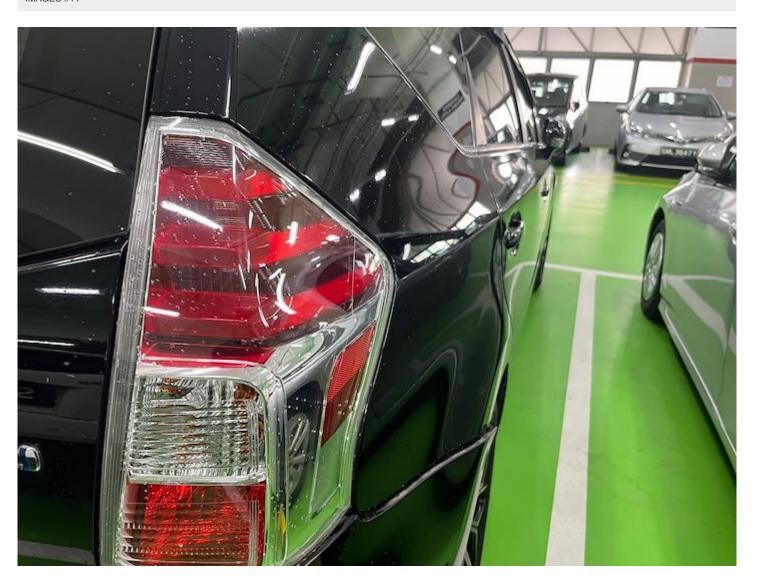








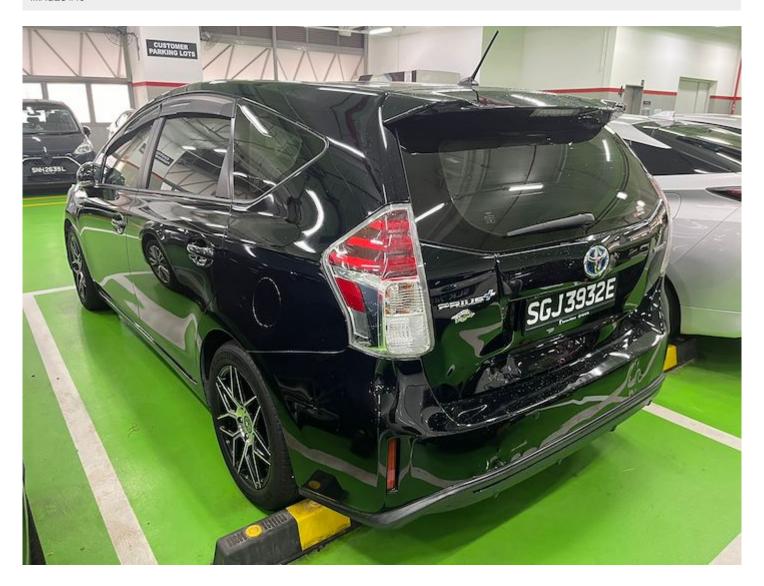


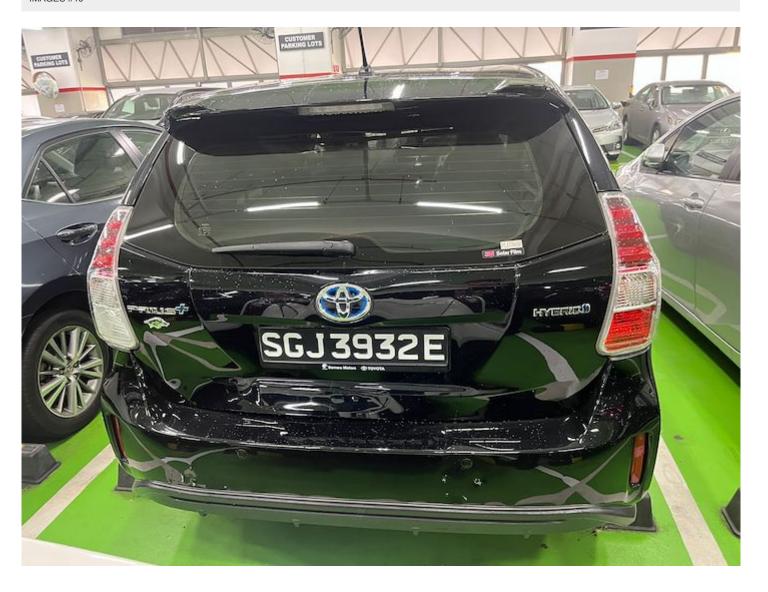
















CERTIFICATE OF INSURANCE

AIG CAR INSURANCE COMPLETE

Name of Policyholder : CHOON TUCK KIONG Vehicle No. Period of Insurance : 16 Nov 2024 To 15 Nov 2025 Policy No. : 7230091327-01

Engine/Motor No. Endorsement No.

Chassis No. : JTDZ\$3EU00J052480 Issued Date : 17 Sep 2024 15:45

: TOYOTA PRIUS+ 1.8 HYBRID

Engine Capacity/Tonnage ; 1,798,00 CC Sum Insured : Market Value First Year of Registration : 2020 : NA Driver Restriction Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive":

You have to pay an additional sum of \$\$3,000 as "Young and/or Inexperienced Dever Excess" ("YIDR") if You ore or Your Authorised Driver (named or unnamed) is under the age of 23 abotic has less than 2 years' driving experience.

Age Condition

: 40 years old and above

Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, convistic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for here or reward, driving tution, driving test, racing, pace-making, reliability that or speed-testing, the carriage of goods business or use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 6 of the Moter Vehicles (Third-Party Risks and Compensation) Act 1960. Section 95 of the Road Transport Act, 1967 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

Section 1

Fire - S0 Own Damage - \$1000 Theft - \$0 Theft Queside Singapore Cover - \$0 Flood Cover - \$1000

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

CHOON TUCK KICKIG - \$1000 (Own Damage), \$1000 (Flood Cover)

AIG Asia Pacific Insurance Pte. Ltd.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: CHOON TUCK KIONG
VEHICLE NUMBER	: SGJ 3932E
DATE/TIME OF ACCIDENT	: 23 DEC 2024 / 1915
PLACE OF ACCIDENT	: PIE Towards Twas after whitely Rd exit.
THIRD PARTY VEHICLE (IF ANY)	
********	· 我我我我我我我我我我我我我我我我我我我我我我我我我我我我我我我我我我的我的我的我
DESTINATION BEFORE THE ACCI	JOURNEY AND WHERE WAS THE INTENDED DENT? OKER CERTAE AND HEADING HOME IN JURIONG.
	C DRINKS BEFORE YOU DRIVE ON THE DAY OF IE TRAFFIC POLICE CONDUCT ANY BREATHE- , WHAT IS THE RESULT?
WHAT IS THE TYPE OF COLLISION TO ALL VEHICLES INVOLVED? MY REAL WAS HIT BY ANOT	ON AND THE EXTENSIVENESS OF THE DAMAGES
	ER/S INJURED? IF INJURED, WHICH HOSPITAL? FIC POLICE FOR INVESTIGATION?
CHOON TUCK KIONG	

I Affirmed The Above Information Is Given To My Best Knowledge.

AIG Asia Pacific Insurance Pte. Ltd. AIG Building 78 Shenton Way #07-16 Singapore 079120 Tel: 6419 3000

Name: