# **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.

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 30/12/2024 13:15 (SGT) Reported by Owner Date of Accident 28/12/2024 11:35 (SGT) Exact Location of Accident Singapore Additional Location Information KPĚ NEAR LAMP 64 TOWARDS THE CIRY EXTREME RIGHT **LANE** Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number **SGQ1002R** 

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner **CELESTINE TAN YEE MIEN** NRIC No S1589655H Email Address cang1717@gmail.com Mobile Phone No (Phone) +65-97955095 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 Regisration Date 13/07/2023

Chassis no

W1N2477842J4911497 Effective Date/Time of Ownership 13/07/2023 00:00 (SGT)

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7230067611-01

DRIVER

Name of Driver ANG SWEE HOCK ALAN NRIC No. S1652360G Date Of Birth 01/06/1964 Occupation Indoor Driving Pass Date 12/04/1989 Driving License Pass Class Driving License Validity Driving experience 35 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-97955095 Alt. Phone Number Email Address cang1717@gmail.com Address BLK 757 PASIR RIS STREET 71 #06-168 Address complement Postcode 510757 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 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 PASSENGER 1 Name **CELESTINE TAN YEE MIEN** 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

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SLW6060Z
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)	_

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLB6800R
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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust 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
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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' 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
- (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.

Policyholder's Signature / Date &

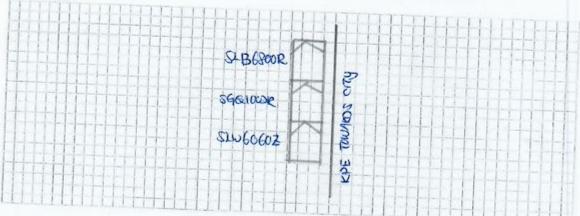
Driver's Signature (If driver is not the policyholder) / Date

Cycle & Carriage Industries Pte Ltd Body Care & Repair Center DID: 6771 4346 HP: 97896038 Fax: 6872 1272 Email: shluhjye.foong@cyclecarriage.com.sg

Foong Shiuh Jye

Witnessed by Reporting Centre Personnel

Sketch Plan



	Describe Circumstar	EMENT ATTACHED.		
		AT MORED.		
Decla	ration			
VWe de	clare the foregoing particul:	ars are true in every respect.		
*	1	$\bigcap \bigcap \bigcap$	Foong Shiuh Jye Cycle & Carriage Industries Pte Body Care & Repair Center DID: 6771 4346 HP: 9789038 Fax:	144
9	angein	/ // /	Body Care & Repair Center	Ltd
1	older's Signature / Date &	1 Aus	Email: shiuhjye.foong@cyclecarriag	6872 1272

#### ACCIDENT REPORT

Report submitted by: Alan Ang (Driver) & Celestine Tan Yee Mien (AIG Policy owner - 7230067611-01)

Date: Sat 28 Dec 2024

Approximate time: 11.35am

Location: KPE near lamp post 64 towards the City. Extreme right lane ie. Lane 1

Weather: Bright, clear, dry, sunny day

Traffic situation: Traffic jam as there was an accident somewhere ahead so traffic was very

slow with frequent start/stops.

Cars involved: 3 cars with no injury

Car number 1: Front car - SLB 6800 R

Brown Toyota Altis, only driver in car

Driver: Lee Tiam Hong (S 0429392 D)

Car number 2 (our car): Middle car - SGQ 1002R

Black Mercedez GLA 180, driver and passenger (policy owner) in front seat

Driver: Ang Swee Hock Alan (S 1692360 G)

Car number 3 (car which started accident): Back/last car - SLW 6060 Z

White Peugeot, only driver in car

Driver: Dinesh Kumar Tiwari (S 8873695 H)

#### What happened:

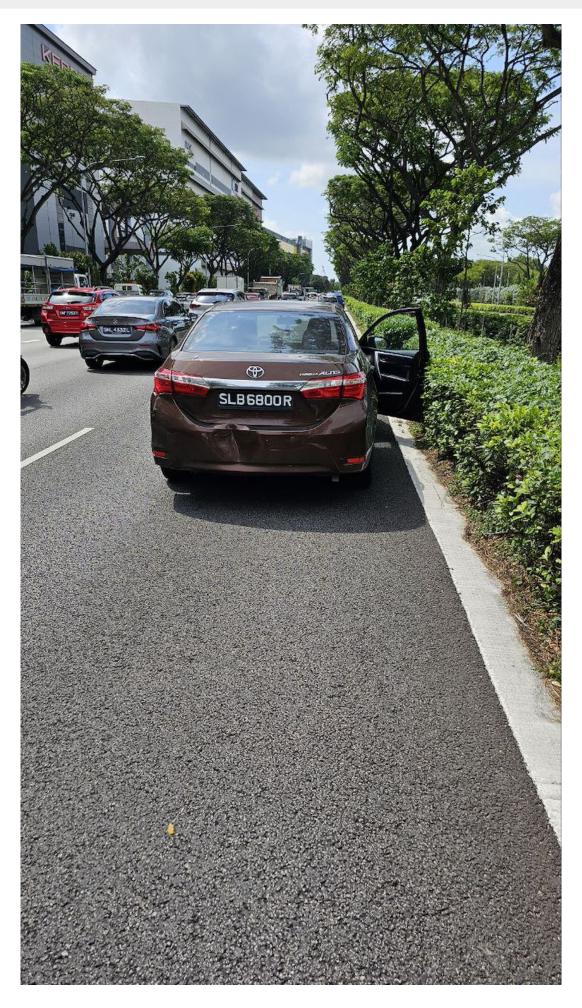
As there was a traffic jam, we were moving very slowly with frequent gradual start/stops.

Somewhere around Lamp post 64 and in the inner most lane (Lane 1), Car number 1 and our car (car number 2) were moving extremely slowly (with our car number 2 preparing to stop when needed) when car number 3 crashed into the back of our car (car number 2). The impact caused our car (car number 2) to move forward and bump into car number 1. Car number 3 driver acknowledged that it was his fault and something about his slipper being caught in the foot paddles.

2 camera video footages attached – 1 from the front and 1 from the back of our car number 2

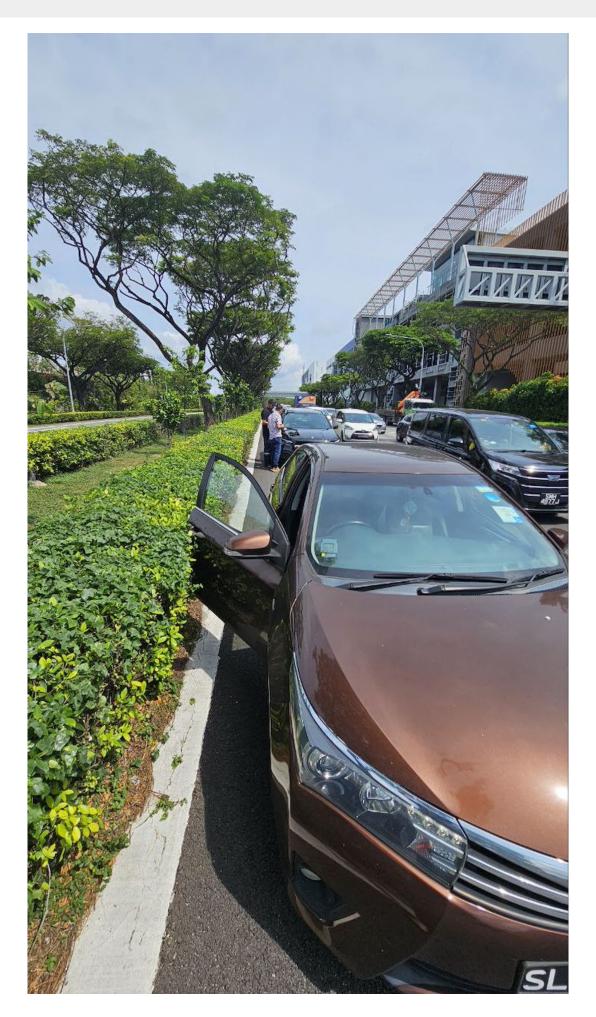
Pictures attached - show damages for all 3 cars



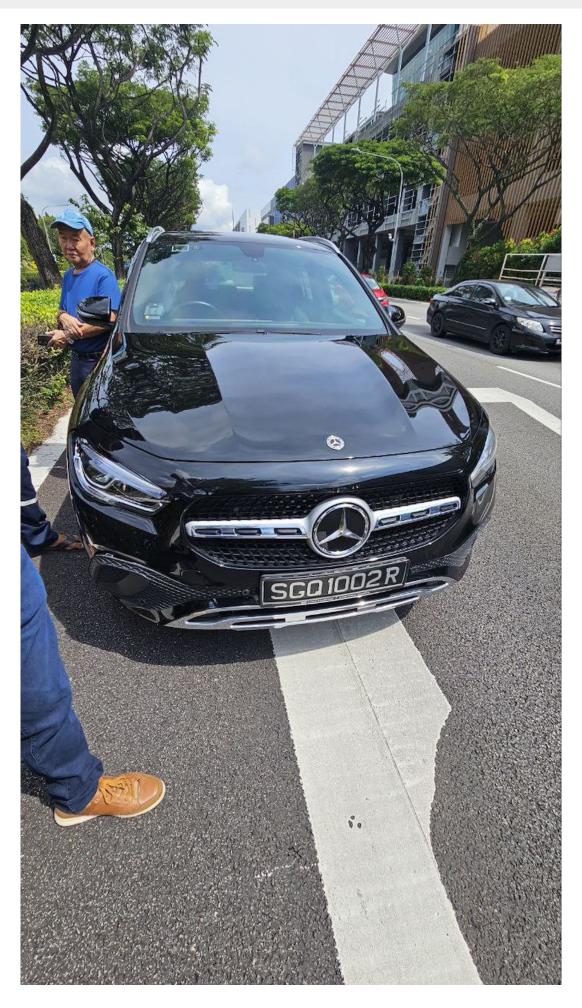


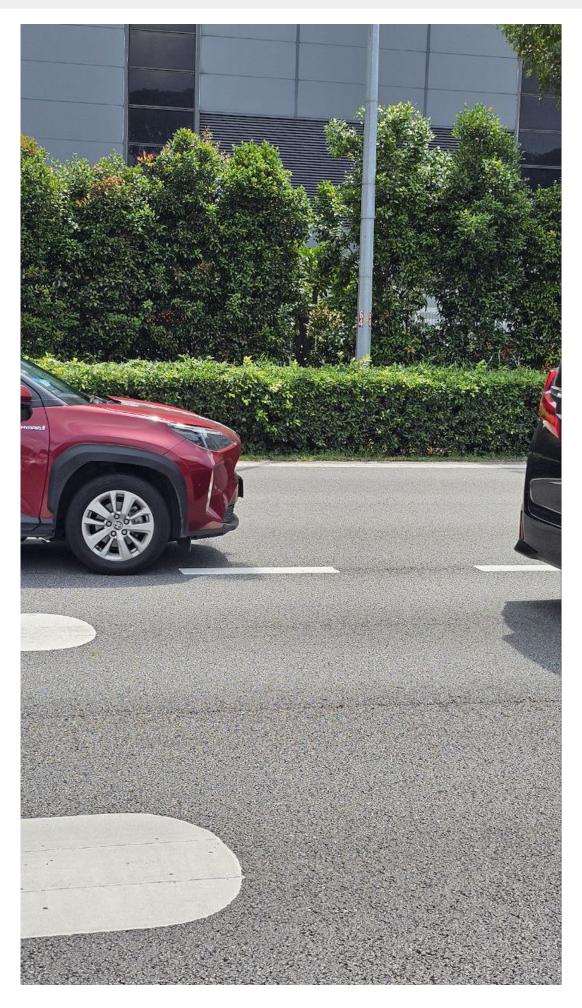


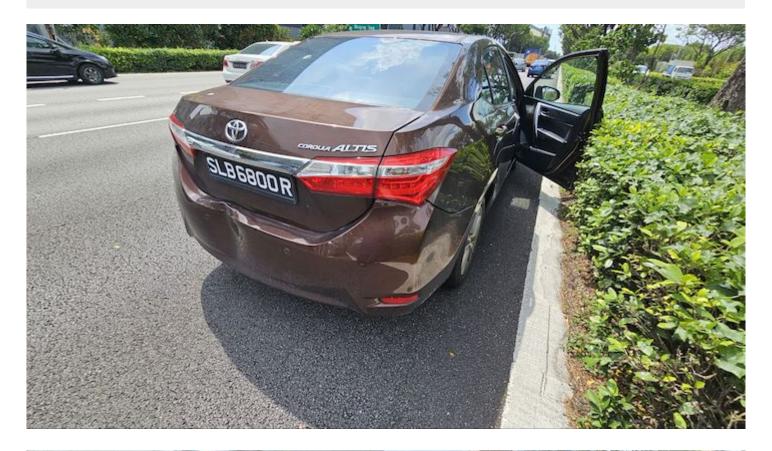




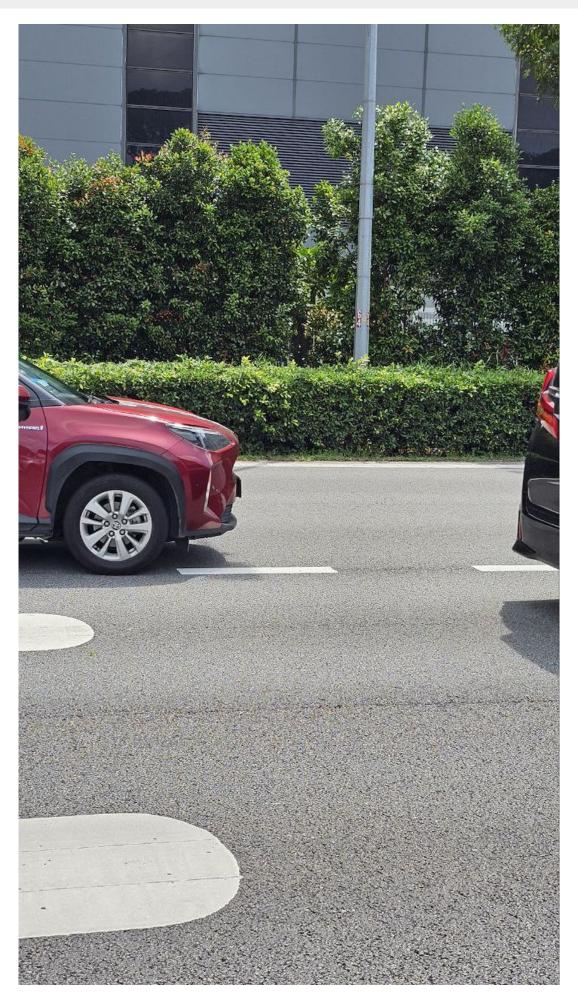




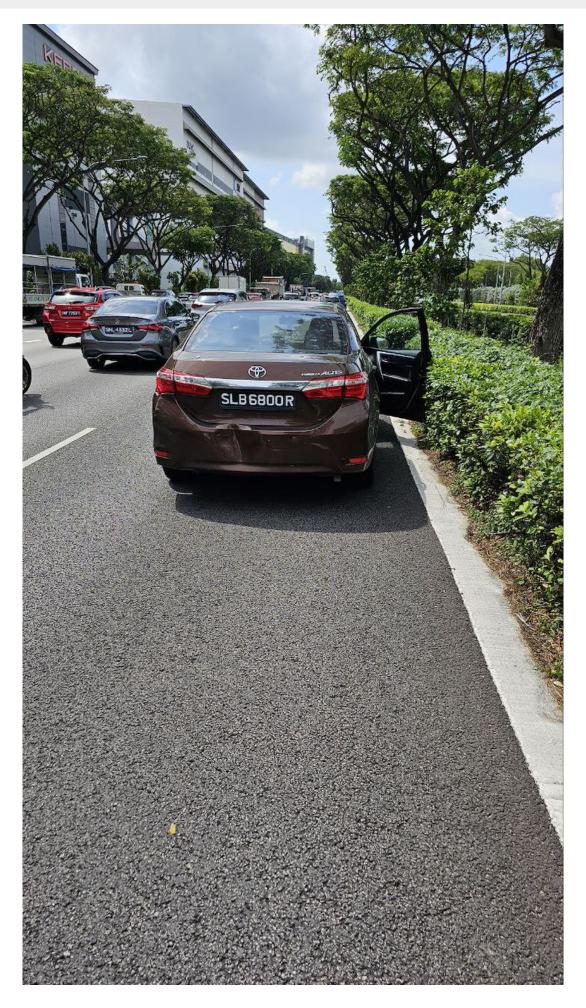








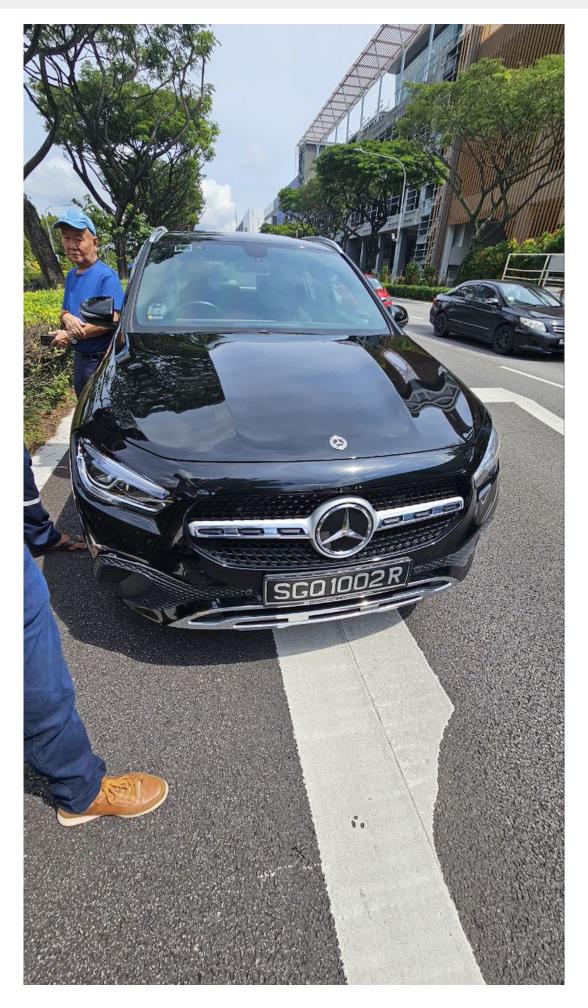


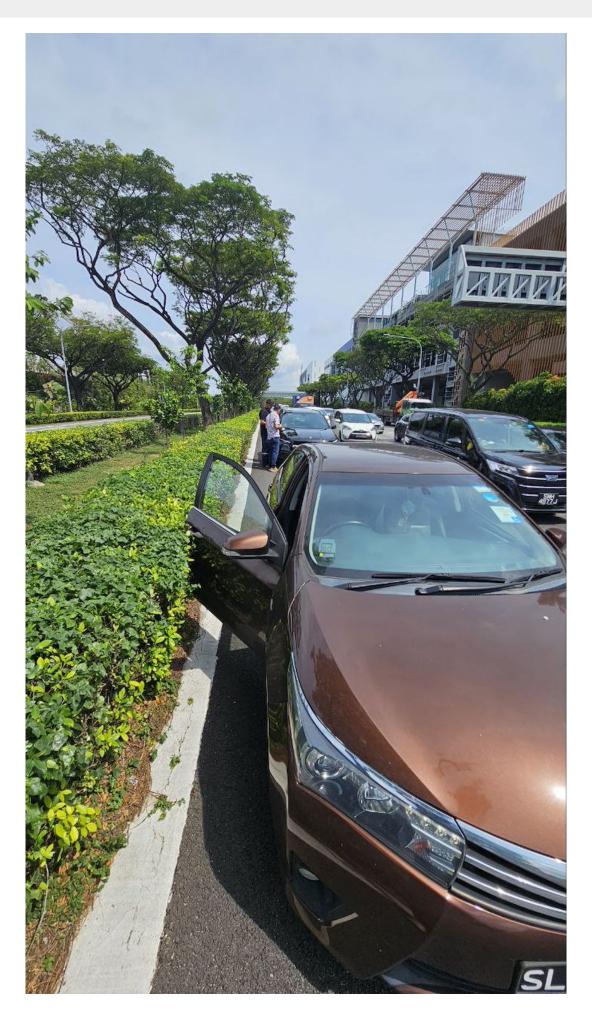












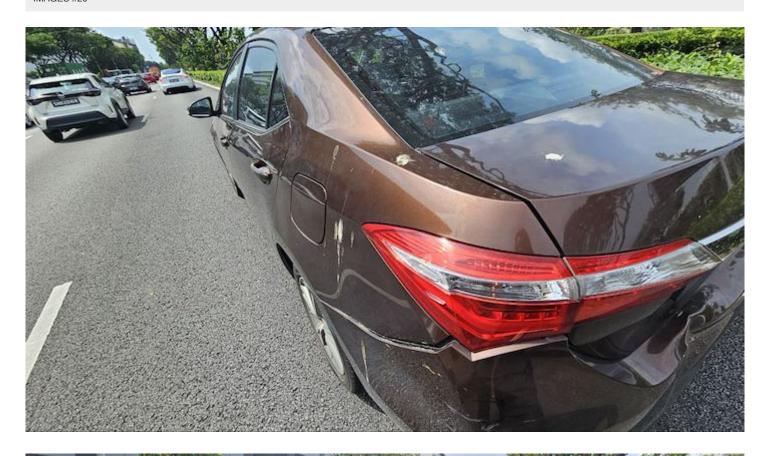
















# CERTIFICATE OF INSURANCE

# MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : CELESTINE TAN YEE MIEN Period of Insurance Engine/Motor No. : 28291480979893

: 13 Jul 2024 To 12 Jul 2025

: W1N2477842J491149

Vehicle No. Policy No.

: SGQ1002R : 7230067611-01

Endorsement No.

Issued Date : 23 May 2024 15:33

### ABOUT THE COVER

Make/Model

Chassis No.

: MERCEDES BENZ GLA180

Engine Capacity/Tonnage : 1,332.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2023 Insuring with COE/PARF : Yes

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 histher 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 \$\$\$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

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 Act, 1987 (Malay

#### EXCESS

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

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CELESTINE TAN YEE MIEN - \$800 (Own Damage), \$800 (Flood Cover)

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

Cycle & Carriage Euros Service Center (For accident reporting only). Add: 330 Ubi Road 3 Singspore 408650 62051818
 Cycle & Carriage Plandan Loop Service Center - Body Care & Repair. & dd: 158 Plandan Loop Singspore 120378 62051818

For other Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AlG website www.aig.ag.

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

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 1960, Part IV of the Road Transport Act, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

CYCLE & CARRIAGE AUTOMOTIVE PL

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

78 Shenton Way #09-16 A&G Building \$079120 | T:+65 6419 3000 | www.aig.sg