

#### 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 03/07/2024 15:44 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 02/07/2024 19:00 (SGT) Exact Location of Accident Singapore Additional Location Information JUNCTION OF UPPER PAYA LEBAR ROAD X AIRPORT ROAD Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Mercedes

E200

Vehicle Registration Number SCK6308E

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LOO CHIN NONG NRIC No. S1307142Z Email Address ACTUSLOOCN@YAHOO.COM.SG Mobile Phone No (Phone) +65-96745349 Alternative Phone No

# VEHICLE PARTICULARS

Manufacturer

Model

Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto 1800

#### INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1900083972-05

#### DRIVER

Name of Driver LOO CHIN NONG NRIC No S1307142Z Date Of Birth 06/06/1958 Occupation Indoor

Driving Pass Date	17/09/1975
Driving experience	48 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96745349
Alt, Phone Number	(Filolie) 103-30745543
	-
Email Address	ACTUSLOOCN@YAHOO.COM.SG
Address	137 BEDOK NORTH AVE 3 #10-174
Address complement	-
Postcode	460137
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	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	
Nodu Sullace	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	<u> </u>
Translator's phone number	
	•
Translator's email	-
Original language used in the statement	-
DETAILS OF BOLIOF ACTION	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	
<del>_</del>	No
If yes, against whom?	•
CIRCUMSTANCES OF ACCIDENT	
SINGSING INITIOES OF AUGIDERS	
REFER TO ATTACHMENT	
ATTACHMENT(S)	
Are assident photos available for attachment?	V
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
	VEHICLE PROPERTY 1
DETAILS OF OTHER	VEHIOLETROLERIE
Vehicle Registration Number	YP8371X
Vehicle Manufacturer	_
	=
	-
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)	_

when suddenly a	tationary on the slip road before Mitsubishi Lorry hit onto	my car's rearbunger
rom behind,	•	
	,	
w.		*
claration declare the foregoing particulars a	ra true in muon respect	
1/		
\ //		COMFORTDELGRO ENGINEERING PT
14	PART	205 ERADDELL ROAD
cyholder's Signature / Date & Time	Actual Driver's Signature (if driver is not the policyholder)	Witnessed by Reporting Centre Personnel

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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 aforesald.

### 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.

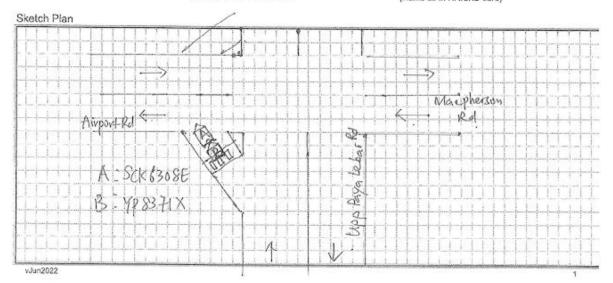
(collectively the "Purposes")

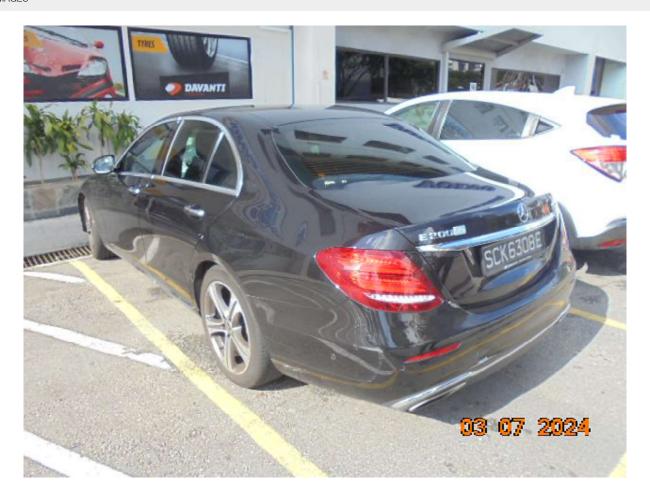
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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.

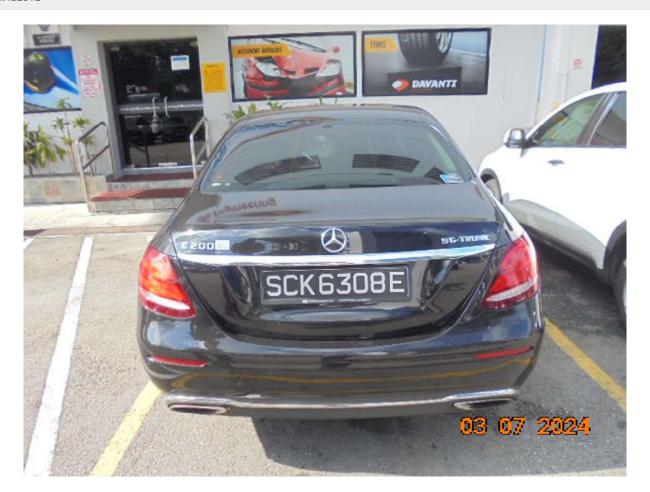
Policyholder's Signature / Date & Time

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

INVESTIGATION CHIGINEERING FOR THE























# CERTIFICATE OF INSURANCE

# MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : LOO CHIN NONG

Period of Insurance : 16 May 2024 To 15 May 2025

Policy No.

Vehicle No.

: SCK6308E : 1900083972-05

Engine/Motor No.

: 26492030106463 : WDD2130802A620168

Endorsement No. Issued Date

: 15 Apr 2024 22:22

Chassis No. Make/Model

: MERCEDES Benz E200 Sedan Avantgarde Engine Capacity/Tonnage : 1,991.00 CC

Sum Insured : Market Value

First Year of Registration : 2019

Driver Restriction

: NA

Off Peak Car : No

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 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 \$\$\$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 arreward, divining test, noting, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any scade or business or use for any purpose in connection with motor Transport

Loss of Use 2000cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1990, Section 95 of the Road Transport Act, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

Section 1 Fire - S0 Own Damage - \$1800 Theft - \$0 Flood Cover - \$1800

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

LOO CHIN NONG - \$1800 (Own Damage), \$1800 (Flood Cover)

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

Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62051818
 Cycle & Carriage Pandán Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other Approved Reparing Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6339 8200. Alternatively, you may refer to AIG website www.aig.sg.

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Mercedes-Benz Financial Services Singapore 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 1980, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504612255

CYCLE & CARRIAGE - VOTANG

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIGSGMOBILEAPP