### 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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 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
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 Date Of Report
 10/07/2017 15:01

 Date Of Accident
 08/07/2017 11:45

Exact Location Of Accident JUNCTION JLN JURONG KECHIL / JLN ANAK BUKIT

Country/State of Loss SINGAPORE

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKU2923H

Insured/Policyholder

Name Of Registered Owner TAN JOO KEE
NRIC No S1113940Z
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-96399746
Alternative Phone No OTHERS-96399746

Vehicle Particulars

Manufacturer SUBARU

Model FORESTER-2.0 XT (A)

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

If No, Please state action to be taken THIRD PARTY
Vehicle Category PRIVATE CAR

**Insurance Company** 

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 2100421316-01000

Cover Note Number

**Driver** 

Name of Driver TAN JOO KEE

NRIC No S1113940Z

Date Of Birth 18/03/1955

Occupation OUTDOOR

Date Of Driving Pass 13/08/1977

Driving Experience 39 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96399746

Fax Number

Contact Number OTHERS-96399746

EMail Address NOEMAIL

Address 81 TOH YI DRIVE

Postcode 596544

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

## General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions CLEAR
Road Surface DRY

### Other Information

Was any foreign vehicle involved in this accident? NO Was any body injured in the Accident? NO Was any other material or property damaged? NO I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

### **Details of Police Action**

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

### **Circumstances of Accident**

refer to sketch plan

### Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: OWNER FORGET TO BRING VIDEO

Was there any audio recorded? NO

# Singapore Accident Statement

Accident Date & Time: 8 7 2017	11.45am
Accident Location: Juniction Jln J	imong kechil/JLN ATVAK BUKIT
Vehicle Number: SKU 2923H	Make/Model: CUBARY FROBIER
Policyholder Name: TAN JOO KEE	
NRIC: 51113940 Z	Mobile: 96399746
Email:	
Insurance Company:	
Policy Number: 2100421316-01000	Cover Note:
	Third Party( ) Third Party Fire & Theft(
State Action Taken: Claim Own Policy( )	Claim Third Party() Reporting Only()
Driver Name: TAN JOO KEE	
NRIC: SIII 3940 Z	Mobile: 96399746
Date Of Birth: 18 3 1055	Driving Pass Date: 13 8 1977
Gender: Male( ) Female( )	Occupation: Indoor( ) Outdoor( )
Address: 81, TOH YI DRIVE SPORE	-a6-44
Is driver an employee of the Insured's Company:	Yes( ) No( )
If No, Relationship of the Driver with the Insured:	
Owner( ) Spouse( ) Friend( ) Relati	
Weather Conditions: Clear(/) Raining()	Others( )
Road Surface: Dry(/) Wet()	Others( )
Was any foreign vehicle involved in this accident?	Yes( $\checkmark$ ) No( )
Was any body injured in the Accident?	Yes( ) No(/)
Was there any video captured by Car Camera?	Yes(/ ) No( )
Number of Passengers (Including Driver): 2	
Was the accident reported to the police?	Yes( ) No( ) Attach Police Report, if any
3 <sup>rd</sup> Party Name:	
Vehicle Number: GT 1374 B	Make & Model:
Venicle Number: GT 1374B	Mobile:
Vitness Details (if any):	1
Other Details (if and)	
Other Details (if any):	, sleetch plan
100 (0)	
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### SKETCH PLAN

# IMPORTANT NOTICE

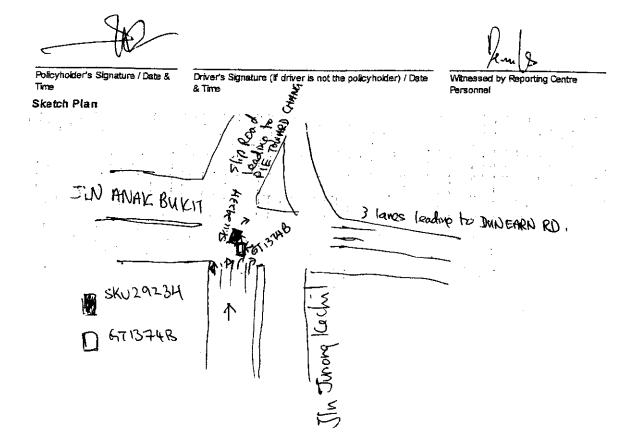
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.
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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.
- Sy 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)

funderstand, 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 (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 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, involces, 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.



Describe Circumstances of the Accident
I Was going to Duneaux Ad Grow my house at 81 Thy DINE at
about 11:4days on SIT 2017 along The Turong keeps Stopping at the Traffic
light Janction with my vehicle SKU 2923H stopping out 2nd lane
from the left. My lane allowed me to either go straight to
slip road leading to PIE in direction of change Aichort or turn
right to Duneam Road which was my distensition vehicle
GIT1374H Was at my right side at the Traffic light Junction
which only allow the yelide to Turn right only when
the Troffic light turned green with the green Arrow to
turn right I move forward and started to Turn right KLEWING to my land on the left lang into Jly Arak Bukit
States and the state of the sta
drove and crashed into my let hand back of my lethicle

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

Witnessed by Reporting Centre Personnel



HOTLINE TEL: (65) 6419-3000 FAX: (65) 6415-3723

# **CERTIFICATE OF INSURANCE**

NOTOR YENGLES (THRO-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 188) MOTOR YENGLES (THRO-PARTY RISKS AND COMPENSATION) RILLES, 1966 ROAD TRAMPORT ACT, 1987 (MALAYSIA) SIGTOR VENICLES (THRO-PARTY RISKS) RILLES, 1988 (MALAYSIA)

SUBARU AUTO PROTECTOR

**CERTIFICATE NO. 2100421316-01000** 

(This before certains in indigent to GET)

OWN DAMAGE EXCESS \$\$1400.00 (1)

WINDSCREEN EXCESS \$\$100.00

(For profession able Elem 1 (Newspaper 2005)

SUM INSURED Market Value

INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

SKU2923H

2) NAME OF INSURED

TAN JOO KEE

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

16 Jul 2016

4) DATE OF EXPIRY OF INSURANCE

15 Jul 2017

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE"

SUBJECT TO AGE CONDITION : All Age Conditi

a) The Insured.

b) Any other person who is driving on the Insured's order or with his permission.

This policy will indemnify the Insured or any authorised driver only it he/she meets the age conditions.

A Young and/or insuperinced Orlver Excess (YVINPT) of \$53,000.00, in additional to the
Policy Excess, applies to You and any Authorised Orlver (named or unnamed) if You are or the said

Authorised Driver is below the age of 23 and/or has isses than 2 years' driving experience.

Provided that the person driving is permitted in accordance with the iterating or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disquested by order of a Court of Lew or by reason of any exactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE"

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for him or rewards, sulfon, driving test, racing, pace-making, reliability trial, ap the carriage of goods other than semples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

APPROVED REPORTING CENTRES / SUBARU ALTHORISED REPAIRERS

1. Motor Image Enterprises Pie Ltd - 19 Lor 8 Tos Payoh (Tel: 6417 0100)
APPROVED REPORTING CENTRES / AKS AUTHORISED REPAIRERS (FOR CLASIAS-RELATED REPAIRS)
2. ComfortDeign Engra - 255 Braddell RG (Tel: 63537118) 3. DPS Brody & Plaint Workshop - 209 Panden Gerdene (Tel: 55684501)
4. Ethoz - 30 Built Batoli Creg(Tel:96547777) 5. Gless-Fix - 32 Ubl Ave 3 (Tel: 62780887) - For windscreen only
6. Kan Fook Sing Motor - 61 Delu Laren 12 (Tel: 67479500) 7. Lei Hust (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 6438110)
8. Move Automotive - 1008 Build Mersh Laren 3 (Tel: 62723922) 9. Progressive Automotive - 3022A Ubl Rd 1 (Tel: 87415336)
10. SME Motor - 1 Kakt Built Ave 6 Bit D (Tel: 67478108)

LOSS OF USE: Loss of Use 10 Days (1500 - 1600cc) - Refer to policy wordings for details

\* NAMED DRIVER NA

HRRE PURCHASE COMPANY United Overseas Bank Limited

"EMPLOYER'S LOAN"

"Limitations areademis importative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and

Section 95 of the Road Transport Act, 1987 (Melayele), ere not to be included under these headings.

1 / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (There-Party Risks and Compensation) Act (Chepter 189) and Part IV of the Roed Transport Act, 1987 (Malaysia).

Issued in Singapore 7 Jul 2016

AIG Asia Pacific Insurance Pte. Ltd.

500619-212 TAN CHONG CREDIT SUBARU-TEY 911 BUKIT TIMAH ROAD SINGAPORE 589622

ORIGINAL

TOOLNE

AIG Building, 78 Shenton Way #07-16 Singapore 079120

AIG Asia Pacific Insurance Pte. Ltd.

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