

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 truthful and accurate as possible. Any wilful misrepresentation or withholding 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

Date Of Report	18/09/2017 18:26
Date Of Accident	18/09/2017 14:55
Exact Location Of Accident	ALONG UPP SERANGOON RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG537P
Insured/Policyholder	
Name Of Registered Owner	DIREK@KOK SENG SAE THAM
NRIC No	S7074273Z
Email Address	DIREKTHAM@163.COM
Mobile Phone No	(LOCAL) +65-86080233
Alternative Phone No	Office-86080233

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	2100482613
Cover Note Number	

Driver

Name of Driver	DIREK@KOK SENG SAE THAM
NRIC No	S7074273Z
Date Of Birth	29/08/1970
Occupation	INDOOR
Date Of Driving Pass	18/02/1994
Driving Experience	23 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86080233
Fax Number	
Contact Number	OFFICE-86080233
E-Mail Address	DIREKTHAM@163.COM
Address	BLK 525 SERANGOON NORTH AVE 4 #04-64

Postcode	550525
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	SIDE SWIPE
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

PLEASE REFER AS ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD9285U
Vehicle Make/Model/Colour	TAXI/BLUE
Details Of Properties	
Name of Driver	MR TAN
NRIC/Passport Number	
Contact Number	97853227
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name	MR LAM
Approximate Age	40
Injuries Sustain	
Injured person in which vehicle?	SHD9285U
Were seat belts worn?	
Was injured conveyed to hospital by ambulance?	

Address
Postcode

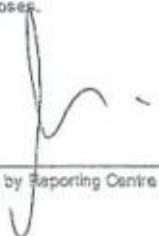
Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

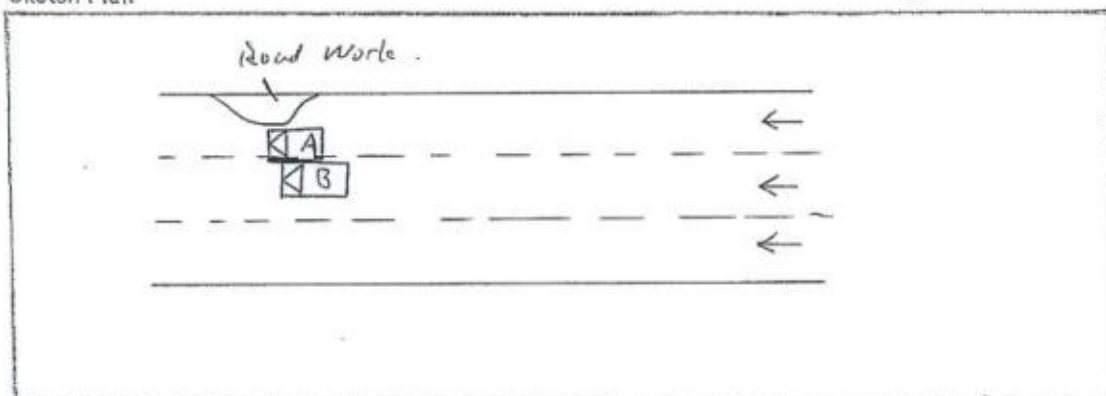
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 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
 8. Consent under the Personal Data Protection Act (PDPA)
- I understand, 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 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' 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 & Time


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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

while driving along Upper Strangers Rd, my vehicle slightly move to the centre lane to avoid the road work ahead - Taxi B came from behind and scratch over my vehicle left portion.


Inside the Taxi, there was 2 passengers, one injured (neck pain, complained by the passenger. He will go and see to hospital immediately. When asked ambulance needed, he said no need! The taxi driver was alright.

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 & Time


Witnessed by Reporting Centre Personnel

Accident Sketch Plan



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Direk @ Kork Song Sae Tham
VEHICLE NUMBER : SLG 537 P
DATE/TIME OF ACCIDENT : 18 September 2017 / 14:55 pm
PLACE OF ACCIDENT : Upper Serangoon Road
THIRD PARTY VEHICLE (IF ANY) : SHD 9285 U

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

SENTOSA To HOME.
(Had lunch) then went Home

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Side Swipe

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

YES.

Direk
Name:

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

Accident Sketch Plan

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that DIREK @ KOK SENG SAE THAM . TEL 86080233
NRIC/FIN S7074273Z has reported to the Police a non-injury traffic accident
which occurred at Along Upper Serangoon Road
on 18/09/2017 @ 1455hrs involving the following vehicles:

SLG537P – Complainant
SHD9285U – Mr Tan , Tel 97853227

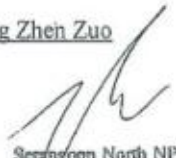
- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT T140161 Ong Zhen Zuo

Date: 18/09/2017 Time: 1530hrs

S/D Ref: 10

Police Post/Unit: Serangoon North NPP

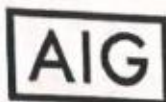

Serangoon North NPP
Blk 408 Serangoon North Ave 1
#01-709 Singapore 550108
Tel: 1800 284 9999

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

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Version, as of 15 Jan 2002

Accident Sketch Plan



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

COVER NOTE

Cover Note No. 2100482613

Date 14 Sep 2016

The following risk described in the Schedule is hereby HELD COVERED in the terms of the applicable Company's policy issued to the Policyholder.

SCHEDULE

Policyholder	Direk @Kok Seng Sae Tham		
Age Condition	All Age Condition	Registration No.	
Policy Type	TOYOTA AUTO PROTECTOR	Make/Model	TOYOTA New Wish
Effective Date	20 Sep 2016	CC/Tonnage	1,798.00
Expiry Date	19 Sep 2017	Engine No	2ZR1837448
Excess	S\$600.00	Chassis No	JTDGG20W00J005302
		Year of Registration	2016
		Hire Purchase Company	DBS BANK LTD

This policy is subject to driver's age condition. The policy will indemnify the insured or any authorised driver only if he/she meets the age condition. Please refer to policy terms and conditions.

In addition to the Policy Excess, a Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00 (before GST) will apply to You or Your Authorised Driver who is below the age of 23 (in case of All Age Condition policies) and/or has less than 2 years' driving experience. The YIDR Excess is not applicable to Named Driver policies.

Usage of vehicle only for the following purposes:

1. Use only for social, domestic and pleasure purposes and for the Policyholder's business
2. Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business and use for social, domestic or pleasure purposes.

Please note that acceptance of the risk is subject to our final acceptance and terms and conditions applicable to the policy. Should you require any change to the insurance, please contact us immediately. Otherwise, any change will not be covered under the policy.

The Company may cancel this cover by notice in writing and the insurance will be terminated and a proportionate part of the annual premium for the insurance will be charged for the time the Company has been on risk.

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE OF INSURANCE

I/We hereby certify that this cover note is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Issued in SINGAPORE

AIG Asia Pacific Insurance Pte. Ltd.

IMPORTANT NOTICE
THIS COVER NOTE IS VALID FOR
60 DAYS FROM THE FIRST DAY OF
THE POLICY PERIOD. APPLICABLE
TO CORPORATE POLICIES ONLY.


AUTHORISED REPRESENTATIVE

ORIGINAL

IASAZD

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7074273Z



Name
**DIREK
@KOK SENG SAE THAM**

Race
CHINESE
Date of Birth **29-08-1970** Sex **M**
Country of Birth
THAILAND

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: **S7074273Z**

Name

DIREK

Birth Date: **29 Aug 1970**

Issue Date: **15 Feb 2005**



IDRC No: **S7074273Z**



Nationality
MALAYSIAN
Date of Issue
11-02-2008

APT BLK 525 SERANGOON NORTH AVENUE 4 #04-64
SINGAPORE 550525

S7074273Z

20K032014

8912541

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor cars <= 3000 kg with <= 7 passengers,
exclusive of the driver; and motor tractors
, vehicles <= 2500 kg

PASS DATE
15 Feb 1994

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

