

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	25/11/2017 08:53
Date Of Accident	24/11/2017 15:45
Exact Location Of Accident	CTE TWDS AMK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SF77Y
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Insured/Policyholder

Name Of Registered Owner	MRS YEO SAI BOO NEE LEE SWAN NYA
NRIC No	S0066894Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96233038
Alternative Phone No	Home-68357052

Vehicle Particulars

Manufacturer	MAZDA
Model	2-1.5 SEDAN L SP.6EAT (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	2100459240 - 01000
Cover Note Number	

Driver

Name of Driver	SABRINA YEO SIOK BUAY
NRIC No	S7729126A
Date Of Birth	25/10/1977
Occupation	INDOOR
Date Of Driving Pass	25/06/1996
Driving Experience	21 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96233038
Fax Number	
Contact Number	
EMail Address	SABS21@HOTMAIL.COM
Address	9 VAUGHAN ROAD

Postcode	358089
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	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

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB5983A
Vehicle Make/Model/Colour	
Details Of Properties	

Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan

SKETCH PLAN

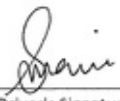
IMPORTANT NOTICE

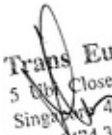
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

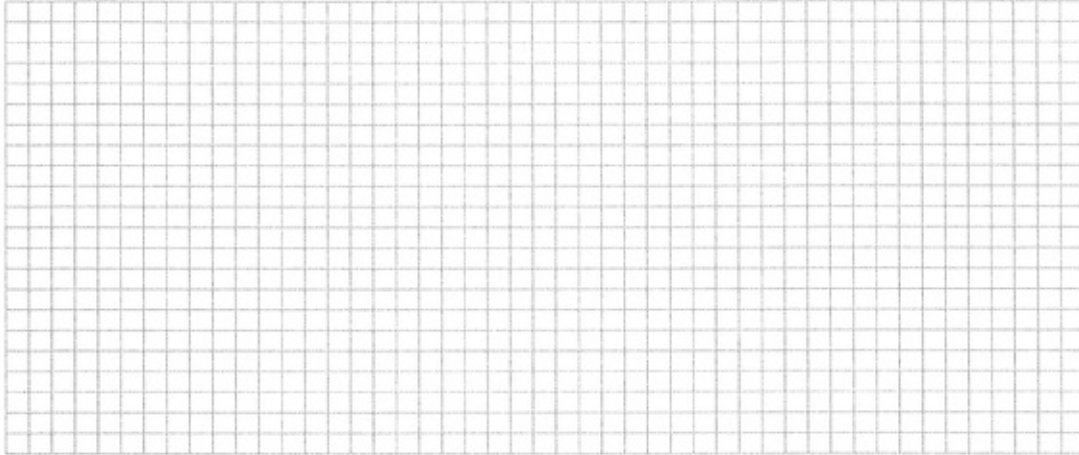
Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 24/11/17 1720hrs


Reporting Centre Person's Signature
Name:
NRIC/FIN No.:

Trans Eurokars Pte Ltd
501, Close
Singapore 408605
Tel: 674 3003 / 6749 4333
Fax: 674 3000

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE NO: SF 77 Y

ACCIDENT DATE: 24/11/2017

CONTACT NUMBER: 96233038 / 68357052

ACCIDENT TIME: 1543h m

EMAIL: sabs21@hotmail.com

LOCATION: CTE tudu Ang mo kio

I was on the third lane of the CTE trying to filter to the second lane when suddenly an SMRT taxi (SHB5983A) ~~cut into~~ ^{my car} from the fourth lane cut into my lane. I could not stop in time and hit him ~~from~~ ^{back} at the right back area near the wheel.

We then got out of the vehicles and exchanged details.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLICY.

PLEASE CHECK YOUR POLICY FOR MORE INFORMATION

PLEASE STATE: ☐ CLAIM OWN POLICY ☐ CLAIM THIRD PARTY ☒ REPORTING ONLY

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: 24/11/17 1720h m.

Trans Eurokars Pte Ltd
5 Ubi Rd
Singapore 40865
Tel: 6424 1111 / 6749 4333
Fax: 6749 4333

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



HOTLINE TEL: (65) 6410 5000
FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

TRANS EUROKARS AUTO PROTECTOR

CERTIFICATE NO. 2100459240-01000

OWN DAMAGE EXCESS \$5600.00 (1)
WINDSCREEN EXCESS \$5100.00

(Windscreen excess is waived if the repair is done at Trans Eurokars Pte Ltd)

SUM INSURED Market Value
INSURING WITH COE/PAF Yes
SF77Y

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

Mrs Yeo Sai Boo Nee Lee Swan Nya

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

1 Apr 2017

4) DATE OF EXPIRY OF INSURANCE

31 Mar 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *
SUBJECT TO AGE CONDITION : All Age Condition

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 if he/she meets the age conditions.

A Young and/or Inexperienced Driver Excess ("YIDR") of \$53,000.00, in addition to the

Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said

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

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment 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 hire or rewards, tuition, driving test, racing, pace-making, reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

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

1. Trans Eurokars Pte Ltd - No. 5 Ubi Close (Tel: 63958899)

2. ComfortDelgro (Pte) Ltd - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)

4. Bihox - 30 Bukit Batok Cres (Tel: 66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only

6. Kan Fook Sing Motor - 61 Delu Lane 12 (Tel: 67479566) 7. Lai Hui (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)

8. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)

10. SME Motor - 1 Kaki Bukit Ave 6 Bldg D (Tel: 67476106)

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

NAMED DRIVER NA

HIRE PURCHASE COMPANY OCBC Bank Ltd
/ EMPLOYER'S LOAN

* Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates 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 At Singapore 20 Mar 2017

AIG Asia Pacific Insurance Pte. Ltd.

503599-190
ARF (AP) PTE LTD - MAZDA
7 MAXWELL ROAD #01-100
ANNEX B MND COMPLEX
SINGAPORE 069111

AUTHORISED REPRESENTATIVE

ORIGINAL.

SS741LU.

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

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AIG Asia Pacific Insurance Pte. Ltd.

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Ch. Rep. No. 20102000004

0000100100113

S 710 03584



REG. NO. S0066894Z



Myo Type: C
B + 20-02-1954

Address
9 VAUGHAN ROAD
SINGAPORE 1335



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0066894Z



Name
MRS. YEO, SAK BOO WEE LEE
SWAN NEE, BERNEDETTE
MARGARET



Race
CHINESE
Date of Birth
31-12-1952
Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

991426906F

S7729126A

SABRINA YEO SIOK BUAY

Birth Date: 25 Oct 1977

Issue Date: 27 Jun 2006



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7729126A

Name

SABRINA YEO SIOK BUAY

Race

CHINESE

Date of birth

25-10-1977

Country of birth

SINGAPORE

Sex

F




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

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 25 Jun 1996

NP 428A

Licence No: S7729126A



3909271



NRIC No: S7729126A



Date of issue

05-07-2006

Address

9 VAUGHAN ROAD

SINGAPORE 358089

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

