SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number
Contact Number

EMail Address

Address

- 1. Please report <u>correctly</u> 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 policyliability 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.

	sent to the archiving of this report at the centre and to copies of the report being made available
aforesaid.	ACCIDENT CTATEMENT
	ACCIDENT STATEMENT
Date Of Report	29/11/2017 14:58
Date Of Accident	29/11/2017 11:35
Exact Location Of Accident	ALONG SOUTH BRIDGE ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SBU8283M
Insured/Policyholder	
Name Of Registered Owner	GOH LEI ENG
NRIC No	S2007399C
Email Address	LILYLEGOH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92361903
Alternative Phone No	Others-92361903
Vehicle Particulars	
Manufacturer	AUDI
Model	A4 1.8 TFSI MU (EU6)
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?	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	2100365383-03000
Cover Note Number	
Driver	
Name of Driver	GOH LEI ENG
NRIC No	S2007399C
Date Of Birth	14/11/1951
Occupation	INDOOR
Date Of Driving Pass	04/08/1979
Driving Experience	38 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92361903
Face Nicosia an	

OTHERS-92361903

LILYLEGOH@GMAIL.COM 15 HARTLEY GROVE Postcode Was driver an employee of the Insured's Company 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 - OPENING DOOR OF VEHICLE

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) NO soliciting/offering accident claims assistance. 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

I parked the car at South Bridge Road near Erskine Road entrance. I opened the door intending to get out of car, another car licence plate SLE 5069B banged into my door (it was about 11.40am, clear sky).

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

SLE5069B Vehicle Registration Number Vehicle Make/Model/Colour **HONDA/SILVER**

Details Of Properties

Name of Driver LEE HAK SENG

NRIC/Passport Number

Contact Number 97684272

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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- 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.
- 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.
- 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:
 - 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.

Rolicyholder's Signature

Driver's Signature

(If driver is not the policyholder)

Date & Time:

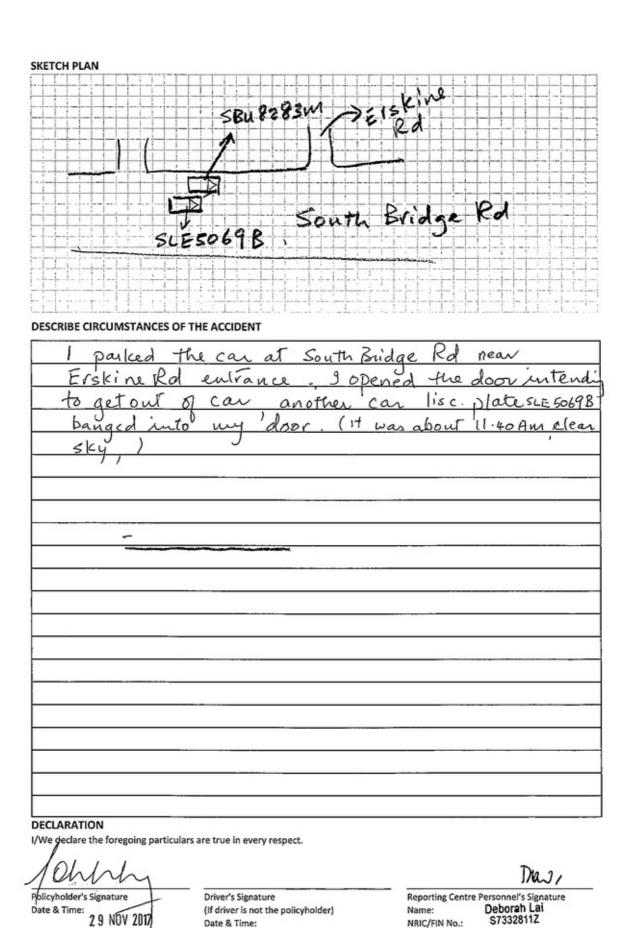
Reporting Centre Personnel's Signature Name: Deborah Lai

NRIC/FIN No.:

Deborah Lai S7332811Z

SIARMIC SketchPlanForm_V

1



Insurance Certificate

GIARMC SteichPfanForm_V3



CERTIFICATE OF INSURANCE

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)

AUDI AUTO PROTECTOR

CERTIFICATE NO. 2100365383-03000

OWN DAMAGE EXCESS S\$800.00 (1) WINDSCREEN EXCESS S\$100.00

SUM INSURED Market Value INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

SBU8283M GOH LEI ENG

2) NAME OF INSURED

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

22 Feb 2017

4) DATE OF EXPIRY OF INSURANCE

21 Feb 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 \$\$3,000.00, in additional 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 has been so permitted and 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 / AUDI AUTHORISED REPAIRERS

1. Audi Customer Service Center - 55 Ubi Road 1 (Tel: 63662323)

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

2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body 8. Paint Workshop - 209 Pandan Gardens (Tel: 65684501)
4. Ethoz - 30 Bukit Batok Cres(Tel:66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only
6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Mong 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 Bik D (Tel: 67476106)

LOSS OF USE Loss Of Use 15 days Replacement Car only for repairs at Audi Customer Service

* NAMED DRIVER NA

HIRE PURCHASE COMPANY NA /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 in Singapore 25 Jan 2017

AIG Asia Pacific Insurance Pte. Ltd.

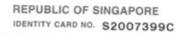
504125-219 PREMIUM LEASING - KATL 281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE SINGAPORE 159938

AUTHORISED REPRESENTATIVE

ORIGINAL

SSCENI









GOH LEI ENG

吳 丽 英 Race

CHINESE 14-11-1951 F MALAYSIA

820073990

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES) PASS DATE Motor Cars and Motor Tractors the weight of 04 Aug 1979 which unladen does not exceed 2500 kilograms NP 428A

NRIC No. S2007399C

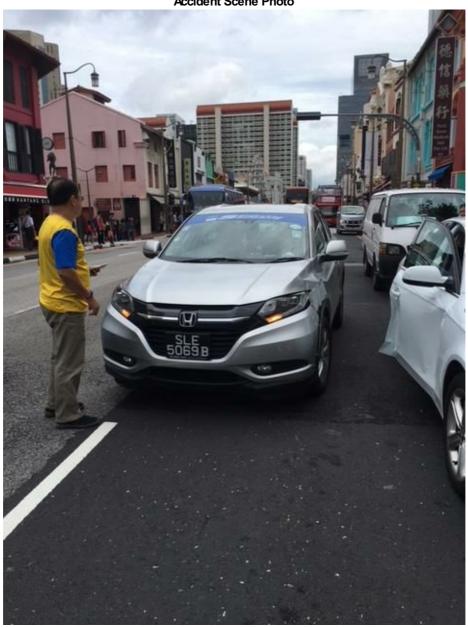


29-06-2011

15 HARTLEY GROVE SINGAPORE 457884

4747249

Accident Scene Photo





Accident Photo











Accident Photo



Chassis Number

