

## 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	12/12/2017 16:48
Date Of Accident	12/12/2017 14:45
Exact Location Of Accident	BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT6669H
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### Insured/Policyholder

Name Of Registered Owner	DESMOND SEAH CHIN KIAT
NRIC No	S7324294J
Email Address	DESMODSEAH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94894389
Alternative Phone No	Office-NOPHONE

### Vehicle Particulars

Manufacturer	BMW
Model	520I 2.0L AT D/AB 2WD 4DR GAS/D NAV
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?	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	2100438733-02
Cover Note Number	

### Driver

Name of Driver	DESMOND SEAH CHIN KIAT
NRIC No	S7324294J
Date Of Birth	06/07/1973
Occupation	INDOOR
Date Of Driving Pass	31/05/1994
Driving Experience	23 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94894389
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	DESMODSEAH@GMAIL.COM
Address	

Postcode	
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	WET

#### 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?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKV4702K
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

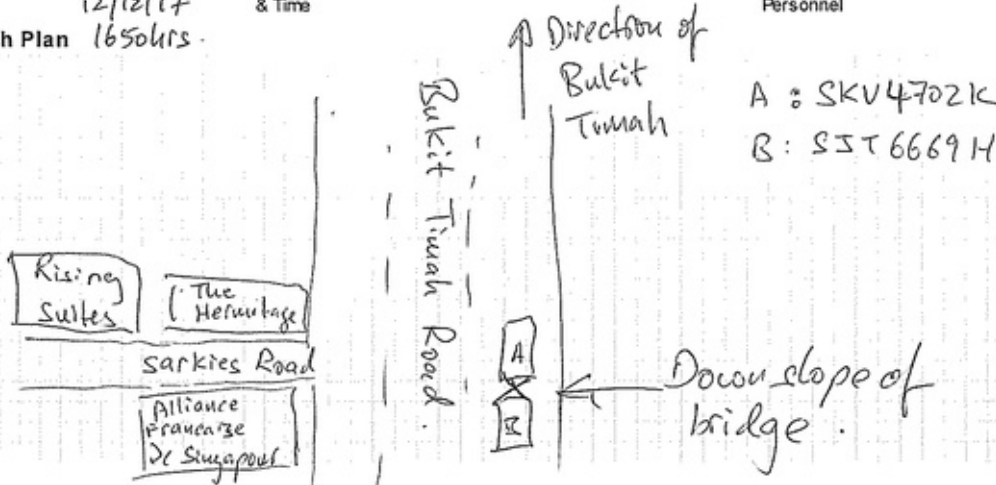
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**  
I understand, 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' 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  
12/12/17

Sketch Plan 1650hrs

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


Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident	LICENSE PLATE NUMBER:
ACCIDENT DATE: 12/12/17	CONTACT NUMBER: 94894389.
ACCIDENT TIME: 1445hrs	EMAIL: DESMONDSEAH@GMAIL.COM
LOCATION:	
→ Bukit Timah Road opposite of "Alliance Française de Singapour." on the <del>1st lane</del> 1st lane, down slope of the bridge. (right most lane)	
→ Direction of Bukit Timah Road.	
→ My car SST6669H hit car SKV4702K at the down slope of the bridge. I did not brake in time. There was heavy traffic due to one lane closure on the 3rd lane (left most). I hit the SKV4702K from behind as I did not brake in time.	
→ Road was wet.	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.	
Please state:	
<input checked="" type="checkbox"/> Claim Own Policy <input type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input type="checkbox"/> Reporting Only	

#### Declaration

We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature / Date & Time  
 12/12/17  
 1650hrs

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

  
 Witnessed by Reporting Centre Personnel

## AUTOPLUS PRIVATE VEHICLE

Policy No. : 2100438733-02

Period of Insurance : 05 Dec 2017 to 04 Dec 2018

Issued Date : 01 Dec 2017

## ABOUT THE POLICYHOLDER

Name of Policyholder : Desmond Seah Chin Kiat  
 Address : 310B ANCHORVALE ROAD  
 #13-21  
 SINGAPORE 542310  
 Occupation/Nature of Business : Executives

## ABOUT THE VEHICLE

Registration No. : SJT6669H Engine Capacity/Tonnage : 1,997.00 CC  
 Chassis No. : WBAXG12040DX51413 Engine No. : A9210318N20B20B  
 Seating Capacity : 4 First Year of Registration : 2012 Body Type : Sedan  
 Make/Model : BMW 520i 2.0 (Sedan)  
 Hire Purchase Company/Employer's Loan : United Overseas Bank Limited

## ABOUT THE COVER

Sum Insured : Market Value Off Peak Car : No  
 Driver Restriction : NA Insuring with COE/PAIF : 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 authorized driver only if he/she meets the specified age condition

You have to pay an additional sum of \$2,000 as "Young and/or Inexperienced Driver Excess" (YIDR) if You are or Your Authorized Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

## 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 or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

## Other Key Policy Benefits :

Act of God, Dealer (First 3 years from original registration) + AIG Authorized Workshops, Waiver of Excess, PA to Authorized Driver / Uninsured Passengers - \$10000, PA Insured - \$50000, Key Replacement Cover - \$500, Strike, Riots and Civil Commotions, Loss of Use 1500cc - 1600cc Optional, In-Car Camera Excess Waiver, 162D Protector

## EXCESS

Section 1  
 Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2  
 Property Damage - \$0

Windscreen : \$100

## Named Driver

Desmond Seah Chin Kiat - \$500 (Own Damage), Boek Ming Gai - \$500 (Own Damage)

## PREMIUM

Premium : \$ 1,025.32  
 GST (7%) : \$ 71.77

Total : \$ 1,097.09

Your Premium includes the following discount(s):

AIG On the Go App - 11.00%, No Claim Discount - 50%



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S7324294J**

Name: **DESMOND SEAH CHIN KIAT  
(DESMOND SHE QINGJI)**

Birth Date: **06 Jul 1973**  
Issue Date: **27 May 2004**


**001227100K**

**REPUBLIC OF SINGAPORE**  
IDENTITY CARD NO. **S7324294J**

Name: **DESMOND SEAH CHIN KIAT  
(DESMOND SHE QINGJI)**  
**余清吉**

Race: **CHINESE**  
Date of Birth: **06-07-1973** Sex: **M**  
Country of Birth: **SINGAPORE**





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

**Class 3** Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg

**PASS DATE**  
**31 May 1994**

NP 428A



Licence No: **S7324294J**

**2067971**



NRIC No: **S7324294J**



Blood Group: **A+** Date of Issue: **27-05-1994**

**APF BLK 310B ANCHORVALE ROAD #13-21  
SINGAPORE 542310**

NRIC No: **S7324294J** Date: **27/11/2017**

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo

