

## 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	29/12/2017 15:38
Date Of Accident	28/12/2017 15:45
Exact Location Of Accident	25 CHANGI SOUTH AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ5209M
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### Insured/Policyholder

Name Of Registered Owner	ONG POH CHOO
NRIC No	S1723612A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97670430
Alternative Phone No	Others-97670430

### Vehicle Particulars

Manufacturer	NISSAN
Model	TEANA 2.0 XL CVT
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	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	2100493467-01
Cover Note Number	

### Driver

Name of Driver	LIM FOOK PIEW
NRIC No	S1606023B
Date Of Birth	25/06/1963
Occupation	INDOOR
Date Of Driving Pass	21/07/1982
Driving Experience	35 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96213553
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 26 BUKIT BATOK ST 52 #23-05
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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

KINDLY REFER TO SKETCH PLAN.

#### 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	SGX9785A
Vehicle Make/Model/Colour	TOYOTA WISH
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KELVIN LIANG
NRIC/Passport Number	
Contact Number	98166682
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

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#### 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

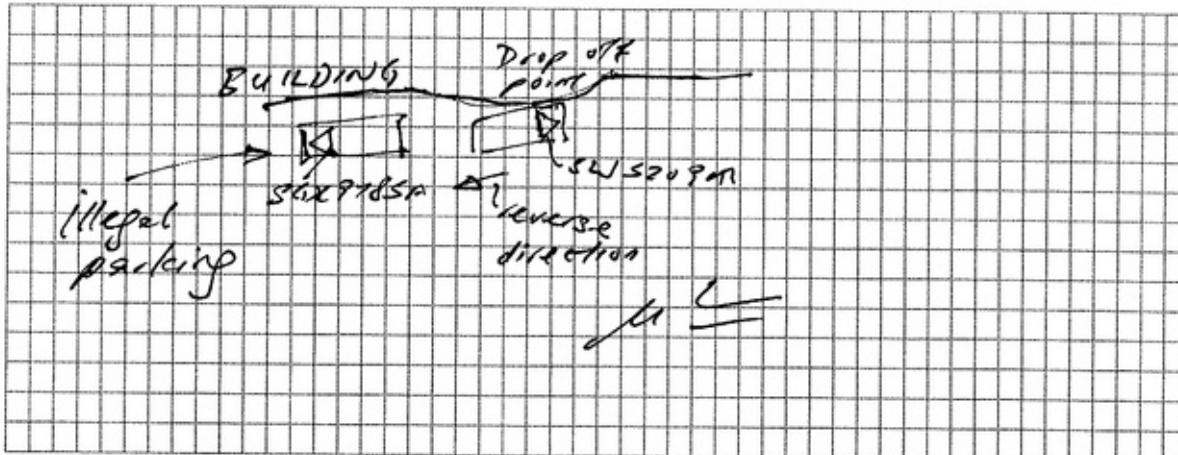
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

After I drop off ~~passenger~~ passenger at the drop off point, I need to reverse in order to drive off and in the process of reversing, I accidentally parked into a car that was parked just behind (or the side). It was raining and visibility was poor then. As a result the back of my left bumper hit onto the left bumper of SGX978SA. There is no passenger or driver inside SGX978SA.

### **Important:**

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.

✓

- Reporting Only
- Claim OD
- Claim TP
- Claim OD/TP at other workshop

### **DECLARATION**


I/WE declare the foregoing particulars are true in every respect.

Policyholder's signature  
Date & Time


Driver's Signature  
(if driver not the policyholder)  
Date & Time 29/12/17  
1510hrs

Reporting Centre Personnel's Signature  
Name:  
Nric/Fin No.

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1723612A



Name  
ONG POH CHOO




五宝珠

Race  
CHINESE

Date of Birth  
19-02-1965

Sex  
F

Country of Birth  
SINGAPORE



2369081



NRIC No. S1723612A



Blood Group  
B+

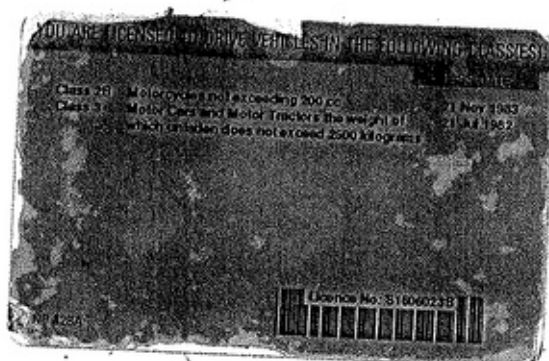
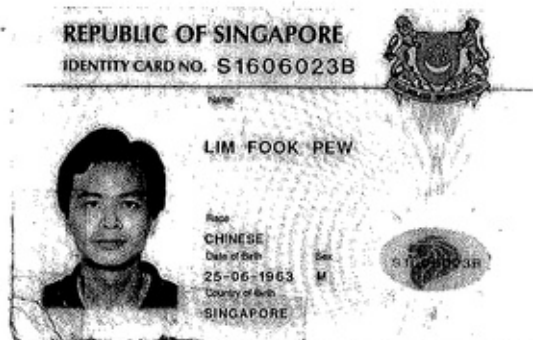
Date of issue  
10-09-1994

BLK 26 BUKIT BATOK STREET 52 #23-05  
SINGAPORE 659247

NRIC No. S1723612A

Date: 18-02-2004

No. 4873462





To: AIG

RE: ACCIDENT REPORT

I, Ong Poh Choo, NRIC # S1723612A  
hereby authorized my husband, Mr. Lim Fook Pew  
of NRIC # S1606023B to lodge the  
accident on my behalf.

Attached my medical certificate for your  
easy reference.

Thank you.





# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ong Han Choo  
Period of Insurance : 14 Dec 2017 To 13 Dec 2018  
Engine No. : M7C004300488  
Chassis No. : MNTDBAL3320005900

Vehicle No. : SL2820044  
Policy No. : 2130493455-01  
Endorsement No.  
Issued Date : 10 May 2017

### ABOUT THE COVER

Make/Model : NISSAN TEANA 2.0 PREMIUM  
Engine Capacity/Tonnage : 1,997.00 CC  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2015  
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 behalf 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 S\$200 as "Young driver Insurance Cost Excess" (YICER) if you are a first authorized driver licensed in Singapore is under the age of 25 and has less than 2 years driving experience.

Age Condition : All Age Condition

#### Limitation as to use\*

Use only for social, pleasure and business purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving school, driving test, racing, competition, stunt driving, or any other use involving the carriage of goods other than intended in connection with any trade or business, or use for any purpose in connection with motor sports.

Limit of Use: Road - Motorcar

\* Excludes motor insurance for Section 6 of the Motor Vehicle Third-Party Rules and Compensation Act (Cap. 185) and Section 60 of the Road Transport Act, 1987 (Singapore) and not Motor Insurance under these headings.

### EXCESS

Section 1  
Fire : \$0, Own Damage : \$100, Theft : \$0, Third Party : \$0

Section 2  
Property Damage : \$0

Windscreen : \$100

#### Named Driver and Excess (where applicable)

Ong Han Choo : \$100 (Theft Damage)

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

1. E2 AutoCare, Add: No. 1, Southview Road, Singapore 600001  
2. AutoCare, Add: No. 1, Southview Road, Singapore 600001  
3. E2 AutoCare, Add: No. 1, Southview Road, Singapore 600001  
4. E2 AutoCare, Add: No. 1, Southview Road, Singapore 600001  
5. E2 AutoCare, Add: No. 1, Southview Road, Singapore 600001

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour customer assistance hotline at 438 8338 8338. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or call 800 800 8000 for more details and download form for use in Singapore.

### IMPORTANT NOTES

Here Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

This policy is issued under the policy in which this Certificate of Insurance is issued in accordance with the provisions of the Motor Vehicle Third-Party Rules and Compensation Act (Cap. 185) and the Road Transport Act, 1987 (Singapore) and Motor Vehicle Third-Party Rules, 1987 (Singapore).

COO/17/17

COO/17/17/17

*Smile*



Accident Photo



Accident Photo



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