

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	10/01/2018 14:10
Date Of Accident	09/01/2018 14:50
Exact Location Of Accident	BEDOK SOUTH AVE 1 TOWARDS BEDOK CENTRAL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLP1174Z
Insured/Policyholder	
Name Of Registered Owner	KHOO CHUAN HUAT
NRIC No	S1306310I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98801191
Alternative Phone No	OTHERS-98801191
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 CVT (A)
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?	NO
If No, Please state action to be taken	THIRD PARTY
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	1700009060
Cover Note Number	
Driver	
Name of Driver	KHOO CHUAN HUAT
NRIC No	S1306310I
Date Of Birth	31/12/1958
Occupation	INDOOR
Date Of Driving Pass	09/11/1979
Driving Experience	38 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98801191
Fax Number	
Contact Number	OTHERS-98801191
Email Address	NOEMAIL

Address	BLK 833 TAMPINES STREET 83 #07-26
Postcode	520833
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	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TAMPINES NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5871999 - FAX NO: 65871699
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180110/2001

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	FX7326S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MUHAMMAD KHAIROL BIN SELAMAT
NRIC/Passport Number	S8532652Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	KHOO CHUAN HUAT
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SLP1174Z
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	


SKETCH PLAN


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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:


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

SKETCH PLAN

Bedok
South Ave 1
Towards
Bedok Central
opp
Esso



Esso

(A) SLP 11748

(B) FX 7326S


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 09-01-2018 at about 1450hrs. I was travelling along Bedok South Ave 1 towards Bedok Central Opposite Esso Kiosk. At the junction, I was on standby to turn to my right. While waiting for the main road to clear, all of a sudden I felt an hard impact from the rear. Then I realised a bike FX 7326S had collided onto my rear.

Police Report 1/20180110/2001

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:


Reporting Centre Personnel's Signature
Name: ROSLI WAT/AB
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180110/2001

1 of 4

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20180110/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/01/2018 00:14		Vide Report No.: G/20180109/0115		Station Diary No.: 1	
Informant's Particulars					
Name of Informant: KHOO CHUAN HUAT			Address: APT BLK 833 TAMPINES STREET 83 #07-26 SINGAPORE 520833		
ID Type / ID No.: NRIC NO / S1306310I			Contact No.: Home/Office:		Mobile: 98801191
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 59	Date of Birth: 31/12/1958	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PROJECT ENGINEER			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/01/2018 14:40	Type of Location: Straight Road
Location: Along Road 1 BEDOK SOUTH AVENUE 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FX7326S	Motorcycle			Red		0
SLP1174Z	Car	MITSUBISHI	ATTRAGE 1.2 CVT	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLP1174Z	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1700009060	26/05/2017	25/05/2018



**SINGAPORE
POLICE FORCE**



T/20180110/2001

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Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20180110/2001

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MUHAMMAD KHAIROL BIN SELAMAT	ID No.	S8532652Z
Related Vehicle	FX7326S (Motorcycle)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	KHOO CHUAN HUAT	ID No.	S1306310I
Related Vehicle	SLP1174Z (Car)	Contact No.	98801191
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	09/01/2018	Date Discharge	09/01/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 09/01/2018 at about 1445hrs, I was driving my car Reg no: SLP1174Z Mitsubishi red in colour travelling along Bedok South Avenue 1 and was waiting to make a U-turn in front of the patrol station when suddenly I felt a hard impact and a bang. I then realized that a m/cycle Reg no: FX7326S had hit the rear of my car. I then went out of my car and assist the rider. As he was lying down injured on the road however we decided to not move him and called for ambulance.

When the ambulance arrived, the rider was checked however was not conveyed. The traffic police also arrived at scene and took down both our particulars of me and the rider. My car rear bumper was damaged and dented. The m/cycle front part was slightly damaged and not sure what other damages it have.

On the same day at about 1800hrs, I felt pain at the back of my neck and shoulder and went to Mount Avernia Hospital A & E and was given 3 days medical leave.



**SINGAPORE
POLICE FORCE**



T/20180110/2001

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Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

Report No. T/20180110/2001

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20180110/2001

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Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20180110/2001

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Sr Staff Sgt MUHAMAD FAISAL BIN MOHD SALEH

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI NG CHWEE THENG
Contact No.: 65476397

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
10/01/2018 00:14

Classification Of Case:



SIGNATURE

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 09.01.2018	TIME: 1450hrs	(hh:mm) 24 hrs Format
LOCATION Bedok South Ave 1 towards Bedok Central opp ESSO		
VEHICLE NUMBER 8LP 11742		
INSURED NAME KHOO Chuan Hui		
NRIC / FIN S13063107	CONTACT: 9880 1191	
MAKE Mitsubishi	MODEL Attrage 1.2 CVT	
Are you claiming under your own insurance policy for repair to your vehicle?		
() Yes, If No, Pls Select : (<input checked="" type="checkbox"/>) Third Party () Reporting Only		
INSURANCE COMPANY AIG		
TYPE OF POLICY (<input checked="" type="checkbox"/>) COMPREHENSIVE () THIRD PARTY () TPFT		
POLICY NUMBER: 1700009060		
NAME DRIVER :		(<input checked="" type="checkbox"/>) SAME AS INSURED
NRIC / FIN 813063107		CONTACT:
DATE OF BIRTH: 31.12.1958		
DRIVING PASS DATE: 09.11.1979		
OCCUPATION: (<input checked="" type="checkbox"/>) INDOOR () OUTDOOR		
GENDER: (<input checked="" type="checkbox"/>) MALE () FEMALE		
EMAIL ADDRESS:		() NO EMAIL
ADDRESS OF DRIVER: 933 Tampines St 85 #01-26 S(520833)		
Number Of Passenger Include Driver: Driver only		
Was driver an employee of the Insured's Company? () YES () NO		
If No, Relationship Of The Driver With The Insured		
(<input checked="" type="checkbox"/>) Owner () Spouse () Friend () Relative () Children () Sibling () Others		
Does The Driver Own Any Other Vehicle?: () YES (<input checked="" type="checkbox"/>) NO		
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:		
Insurance Company Of Driver's Own Vehicle		
Weather Conditions: (<input checked="" type="checkbox"/>) Clear () Raining () Drizzling () Others		
Road Surface : (<input checked="" type="checkbox"/>) Dry () Wet () Others		
Was Any Foreign Vehicle Involved In This Accident? () YES (<input checked="" type="checkbox"/>) NO		
Was Anybody Injured In The Accident? (<input checked="" type="checkbox"/>) YES () NO		
If YES, Injured details :		
Convey By Ambulance: () YES (<input checked="" type="checkbox"/>) NO		
Was There Any Video Capture By Car Camera? () YES (<input checked="" type="checkbox"/>) NO		
Was There Accident Reported To The Police? () YES (<input checked="" type="checkbox"/>) NO If Yes Attach Police Report		
Police Report Number (if any)		
Details Of 3rd Party		Contact
Veh B FX T5268 (ms16)		
Veh C		
Veh D		
Veh E		
Veh F		
Veh G		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S13063101



NAME
KHOO CHUAN HUAT

邱泉發

Race
CHINESE
Date of Birth
31-12-1958 Sex
M
Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S13063101
Name
KHOO CHUAN HUAT

Exp. Date 31 Dec 1958
Issue Date 25 Oct 2003

000549024C



IC No. S13063101



Blood Group Date of Issue
O+ 23-12-1993

40001A

REPUBLIC OF SINGAPORE

IC No.

Date:

No:

1885000

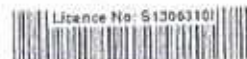
TP 425A

1330211

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
09 Nov 1979



Licence No. S13063101



CERTIFICATE OF INSURANCE

MITSUBISHI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Khoo Chuan Huat
 Period of Insurance : 26 May 2017 To 25 May 2018
 Engine No. : 3A92UGB3639
 Chassis No. : MMBSTA13AHH006069

Vehicle No. : SLP1174Z
 Policy No. : 1700009060
 Endorsement No. :
 Issued Date : 07 Jun 2017

ABOUT THE COVER

Make/Model : MITSUBISHI/ATTRAGE 1.2 CVT
 Engine Capacity/Tonnage : 1,193.00 CC Sum Insured : Market Value First Year of Registration : 2017
 Driver Restriction : NA Off Peak Car : No Insuring with COE/PAF : 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 authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDE") if You are or Your Authorised 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.

Loss of Use (15 days) 1500cc - 1600cc

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

EXCESS

Section 1
 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Khoo Chuan Huat - \$600 (Own Damage)

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

1. Cycle & Carriage Customer Service Centres (For windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64706688
 2. Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408559 67481000
 3. Cycle & Carriage Body & Paint Centre Add: 205 Pandan Gardens Singapore 609339 85684501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6260. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0509722790

C&C FULCO-CEDRIC(MIT)

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

55C255

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 63101

Vehicle Details

Vehicle No.: SLP1174Z

Vehicle to be Exported: No

Intended De-registration
Date: 31 Jan 2018

Vehicle Make: MITSUBISHI

Vehicle Model: ATTRAGE 1.2 CVT

Primary Colour: Red

Manufacturing Year: 2017

Engine No.: 3A92UGB3639

Chassis No.: MMB5TA13AHH006069

Maximum Power Output: 57.0 kW (76 bhp)

Open Market Value: \$13,287.00

Original Registration Date: 26 May 2017

First Registration Date: 26 May 2017

Transfer Count: 0

Actual ARF Paid: \$5,000.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry
Date: 25 May 2027

PARF Rebate Amount: \$3,750.00

Intended COE Rebate Details

COE Expiry Date: 25 May 2027

COE Category: A - Car up to 1600cc &
97kW (130bhp)

COE Period(Years): 10

QP Paid: \$52,000.00

COE Rebate Amount: \$48,449.00

Total Rebate Amount: \$52,199.00

The information contained herein is correct as at 09 Jan 2018

OK