

## 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	08/01/2018 16:58
Date Of Accident	08/01/2018 14:50
Exact Location Of Accident	CTE TO AYE - BRADDELL ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV6470R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIN WENSEN
NRIC No	S2656650I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93881027
Alternative Phone No	Others-93881027

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VELLFIRE-2.5 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	2100430254
Cover Note Number	

### Driver

Name of Driver	LIN WENSEN
NRIC No	S2656650I
Date Of Birth	18/05/1967
Occupation	INDOOR
Date Of Driving Pass	12/11/1998
Driving Experience	19 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93881027
Fax Number	
Contact Number	OTHERS-93881027
E-Mail Address	NOEMAIL

Address	71 JURONG WEST CENTRAL 3 #14-17
Postcode	648335
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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

PLEASE REFER TO THE ATTACHED SKETCH PLAN FOR THE CIRCUMSTANCE 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	YN5311A
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SANKAR
NRIC/Passport Number	
Contact Number	82530236
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGQ7993R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	

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

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number	SJV438L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Accident Sketch Plan

## SKETCH PLAN

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6. 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.
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

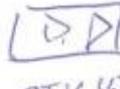
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
\_\_\_\_\_  
Policyholder's Signature / Date & Time

  
\_\_\_\_\_  
Driver's Signature (if driver is not the policyholder) / Date & Time

  
\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

### Sketch Plan

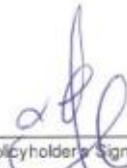
YN 5311-A	SGQ 7993R	A - SKV 6470R
		B - YN 5311-A
	SKU 6470R	
		
		
		SJV 438C
CTE → AYE		

Describe Circumstances of the Accident

WHILE DRIVING ALONG CTE TOWARDS AYE ARON  
BRADDELL EXIT DUE TO SLOW TRAFFIC FRONT CAR  
STOP & I STOP SUDDENLY THE LORRY HIT MY  
CAR & MY CAR HIT THE FRONT & ~~THE~~  
~~FRONT~~ I RECALLED 4 CARS INVOLVED IN  
ACCIDENT.

Declaration

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

  
Witnessed by Reporting Centre  
Personnel



**MOTOR ACCIDENT INTERVIEW FORM**

NAME (DRIVER) : LIN WENSEN

VEHICLE NUMBER : SKV 6470R

DATE/TIME OF ACCIDENT : 8-1-2018 @ 14.50PM

PLACE OF ACCIDENT : C7E TOWARDS AYE @ BRADDECC exit 7

THIRD PARTY VEHICLE (IF ANY) : YN 5311-A

\*\*\*\*\*

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Ame to Roon Lay

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

NO

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

CHAIN COLLISION

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

NO

LIN WEN SEN 

.....

Name:

**I Affirmed The Above Information Is Given To My Best Knowledge.**

AIG Asia Pacific Insurance Pte. Ltd.  
AIG Building 78 Shenton Way #07-16 Singapore 079120  
Tel: 6419 3000

**NRIC / DRIVING LICENSE**

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S26566501



Name  
**LIN WENSEN**  
林文森

Race  
**CHINESE**

Date of birth  
**18-05-1967**

Sex  
**M**

Country of birth  
**CHINA**

S26566501

REPUBLIC OF SINGAPORE DRIVING LICENCE

License No. S26566501

Name  
LIN WENSEN

Birth Date **18 May 1967**  
Issue Date **10 Sep 2003**

000019391C

5342881



NRIC No. S26566501



Date of issue  
**18-07-2006**

71 JURONG WEST CENTRAL 3 #14-17  
SINGAPORE 648335

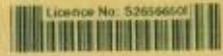
NRIC No. S26566501 Date: 01/02/2010 No. 6492563

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	12 Nov 1996

NP 420A

License No. S26566501





# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Lin Wensen  
 Period of Insurance : 28 Sep 2017 To 27 Sep 2018  
 Engine No. : 2ARH622068  
 Chassis No. : JTNGF3DH308002322

Vehicle No. : SKV6470R  
 Policy No. : 2100430254-02  
 Endorsement No. :  
 Issued Date : 04 Sep 2017

### ABOUT THE COVER

Make/Model : TOYOTA VELLFIRE  
 Engine Capacity/Tonnage : 2,494.00 CC  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2015  
 Insuring with COE/PARF : 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 \$0.00 as "Young and/or Inexperienced Driver Excess" ("YIDP") if You are or Your Authorized Driver (named or unnamed) is under the age of 20 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 and/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 1500cc - 1800cc Optional

\* Limitations endorsed hereunder by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 160) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be excluded under these headings.

### EXCESS

Section 1  
 Fire - \$0 Own Damage - \$1000 Theft - \$0 Flood Cover - \$0

Section 2  
 Property Damage - \$0

Windscreen : \$100

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

Lin Wensen - \$1000 (Own Damage)

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

Approved Reporting Centres/AIG Authorized Repairers (For claims related repairs)  
 Any accident repairs to the Vehicle must be carried out by one of our Authorized Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.  
 For other Approved Reporting Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency helpline at +65 6336 6200. Alternatively, You may refer to AIG website [www.aig.com.sg](http://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: HONG LEONG FINANCE 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. 160), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1956 (Malaysia).

0030210000

AIG ASIA PACIFIC INSURANCE PTE. LTD.  
 7B SHENTON WAY #07-16 AIG BUILDING  
 SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.



AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

SGP/PT

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Accident Photo



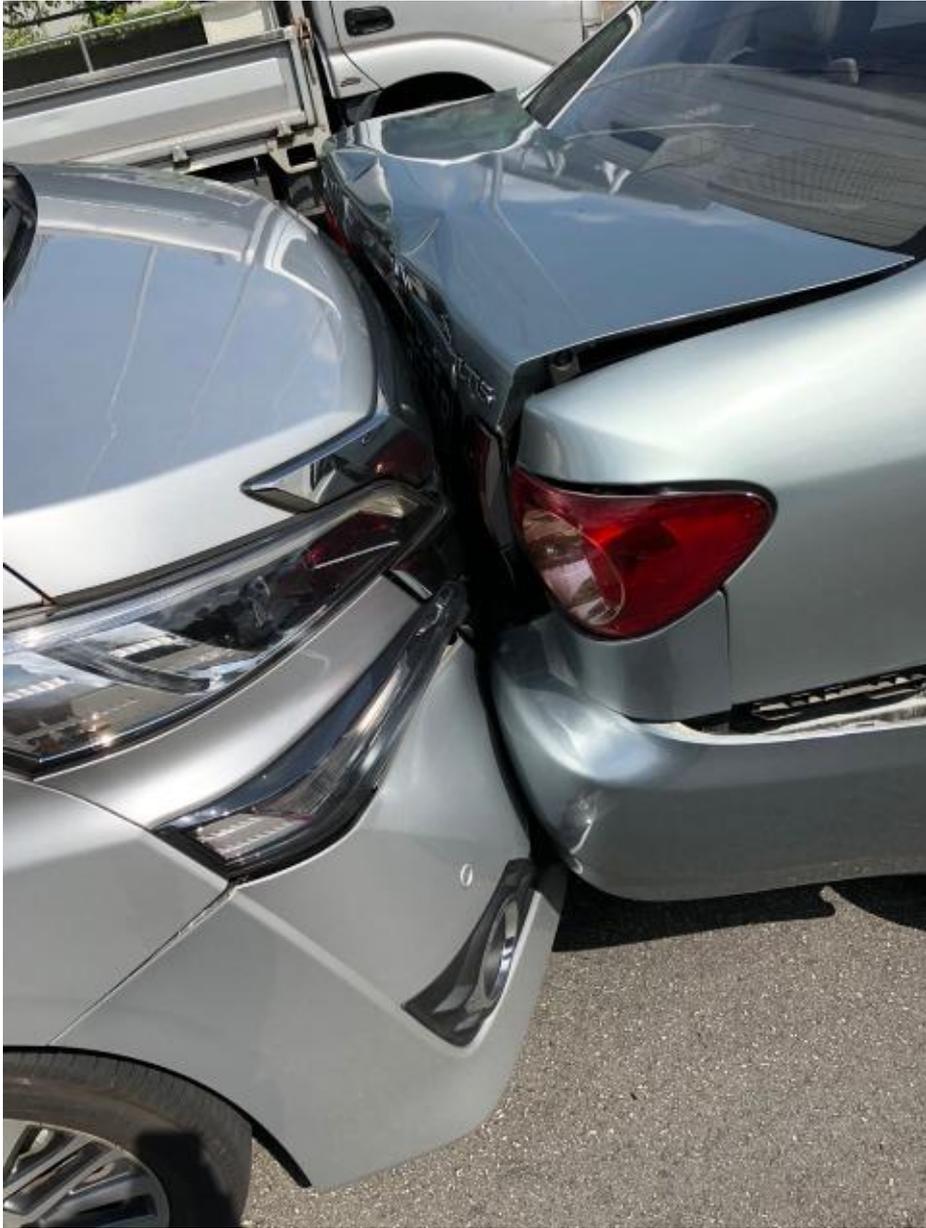
Accident Photo



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Accident Photo



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Accident Photo



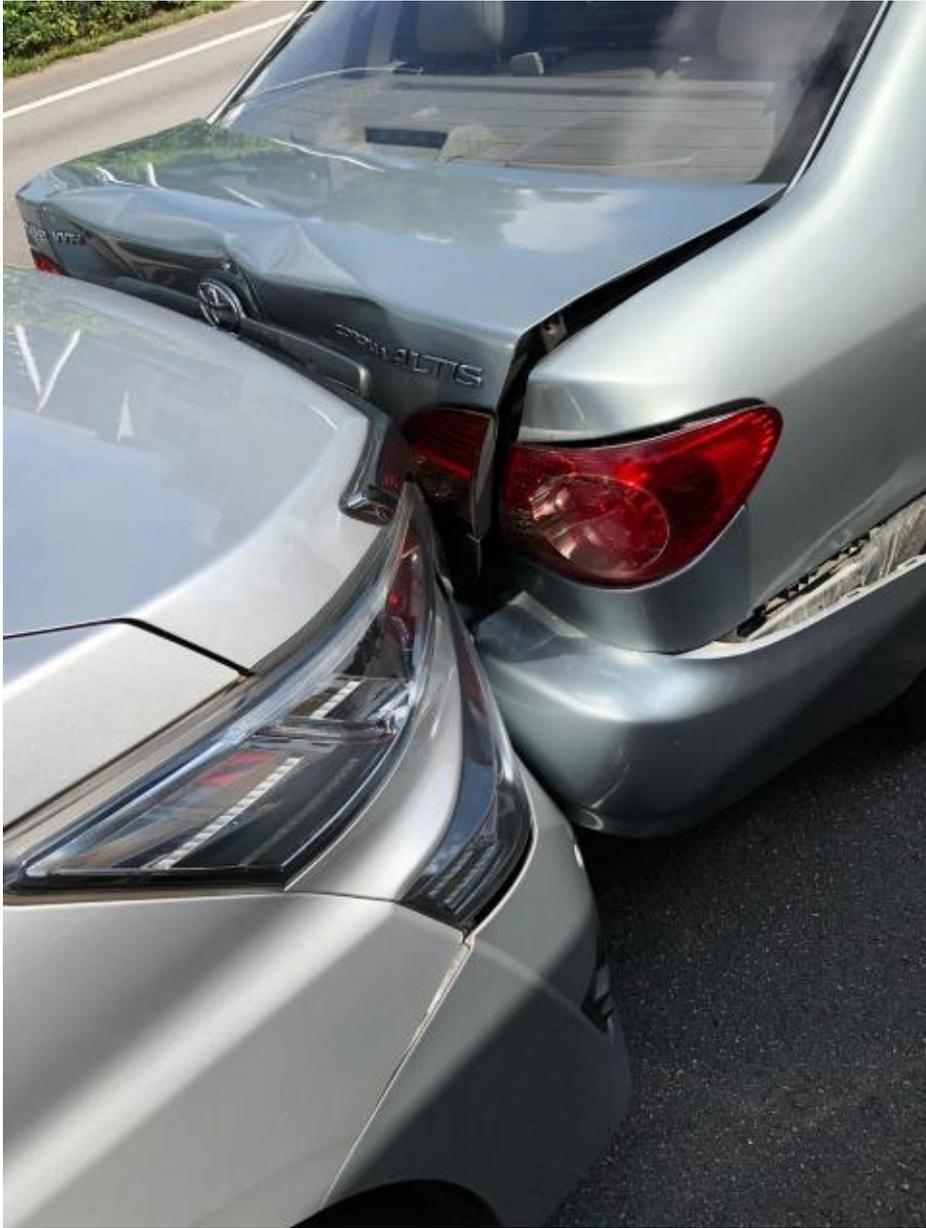
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