MKFS18005906 / Kan Fook Sing Motor Workshop - Defu ENTRY DATE & TIME: 12/01/2018 11:33 SUBMITTED BY: Margaret Lee

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 <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 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.

aforesaid.			
	ACCIDENT STATEMENT		
Date Of Report	12/01/2018 11:33		
Date Of Accident	10/01/2018 21:00		
Exact Location Of Accident	DOVER CLOSE EAST OPEN CARPARK		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SJF8033C		
Insured/Policyholder			
Name Of Registered Owner	MERLISSA YEO MEI HSIEH		
NRIC No	S7808595I		
Email Address	MERLISSA_YEO@HOTMAIL.COM		
Mobile Phone No	(LOCAL) +65-98585557		
Alternative Phone No	OFFICE-94520613		
Vehicle Particulars			
Manufacturer	DAIHATSU		
Model	TERIOS		
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	170022599		
Cover Note Number			
Driver			

Name of Driver NICHOLAS CHRISTOPHER FERGUSON CHAN

 NRIC No
 \$7434101B

 Date Of Birth
 30/09/1974

 Occupation
 INDOOR

 Date Of Driving Pass
 06/08/2007

Driving Experience 10 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94520613

Fax Number
Contact Number

EMail Address MERLISSA_YEO@HOTMAIL.COM

Address BLK 672A KLANG LANE #04-103 S211672

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 DRIZZLE
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 2

Number of Passengers (Including Driver)

Passenger 1

NAME: : CIARAN FERGUSON

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

I HAD JUST ENTERED MY VEHICLE, AT WHICH TIME THERE WAS NO VEHICLE BEHIND MINE, AND STARTED THE REVERSE OUT OF THE LOT. AS I WAS REVERSING, A AN TRANSCAB TAXI STOPPED BEHIND ME TO DROP OFF A PASSENGER. AS A RESULT, THE BACK OF MY VEHICLE COLLIDED WITH THE RIGHT SIDE OF THE TAXI.

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 SHB7922M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver RICHARD GOH HOCK KHENG

NRIC/Passport Number S0017882I

Contact Number NA
Address NA
Postcode NA

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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- 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 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.:

Accident Sketch Plan Pg. 1

SKETCH PLAN		
		u) SJF 8033 C
	TBD	Д; SJF 8033 С В: 5487922 М
		B. 54B792M
	<u></u>	
	Dover Close East	open Corput.
	Dover Closs	
DESCRIBE CIRCUMSTANCES O		
Φ		
Please refu	bo reput.	
	\bigcap	

		osurance Co. Alg -
		Vehicle No SJE 8033 C Date of Accident 14/DI/18
		Reporting Only
		Own Damage Claim
		Third Party Claim
		Cither Workshop
DECLARATION		
I/We declare the foregoing particu	lars are true in every respect.	15 KANA
		(3°, 10°)
	(g/d	
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
121.00 Showing control of the	Date & Time: \2 / 1/18 1/- 500m	NRIC/FIN No.:
	•	

INTERVIEW FORM Pg. 1

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

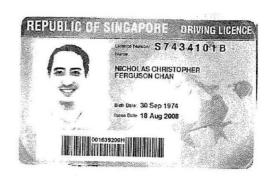
NAME (DRIVER)	: Nicholas Christopher Fergusan Chan.
VEHICLE NUMBER	: SJF 8033 C.
DATE/TIME OF ACCIDENT	: 11/01/18 21.00. : Down Close Gut: : SHB 7922 M
PLACE OF ACCIDENT	: Dover Close Gast.
THIRD PARTY VEHICLE (IF ANY)	: SHB 7900 M
*********	****************
WHERE DID YOU START YOUR JOU BEFORE THE ACCIDENT?	TRNEY AND WHERE WAS THE INTENDED DESTINATION
Dover Clase (purked)
	DRINKS BEFORE YOU DRIVE ON THE DAY OF THE FIC POLICE CONDUCT ANY BREATHE-ANALYSER TESTULT?
.,,	
Companie	INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU
TAKEN TO THE TRAFFIC POLICE FO	OR INVESTIGATION?
₩.	
Name: Micholas Ferguion I Affirmed The Above Information Is Given	ven To My Best Knowledge.
THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRE	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER

1

NRIC & DL Pg. 1

NRIC & LICENCE Pg. 1









CEERT Pg. 1



CERTIFICATE OF INSURANCE

10 10 NO NEB prich for

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MERLISSA YEO MEI HSIEH
Period of Insurance : 28 Jun 2017 To 27 Jun 2018
Engine No. : 2119592

Chassis No. : JDAJ210G001078209 Vehicle No. Policy No. : SJF8033C

: 1700022599

Endorsement No.

Issued Date

: 28 Jun 2017

ABOUT THE COVER Make/Model

: DAIHATSU TERIOS 1.5

Engine Capacity/Tonnage : 1,495.00 CC

Sum Insured : Market Value Off Peak Car No

First Year of Registration : 2008 Insuring with COE/PARF

Person or Classes of Persons Entitled to Drive*

Driver Restriction

a) The Pelayholder to kiny other parson with a arking on the Palayholder's ender or with hadron permassion. This Palay will indensity the Polayholder or any authorized given only if hadron meets the specified age condition.

You have to pay an admitted sum of \$3,000 as "Inexperienced Enver Excess" (IDR) if You are or Your authorised Enver located or unstatled that first men 2 years' driving experience

Age Condition

: 35 years old and above

Limitation as to use*

Littriculture as to use:
(Fig. only to special domestic and pleasure guipposes and for the Policyholder's business.)
This Policy does not object use for an or crowner silving fation dowing fest nation; pose-discher reliability trial or speed test not entranged of goods's objectives are an impropriet incommentation. If the comment is the comment of the form of the comment of t

Limitarians conquired inoperative by Section is of the Meso: Various Chinachistry Passe and Companisonal Fee (Cap. 189) and Section is at the Read Transport For, 1987 Wallaysia, are rea to be used for another incidence.

(EXOESS

Section 2 Property Damage - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

MERLISSA YEO METHSIEH - \$600 (Cvm Damage)

APPROVED REPORTING GENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS).

Approxicus Repairing Centrour AIS Authorised Repaires of or olders indicate repairs)
Any scalars repairs to the Vehicle must be defined out by one of our Authorised Repairs. Whilm this ties 3 years of the ties registration of the Vehicle in Singapare. You have the defined out by me of our Authorised Repairs workshop.

The chair Approximation Repairing Central-ITS Authorised Repairs contest our 24-hour account emergency hodges in 455.038 (CCS Attendance). You may seem to AIS webselves with all command or AIS South And download AIS SO from Tunos or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan NA

IMVe hereby certify that the policy to which this Confection of Inturence relation is issued in exceedance with the feevisions of the Mater Vehicles (Third Perty Risks and Compensation) Act (Cop. 169). Port IV of the Road Transport Act 1987 (Malaysea, and Motor Vehicles (Third Perty Risks Trade).

0500682000

INSUINE INSURANCE AGENCY P & ROBINSON ROAD P O BOX 192

SINGAPORE 900342 ANSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte, Ltd. AUTHORISED REPRESENTATIVE

78 Shorton Way 307-15 Ale Building \$079120 (7) +05 5416 3000 (F +05 6415 3723 (yww.alg.com.sg

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