4/23/2018 E-FILE

MCC418012934 / Cycle & Carriage Industries Pte Ltd - Pandan Loop ENTRY DATE & TIME: 26/01/2018 14:05 SUBMITTED BY: Lim Xin Yi

# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 26/01/2018 14:12

#### 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 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
 26/01/2018 14:05

 Date Of Accident
 12/01/2018 09:10

Exact Location Of Accident HILLVIEW AVE BEF BUKIT BATOK AVE 4

Country/State of Loss SINGAPORE

**DETAILS OF OWN VEHICLE** 

Vehicle Registration Number SLM7071M

Insured/Policyholder

Name Of Registered Owner LEE WEN YAN
NRIC No S6845813G
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-81125180

Alternative Phone No Office-81125180

**Vehicle Particulars** 

Manufacturer MERCEDES-BENZ

Model C180

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 2100504732

Cover Note Number

Driver

Name of Driver LI SEK KOI @ LEE SEK KHAI

NRIC No S2015915D

Date Of Birth 16/06/1941

Occupation INDOOR

Date Of Driving Pass 09/06/1965

Driving Experience 52 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81125180

4/23/2018 E-FILE

Fax Number

Contact Number

EMail Address NOEMAIL

Address 63 HILLVIEW CRESCENT

Postcode 669464

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PARENT

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 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

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

**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 WAS DRIVING MY CAR (SLM7071M) ALONG HILLVIEW BEFORE BUKIT BATOK AVE 4. I WAS TRAVELLING AT THE EXTREME LEFT LANE AND INTEND TO FILTER TOWARD THE RIGHT. AS I WAS FILTERING, VEHICLE B (SHC8436M) ON MY RIGHT SUDDENLY MOVED FORWARD AND HAD COLLIDED ONTO MY RIGHT PORTION.

#### 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 SHC8436M

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

4/23/2018 E-FILE

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

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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.
- 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 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
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
  - (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
  - (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.

Kerlyn Ong Kai Li

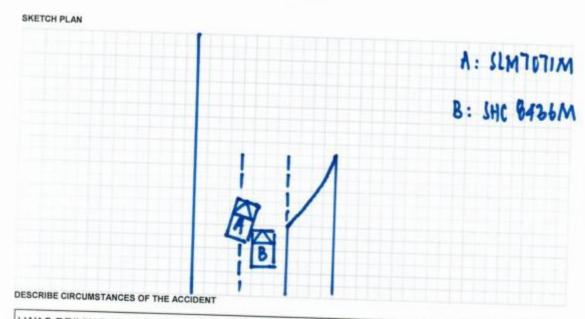
DID: 6771 4420 HP: 9186 5113
Email: kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Policyholder's Signature Date & Time 26/01/2018 1346

Driver's Signature (If driver is not the policyholder)

Date & Time

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



I WAS DRIVING MY CAR (SLM7071M) ALONG HILLVIEW AVENUE BEFORE BUKIT BATOK AVE

I WAS TRAVELLING AT THE EXTREME LEFT LANE AND INTEND TO FILTER TOWARD THE RIGHT. AS I WAS FILTERING, VEHICLE B (SHC8436M) ON MY RIGHT SUDDENLY MOVED FORWARD AND HAD COLLIDDED ONTO MY RIGHT PORTION.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

Driver's Signature

Date & Time

(If driver is not the policyholder)

(Please contact your insurance company for any further details)

Policyholder's Signature

Date & Time 26/01/2018 1346

Kerlyn Ong Kai Li

DID: 6771 4420 HP: 9186 5113

Email: kerlyn.ong@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd Customer Service Centre Personni Ecop

Name: KERLYN

NRIC/FIN No.:



51 UBLAVE 1, #01-25 PAYA UBLINDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Our Ref: CC3/AIG18000956/K1hs3

18th January 2018

Lee Wen Yan 63 Hillview Crescent Singapore 669464

Dear Sirs,

# ACCIDENT INVOLVING SLM 7071M AND SHC 8436M ON 12/01/2018 ALONG/ AT HILLVIEW AVE BEFORE BUKIT BATOK AVE 4

We, LKK Auto Consultants Pte Ltd has been appointed to act on the behalf of your insurer, AIG Asia Pacific Insurance Pte Ltd (AIG) to settle a THIRD PARTY claim against you for an accident which happened on the above-mentioned date and location.

Kindly proceed to lodge your GIA report within five (05) working days of receipt of this letter, giving the version of the accident amongst other things related to the accident. The GIA report can be lodged at any of AIG reporting centres. You may refer to your Certificate of Insurance for the list of the reporting centres.

If you have any information to add or any amendments to make, please contact the undersigned within five days from the date of this letter.

Please note that the standing of your insurance policy such as NCD, premium & etc would be affected.

Yours faithfully,

Vic Alpeh Sanghilan

Claims

Tel: 6841 2096 Fax: 6741 4108

Email: vicalpeh@lkkauto.com

c.c. Claims Manager

AIG Asia Pacific Insurance Pte Ltd

(Motor Claims Dept)

JASMINE TAN



HOTLINE TEL: (65) 6419-3000 FAX: (65) 6415-3723

## COVER NOTE

Cover Note No. 2100504732

Date 20 Mar 2017

The following risk described in the Schedule is hereby HELD COVERED in the terms of the applicable Company's policy issued to the Policyholder.

S	CH	Œ	D	U	L	E
-	200	_	_	_	_	_

Policyholder

Lee Wen Yan

Age Condition Policy Type

Effective Date

Expiry Date

Excess

All Age Condition

INSURANCE

ADY

\$\$800.00

Mar 2017

Mar 2018

MERCEDES-BENZ MOTOR

Registration No.

Make/Model

CC/Tonnage

Engine No

Chassis No

Year of Registration

Hire Purchase Company

SLM 7071 M

MERCEDES Benz C180 Sedan Avantgarde / Exclusive 1,595.00

27491030887415

WDD2050402R262555

2017

DBS BANK LTD

This policy is subject to driver's age condition. The policy will indemnify the insured or any authorised driver only if he/she meets the age condition. Please refer to policy terms and conditions.

In addition to the Policy Excess, a Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00 (before GST) will apply to You or Your Authorised Driver who is below the age of 23 (in case of All Age Condition policies) and/or has less than 2 years' driving experience. The YIDR Excess is not applicable to Named Driver policies.

Usage of vehicle only for the following purposes:

1. Use only for social, domestic and pleasure purposes and for the Policyholder's business.
2. Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business and use for social, domestic or pleasure purposes.

Please note that acceptance of the risk is subject to our final acceptance and terms and conditions applicable to the policy. Should you require any change to the insurance, please contact us immediately. Otherwise, any change will not be covered under the policy.

The Company may cancel this cover by notice in writing and the insurance will be terminated and a proportionate part of the annual premium for the insurance will be charged for the time the Company has been on risk.

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE OF INSURANCE I/We hereby certify that this cover note is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Issued in SINGAPORE

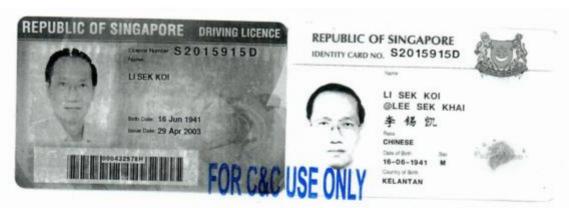
AIG Asia Pacific Insurance Pte. Ltd.

IMPORTANT NOTICE THIS COVER NOTE IS VALID FOR 60 DAYS FROM THE FIRST DAY OF THE POLICY PERIOD. APPLICABLE TO CORPORATE POLICIES ONLY.

**AUTHORISED REPRESENTATIVE** 

ORIGINAL

CYCPEK





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**Accident Photo** 











