MOR118019419 / ETHOZ Protect Pte Ltd - Bukit Batok ENTRY DATE & TIME: 08/02/2018 10:58 SUBMITTED BY: Hasbullah Bin Maspot

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 08/02/2018 11:07

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
 08/02/2018 10:58

 Date Of Accident
 23/01/2018 19:20

Exact Location Of Accident KIM YAM RD TWDS MOHAMED SULTAN RD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJP2018J

Insured/Policyholder

Name Of Registered Owner SEEM KOK BENG

NRIC No S2636459J Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-97104852

Alternative Phone No Home-97104852

Vehicle Particulars

Manufacturer HYUNDAI

Model HD ADVANTE 1.6M

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 2100126103

Cover Note Number

Driver

Name of Driver SEEM KOK BENG

NRIC No S2636459J

Date Of Birth 19/05/1962

Occupation INDOOR

Date Of Driving Pass 09/07/1990

Driving Experience 27 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97104852

Fax Number

Contact Number HOME-97104852

EMail Address NOEMAIL

Address 6 HILLVIEW RISE #19-22 SINGAPORE 667980

Postcode

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 SIDE SWIPE

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? 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

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?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC4646A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan



CERTIFICATE OF INSURANCE

NUMBER OF THE PARTY ROLL AND COMPENSATION ACTIONALISM THE COM OTOM STHICKES (THING) PARTY BUSINES AND COMMERCIA TODAS MURES, THIS

GEOR CENTLES (THROUGHARTY RISKS) PLACE THE STALK THAN

HYUNDALAUTO PROTECTOR (DELUXE)

CERTIFICATE NO. 2100126103-68000

OWN DAMAGE EXCESS WINDSCREEN EXCESS \$50.00

S\$200 00 (1)

ERRESISSE PET, 1950 Se \$45 K (1882-64)

SUM INSURED Maker Value

INSURING WITH COEPARE

Yes

1) VEHICLE REGISTRATION NO. SJP20183

2) NAME OF INSURED

Seem Kok Bang

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

14 Mar 2017

I DATE OF EXPIRY OF INSURANCE

13 May 2018

B) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE . SUBJECT TO AGE CONDITION :40 years old and above

he has other person who is driving on the Insured worder or with his permission A Young and or incaparisment Dewer Luces ("YIDR") of \$51,000 (0) in additional to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorized Driver is below the age of 23 and or has less than 2 years driving experience

Provided that the person driving is permitted in accordance with the scenaing or other laws or regulators to drive the Model Valve. has been so permitted and is not despeatfied by order of a Court of Law or by reason of any enactment or requisition in that be British striving the Motor Vehicle

1 LIMITATION AS TO USE .

The only for around dominate and pleasure purposes and for the Insured's business The Policy data not dever use for bee or an ards turner, driving but racing, pace making, reliability malspecial tenting, the corruge of goods other than samples as connect an unthany trade or beautiess or use for any purpose in connection with the Money Track

APPROVED REPORTING CENTRES - HYUNDALAUTHORISED REPAIRERS § Konsoco Moroni Pic List - 251 Alexandra Rd (Tel. 647) 55380

AFFE) VID REPORTING CENTRES AND AUTHORISED REPARTERS (FOR CLAIMS RELATED REPAIRS)

L. Control Despois Unique 2015 Brasidell Ref (Tel. 63837118) 3. DPS Body & Print Workshop, 2005 Brasin Gardens (Tel. 63684507)

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L. Control Despois Despois Control 65 547761000

LOSS OF USE Loss of the 10 Days (150) - lorned - Refer to policy worsings for details.

NAMED DROVER

HARE PURCHASE COMPANY Miglioria EMPLOYER'S LOAN

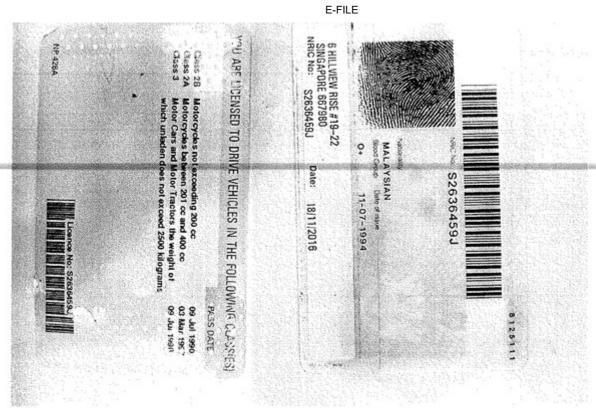
Companies recover conservative by Septem 8 of the Motor Colleges (College Park) Asses and Companies and Companies (Colleges) (Colleges) Section 85 of the Road Transport April 1987 (Malaysia), and not blide proposed under these headings.

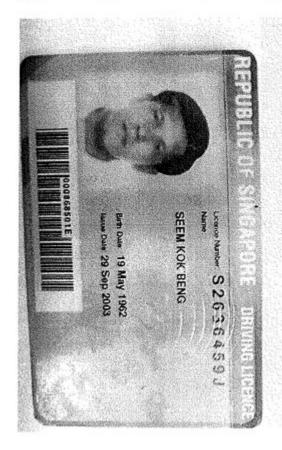
We hereby Centry that the outby to whom the Centrolle relates is based in accompanie with the processing of the Motor Centrol arry Minus and Compartmention Act (Crospher 1965) and Part Pa of the Road Transport Act, 1967 (Marayton)

Issued At Sangapore 16 Fue 2017

AKI Asia Pacific Insurance Pte. Ltd.

ROBERTO TRADONS PIT 1 TO COO CALLER AND PARK ASSESSED.







AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: Seem Kok Berg
VEHICLE NUMBER	: SJP >018J
DATE/TIME OF ACCIDENT	: 23/1/2018 7.15 pm
PLACE OF ACCIDENT	: Kim Yam Road
THIRD PARTY VEHICLE (IF ANY)	: SHC 4646A
*********	**************************************
BEFORE THE ACCIDENT?	RNEY AND WHERE WAS THE INTENDED DESTINATION Glorg Kim Yam Road and looking
WHAT IS THE TYPE OF COLLISION	AND THE EXTENSIVENESS OF THE DAMAGES TO ALL
my left side	right side mirror.
V Destriction .	TS) THE TAIL TO THE
WERE YOU OR YOUR PASSENGER/S TAKEN TO THE TRAFFIC POLICE FO んし みん	INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU R INVESTIGATION?
Name:	

1

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



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC3/AIG18001506/T1ys3

29th January 2018

Seem Kok Beng No 6 Hillview Rise The Hillier #19-22 Singapore 667980

Dear Sirs,

ACCIDENT INVOLVING SJP 2018J AND SHC 4646A ON 23/01/2018 ALONG/ AT KIM YAM ROAD (LOT NO.4) TOWARDS MOHAMED SULTAN ROAD

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,

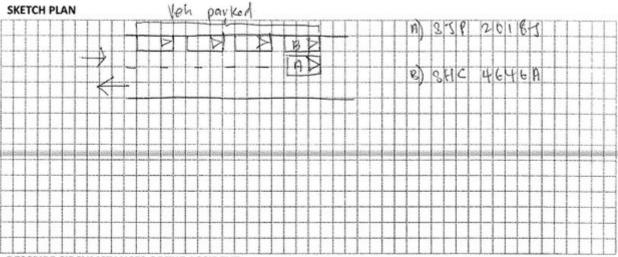
Jas Khine Claims

Tel: 6841 2928 Fax: 6741 4108

Email: jaskhine@lkkauto.com

c.c. Claims Manager AIG Asia Pacific Insurance Pte Ltd

(Motor Claims Dept)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

arking) as I	was driving straight ahead I clipped my
HT DAMAG	E TO THE RIGHT WING MIRROR).

	No. Contract
~	- Reporting Only
	- Claim OD
	- Claim TP
	HT DAMAG

DECLARATION

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

Policyholder's signature Date & Time ピカルル

Driver's Signature (if driver not the policyholder) Date & Time Reporting Centre Personnel's Signature Name:

Nric/Fin No.

SKETCH PLAN

IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
- 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 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 :
 - 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

MRIC/EIN M

GIMMC SkatchFlanForm, V3

11-08 Am

Transfer Fee Enquiry

Page 1 of 3

Enquire Transfer Fee

Vehicle Details

Vehicle No.:

SJP2018J

Vehicle Type:

P10 - Passenger Motor Car

Vehicle Attachment

No Attachment

1:

Vehicle Scheme:

Normal

Vehicle Make:

HYUNDAI

Vehicle Model:

HD AVANTE 1.6 M

Chassis No.:

KMHDU41BR9U712922

Propellant:

Petrol

Engine No.:

G4FC9U621623

Engine Capacity:

1591 cc

Maximum Power

89.7 kW (120 bhp)

Output:

Maximum Laden

1760 kg

Weight:

Unladen Weight:

1264 kg

Year Of

2009

Manufacture:

Original

14 Mar 2009

Registration Date:

Lifespan Expiry

Date:

COE Category:

A - Car (1600cc & below)

Quota Premium:

\$4,460.00

COE Expiry Date:

13 Mar 2019

https://vrl.lta.gov.sg/lta/vrl/action/enquireTransferFeeDetailsProxy?FUNCTION_ID=... 08-02-2018





Accident Photo





















Accident Photo

