

## 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	29/12/2017 17:12
Date Of Accident	28/12/2017 12:00
Exact Location Of Accident	TUAS 2ND LINK TOWARDS JB CUSTOM
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF3864E
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### Insured/Policyholder

Name Of Registered Owner	LEONG CHIN ONG
NRIC No	S1655644J
Email Address	LEO820@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96578853
Alternative Phone No	Others-63460820

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	LIESURE
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	2100479792
Cover Note Number	

### Driver

Name of Driver	LEONG CHIN ONG
NRIC No	S1655644J
Date Of Birth	16/01/1964
Occupation	INDOOR
Date Of Driving Pass	24/02/1984
Driving Experience	33 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96578853
Fax Number	
Contact Number	OTHERS-63460820
EMail Address	LEO820@SINGNET.COM.SG

Address	BLK. 10 JALAN BATU
Postcode	#08-20 SINGAPORE
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 - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

#### 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
Number of Passengers (Including Driver)	2
Passenger 1	Name: : BOO CHON YEN Gender: : Female

#### 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

REFER TO ATTACHMENT

#### 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	SKZ7027K
Vehicle Make/Model/Colour	MAZDA (BLUE)
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)	

## Sketch Plan

### SKETCH PLAN

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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:

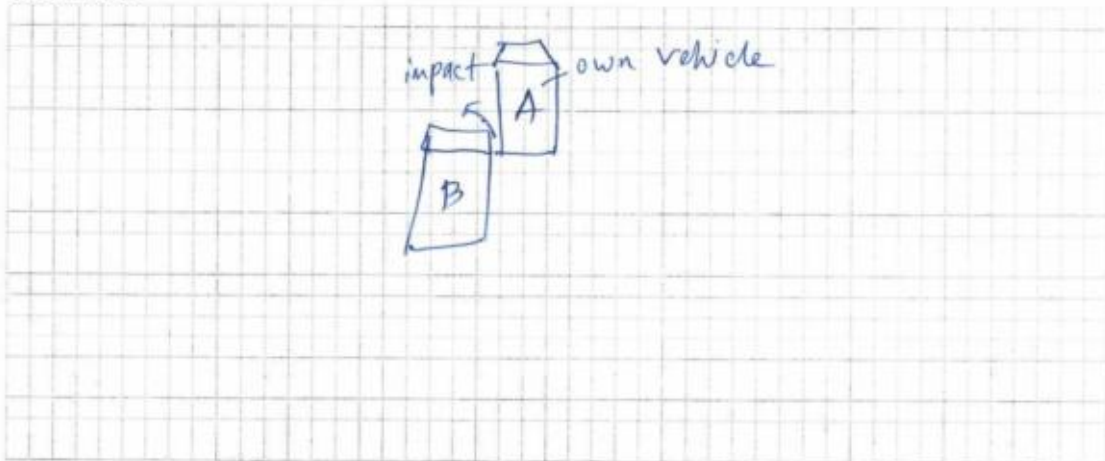
29/12/17

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

10.55 am

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

# SKETCH PLAN




## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

~~Car B~~

Vehicle hit my left back bumper  
when changing lane.

## DECLARATION

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

 29/12/17 1015

Policyholder's Signature

Date & Time:

10.15m

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GA/RWC-S&P-Pol/F&T-V3

Insurance Certificate



# CERTIFICATE OF INSURANCE

## MITSUBISHI AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Leong Chin Ong  
**Period of Insurance** : 25 Aug 2017 To 24 Aug 2018  
**Engine No.** : 3A92UDK2019  
**Chassis No.** : MMBSTA13AHH002577

**Vehicle No.** : SLF3864E  
**Policy No.** : 2100478792-01  
**Endorsement No.** :  
**Issued Date** : 03 Aug 2017

### ABOUT THE COVER

**Make/Model** : MITSUBISHI ATTRAGE 1.2 CVT  
**Engine Capacity/Tonnage** : 1,193.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2016  
**Insuring with COE/PARF** : Yes

#### Person or Classes of Persons Entitled to Drive\* :

at The Policyholder

In 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 \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorized Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

**Age Condition** : All Age Condition

#### Limitation as to use\* :

Use only for annual, 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, prize-winning, reliability trial or speed-testing, the carriage of goods other than aeroplanes in connection with any trade or business or use for any purpose in connection with Motor Trade.

**Loss of Use (15 days)** 150000 - 180000

\* Limitations rendered imperative by Section 8 of the Motor Vehicles (Third-Party Rules and Compensation) Act (Cap. 109) 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 - \$900 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

**Windscreen** : \$100

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

Leong Chin Ong - \$900 (Own Damage)

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

1 Cycle & Carriage Customer Service Centres (For windscreen claim only) Add: 20 Looi Kee Rd Singapore 150004 64706888

2 Cycle & Carriage Customer Service Centres (For windscreen claim only) Add: 310 Ubi Rd 3 Singapore 408650 67461000

3 Cycle & Carriage Body & Paint Centre Add: 300 Pandan Gardens Singapore 609339 65584601

For other Approved Reporting Centres/AIG Authorized Repairers, please contact our 24-hour customer emergency hotline at +65 6333 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 360" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

We hereby certify that this policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Rules and Compensation) Act (Cap. 109), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third-Party Rules) Act, 1959 (Malaysia).

0500722050

C&C FULCO-CORPORATE  
 22 UBI ROAD 4 FULCO BUILDING  
 SINGAPORE 408617 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Janile*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1655644J



NAME  
LEONG CHIN ONG  
梁振宏  
Race  
CHINESE  
Date of Birth  
16-01-1964 M  
Country of Birth  
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1655644J  
Name  
LEONG CHIN ONG  
Birth Date 16 Jan 1964  
Issue Date 30 Dec 2002



0976944



NRIC No. S1655644J



Blood Group Date of issue  
O+ 24-05-1993

NRIC No. Date: No. 24-05-1993

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms	24 Feb 1994

Licence No: S1655644J



NP 422A



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo





# Driving License



FOR C&C USE ONLY



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