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 $\underline{\text{completed by the Policyholder and/or the Authorised Driver.}}$
- 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 policyliability 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

| aforesaid. | |
|--|---|
| | ACCIDENT STATEMENT |
| Date Of Report | 29/01/2018 19:03 |
| Date Of Accident | 28/01/2018 13:40 |
| Exact Location Of Accident | JUNCTION OF NEW BRIDGE ROAD AND HAVELOCK ROAD |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SFC2000A |
| Insured/Policyholder | |
| Name Of Registered Owner | TAN KEE YONG |
| NRIC No | S1499476I |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96742439 |
| Alternative Phone No | Others-96742439 |
| Vehicle Particulars | |
| Manufacturer | VOLVO |
| Model | V40-1.5 T2 R-DESIGN SR (A) |
| 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 | 1700068070 |
| Cover Note Number | |
| Driver | |
| Name of Driver | TAN WEI CHER |
| NIDIC No. | C0227002F |

Name of Driver TAN WEI CHE
NRIC No S9327883F
Date Of Birth 29/07/1993
Occupation INDOOR
Date Of Driving Pass 11/03/2016

Driving Experience 1 YEAR AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93390630

Fax Number

Contact Number

EMail Address NOEMAIL

Address 20 JALAN PANDAN Postcode 1128

Was driver an employee of the Insured's Company N

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own Vehicle

-

Insurance Company of Driver's Own Vehicle

-

NO

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?

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.

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

KINDLY REFER THE STATEMENTAND UNLOAD DOCUMENTS.

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 SLM3958G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number S1620536B

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

| SINGAPORE ACCIDENT STATEME | NT . |
|--|--|
| IMPORTANT NOTICE 1. Complete and submit this Form to Allied World's Aether 2. Please report <u>cornaity</u> the details of the socident to speed u 3. This Form must be <u>consciented</u> by the Policyholder and/or his | deed Recorting Centre ("ARC"Hor etting. p the claims process. Authorised Driver. |
| The lesue and acceptance of this Form by insurance company | sable. Any wiful misrepresentation or withholding of material facts may allow nies is not an admission of policy flability on the part of the insurance companies. |
| 6. Any fains resorting may be referred to the Traffic Police (ACCIDENT STATEMENT | Recentifiers for Investigation |
| Date and Time of Accident | Dete: 2011/20K 17/10/105 |
| Exact Location of Accident | Date: 28/1/2018 Time: 1340 HRS Junction of new Bridge Road and Havelack 190 |
| DETAILS OF OWN VEHICLE | Dunithy of the aller Kong and Howelak 120 |
| Vehicle Registration Number | SFC 2000 A |
| INSURED / POLICYHOLDER (OWN VEHICLE) | |
| Name of Registered Owner (See Insurance Cert.) | |
| Personal Identification - NRIC (Singaporear/PR) | Tan Kee Yong S14994761 |
| - FIN/Passport Number | 314714/61 |
| - Not Applicable | 0171171199 |
| VEHICLE PARTICULARS (OWN VEHICLE) | 70142431 |
| Vehicle Make / Model | Manufacturer VolV1 Model VU 9 84 |
| Type of Vehicle* | Saloon MPV ORV Van Lorry |
| Exact Purpose for which vehicle was being used at time of | |
| account Are you claiming under your own insurance policy for repail your vehicle? | Yes No (If No,Pis select: Third Party Reporting) |
| Vehicle Category* | Private Commercial Motorcycle |
| INSURANCE COMPANY (OWN VEHICLE) | |
| Name of Insurance Company * | A16 |
| Type of Policy | Comphensive O Third Party Fire & Theft O TP Only |
| Fleet Policy | O Yes O No |
| Policy Number | 1700068070 |
| Motor CI | |
| DRIVER | Same as Insured above |
| lame of Driver | Tan Wei Chr |
| Personal Identification - NRIC (Singaporean/PR) | S 9327883F |
| - FIN/Passport Number | 1027000 |
| ate of Birth | 29 001 07 mm & 1998ry |
| riving Date Pass | 1 dd 0 3 mm 2016 lyy |
| ear of Driving Experience | Year(s) Month(s) |
| ccupation | Indoor Outdoor |
| ender | Male O Female |
| ontact Number / Mobile Phone / Fax No. | 75 9339 0630 |

| Address of Driver | 20 Jalan Pandan | | | |
|--|--|--|--|--|
| | Poetcode(//2 § | | | |
| Email Address | | | | |
| Was driver an employee of the Insured's Company? | ○ Yes Ø No | | | |
| If No, Relationship of the Oriver with the Insured | | | | |
| Vehicle Registration Number of Driver's Own | O Yes No | | | |
| Vehicle Registration Number of Driver's Own Vehicle (if applicable) | | | | |
| Insurance Company of Driver's Own Vehicle (if applicable) | | | | |
| GENERAL INFORMATION OF THE ACCIDENT | | | | |
| Type of Collision (Eg. Chain collison, Head-On collision,Side Swipe, Front to Rear) | Side Shipe | | | |
| Weather Conditions | Clear Raining Others, | | | |
| Road Surface | Ory O Wet Others | | | |
| OTHER INFORMATION | A STATE OF THE PARTY OF THE PAR | | | |
| Was any foreign vehicle involved in this accident? | O Yes Ø No | | | |
| Was any body injured in the accident? | O Yes Ø No | | | |
| Was any other vehicle or property damaged? | Ø Yes ○ No | | | |
| Was there any video captured by Car Camera? | ○ Yes ○ No | | | |
| number of Passengers (Including Driver) | | | | |
| DETAILS OF POLICE ACTION | | | | |
| Vas the Accident reported to the Police? | Yes No (If Yes, please state which Police Station.) | | | |
| Police Station Name | | | | |
| Police Station Address | | | | |
| Police Station Contact | Tel No. Fax No. | | | |
| Vas notice of intended Prosecution given? | Yes No (If Yes, against whom?) | | | |
| DETAILS OF OTHER VEHICLE / PROPERTY 1 | | | | |
| ehicle Registration Number | SLM 39586 | | | |
| ehicle Make/ Model/ Colour | | | | |
| etails of Properties | | | | |
| ame of Driver | Michael Wany Teny Cheany | | | |
| ersonal Identification - NRIC (Singaporear/PR) | Michael Wang Teny Cheang 51620536B | | | |
| - FIN/Passport Number | No. | | | |
| ontact Number | | | | |
| ddress | | | | |
| NOT THE PERSON OF THE PERSON O | | | | |
| ame of Insurance Company | · | | | |
| ame of Insurance Company sture of Damage | | | | |

Page 2

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| | | Cd | ad Claim of the | Mater Delle | | to decide within | 21 days of annuman | |
| | | | | | | | 1 21 days of occurrence | в |
| r discovery of o | tamage | whether or no | t to claim under | the policy. F | riease check | your policy for | more information. | |
| | | | | | | | | |
| eclaration | | | | | | | | |
| We declare the for | egoing pa | rticulars are true | in every respect. | | | | | |
| | | | | | | | | |
| | 201 | | | | | | | |
| olicyholder's Signatum | 29/1 | | s Signature (if driver is | not the policybold | art / Data | Witnessed by Reco | rting Centre Personnel | |
| ncy waer's aignisture | 11.15 | | | nut are postyriote | H). UMB | H-Crissian by Nepo | Tary School Feliginists | |
| | 11-17 | um | | | | | | Page |

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report gorrectly 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.
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- 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 Traffic Police Department for investigation-
- This report will be forwarded by the insurers to the GIA Records Mangement Centre establised 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 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' law yers/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.

Policytoider's Signature / Oate & Time

Defect's Signature (II defect is not the policytoider) / Oate

Wilnessed by Reporting Centre Personnel

& Time

Sketch Plan

SF C 2003 A

FOR STARTER

G - SLM 3 958 G

At around 1340h on 28 January 2018, I, Tan Wei Cher (\$9327883F) was driving along Havelock Road at the junction of New Bridge Road and Havelock Road. After stopping at the junction, I was about to cross the junction (while on the first lane) when, Michael Wong Teng Cheong (\$1620536B), in his car (\$LM3958G), made a right turn and collided into my car. The collision involved the front left corner of my car and the back right door of his car. We were travelling at around 30km/h at that time hence the collision resulted mainly in scratches on my car and scratches and a light dent on his car on the aforementioned areas.

We then moved our cars to the roadside ahead and stopped to exchange contacts and examine the extent of damages. I checked and he acknowledged that he did not suffer any injuries from the collision. No other damages were noted. We drove off after roughly 10 minutes at around 1350h.





https://www.evernote.com/shard/s35/nl/183688689/6896e18f-f19d-4c39-ab4d-ebe3edc... 29/1/2018



CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder : TAN KEE YONG null Vehicle No. : SFC2000A Period of Insurance : 26 Oct 2017 To 25 Oct 2019 Policy No. : 1700068070 Engine No. : B4154T52184707 Endorsement No. Chassis No. : YV1MV28L0J2459360 Issued Date : 03 Nov 2017

ABOUT THE COVER

Make/Model : VOLVO V40 T2 R-Design

Engine Capacity/Tonnage : 1,498.00 CC Sum Insured : Market Value First Year of Registration : 2017 Driver Restriction : NA Off Peak Car : No 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 indeenify the Policyholder or any authorised 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 Authorised (Driver (named or unnamed) is under the age of 23 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 thin or reward, driving fusion, driving test, racing, pace-making, reliability shall 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 after Trade.

Loss of Use 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act. 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1 Fire - 80 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

TAN KEE YONG - \$800 (Own Damage)

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

1. Wearnes Automotive Pto Ltd. Add: 249 Alexandra Road Singapore 159935 64304890 63789350

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200, Alternatively, you may refer to AIG website 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: OVERSEA-CHINESE BANKING CORPN LTD

I/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. 189), Part IV of the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503485760

WEARNES AUTOMOTIVE - JRT (V)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

78 Shenton Way #07-16 A/G Building \$079120 | T:+65 6419 3000 | F:+65 6415 3723 | www.aig.com.sg











