

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 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	07/02/2018 13:58
Date Of Accident	07/02/2018 06:55
Exact Location Of Accident	CARPARK ENTRANCE AT SERANGOON NORTH AVE 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF7059Z
Insured/Policyholder	
Name Of Registered Owner	CHUA AH LAY MARY
NRIC No	S0011595I
Email Address	MARY.PWEE@SC.COM
Mobile Phone No	(LOCAL) +65-83887849
Alternative Phone No	Others-83887849

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY
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	2100305738-05000
Cover Note Number	

Driver

Name of Driver	PWEE HUAT CHYE
NRIC No	S0136046I
Date Of Birth	13/01/1953
Occupation	OUTDOOR
Date Of Driving Pass	18/11/2011
Driving Experience	6 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88268302
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 535 SERANGOON NORTH AVENUE 4
Postcode	#10-179 550535
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	COLLISION - MAJOR/MINOR RD
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?	
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)	1

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

PLEASE 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?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKV3551K
Vehicle Make/Model/Colour	TOYOTA VELLFIRE
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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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:

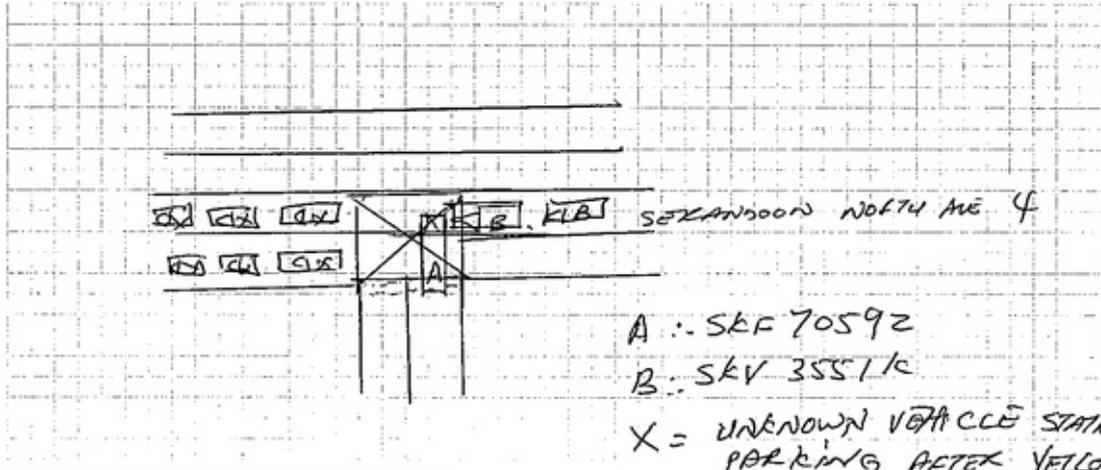
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: -7 FEB 2018
13:58hs


Driver's Signature
(If driver is not the policyholder)
Date & Time: -7 FEB 2018
13:58hs


Reporting Centre Personnel's Signature
Name: Deborah Lai
NRIC/FIN No.: S7332811Z

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE 7/1/2018 AT ABOUT 0655 AM. WHILE TURNING RIGHT AT THE CAR PARK ENTRANCE. UPON SEEING THE VEHICLES ON THE LEFT WAS STOPPING AT THE TRAFFIC LIGHT I PROCEEDED OUT CHECK MY LEFT CLEAR I DROVE OUT AND ON THE RIGHT A WHITE CAR NO. SKV 3551K HIT MY VEHICLE RIGHT SIDE MUDGUARD. AND SUBSEQUENTLY MY VEHICLE HIT AGAINST HIM, MY SIDE MUDGUARD SECURITY SCRAPPED AND THE REVEL CAME OUT, HIS VEHICLE SKV 3551K DAMAGED CAUSE FRONT BUMPER TO COME OUT

DECLARATION

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

Policyholder's Signature
 Date & Time: -7 FEB 2018

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: -7 FEB 2018

Reporting Centre Personnel's Signature
 Name: Deborah Lai
 NRIC/FIN No.: S7332811Z

CHARM SketchPlanform V3



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

CERTIFICATE OF INSURANCE

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

M.X.1

NISSAN AUTO PROTECTOR	(The below excess is subject to GST)
CERTIFICATE NO. 2100305738-05000	OWN DAMAGE EXCESS S\$600.00 (1) WINDSCREEN EXCESS S\$100.00 <small>(for policies with effect from 1st November 2002)</small>
	SUM INSURED Market Value
	INSURING WITH COE/PARF Yes
1) VEHICLE REGISTRATION NO.	SKF7059Z
2) NAME OF INSURED	Chua Ah Lay Mary
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	27 Jun 2017
4) DATE OF EXPIRY OF INSURANCE	26 Jun 2018
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*	
SUBJECT TO AGE CONDITION : All Age Condition	
a) The Insured.	
b) Any other person who is driving on the Insured's order or with his permission.	
This policy will indemnify the Insured or any authorised driver only if he/she meets the age conditions.	
A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised 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 licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.	
6) LIMITATION AS TO USE*	
Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or rewards, lullion, driving test, racing, pace-making, reliability trial speed-testing the cargo of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.	
APPROVED REPORTING CENTRES / NISSAN AUTHORISED REPAIRERS	
1. Tan Chong Mir - 913 Bi Timah Rd (T: 64694091/2/3) 2. Tan Chong Mir - 17 Lor 8 Toa Payoh (T: 63570753/4)	
3. TC AutoClinic - No 1 Sish Lok Yang Rd (T: 62622212) 4. Autolution Industrial - 19 Ubi Rd 4 (T: 64609666)	
5. TC AutoClinic - 25 Leng Kee Rd (T: 67039511/2/3)	
APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)	
6. ComfortDalgra Engrg - 205 Braddell Rd (T: 63837116) 7. DPS Body & Paint Workshop - 209 Pandan Gardens (T: 65864601)	
8. Ethex - 30 Bukit Batok Cres (T: 69547777) 9. Glass-Fix - 62 Ubi Ave 3 (T: 62760887) - For windscreen only	
10. Kan Fook Sing Motor - 81 Delu Lane 12 (T: 67479560) 11. Lal Huat (Meng Kee) Motor - 21 Sin Ming Ind (T: 64538110)	
12. Mova Automotive - 1009 Bukit Merah Lane 3 (Tel: 62723892) 13. Progressive Automotive - 3022A Ubi Rd 1 (T: 67415336)	
14. SME Motor - 1 Kaki Bukit Ave 6 Bld D (T: 67476106)	
LOSS OF USE	Loss of Use 10 Days (1500 - 1600cc) - Refer to policy wordings for details
* NAMED DRIVER	Pwee Huat Chye
HIRE PURCHASE COMPANY	DBS BANK LTD
EMPLOYER'S LOAN	
*Limitations reviewed irrespective by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.	

I / We hereby Certify that the policy to which this Certificate relates 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 11 May 2017

AIG Asia Pacific Insurance Pte. Ltd.

500610-426
TAN CHONG CREDIT PTE LTD-YKM
911 BUKIT TIMAH ROAD
TAN CHONG MOTOR CENTRE
SINGAPORE 589622
ANSP-MOTOR

AUTHORISED REPRESENTATIVE

ORIGINAL

TC00J5

CL No. 2100305738

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S00115951



Name



CHUA AH LAY MARY

蔡美莊

Race

CHINESE

Date of Birth

10-04-1952

Sex

F

Country of Birth

SINGAPORE



221193



NRIC# S00115951



Issue Date

A*

Date of Validity

21-07-1994

Address

APT BLK 535 SERANGOON NORTH AVENUE 4
#10-179
SINGAPORE 1555



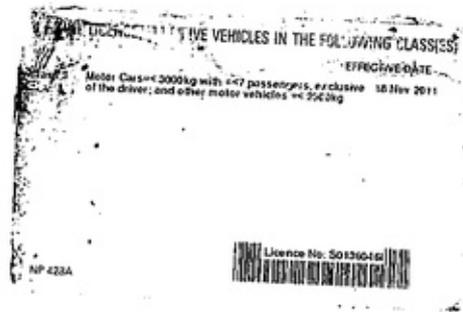
REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S01360461



Name
PWEE HUAT CHYE

Race
CHINESE
Date of birth
13-01-1953
Country/Place of birth
SINGAPORE

Sex
M



5715581



IPC No S01360461



Date of issue
17-03-2017

ADDRESS
APT BLK 535 SERANGOON NORTH AVENUE 4
#10-179
SINGAPORE 550535

Accident Photo



Accident Photo



Accident Photo



