

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	15/02/2018 11:03
Date Of Accident	14/02/2018 07:50
Exact Location Of Accident	JUNCTION OF CLEMENTI AVE 2/CLEMENTI AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS3356K
Insured/Policyholder	
Name Of Registered Owner	CAR COVE LEASING PTE LTD
Co Reg No	201602573M
Email Address	MICHAEL@CARCOVE.COM.SG
Mobile Phone No	(LOCAL) +65-96547097
Alternative Phone No	OFFICE-96547097

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	999994802
Cover Note Number	

Driver

Name of Driver	CHUA TZE KIAN SHERMAN
NRIC No	S9832456I
Date Of Birth	06/10/1998
Occupation	INDOOR
Date Of Driving Pass	04/01/2018
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96547097
Fax Number	
Contact Number	
Email Address	MICHAEL@CARCOVE.COM.SG

Address	40 FABER WALK #01-04
Postcode	128989
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	2
Was any body injured in the Accident?	YES
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)	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 (TYPE OF COLLISION IS HEAD TO SIDE)

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

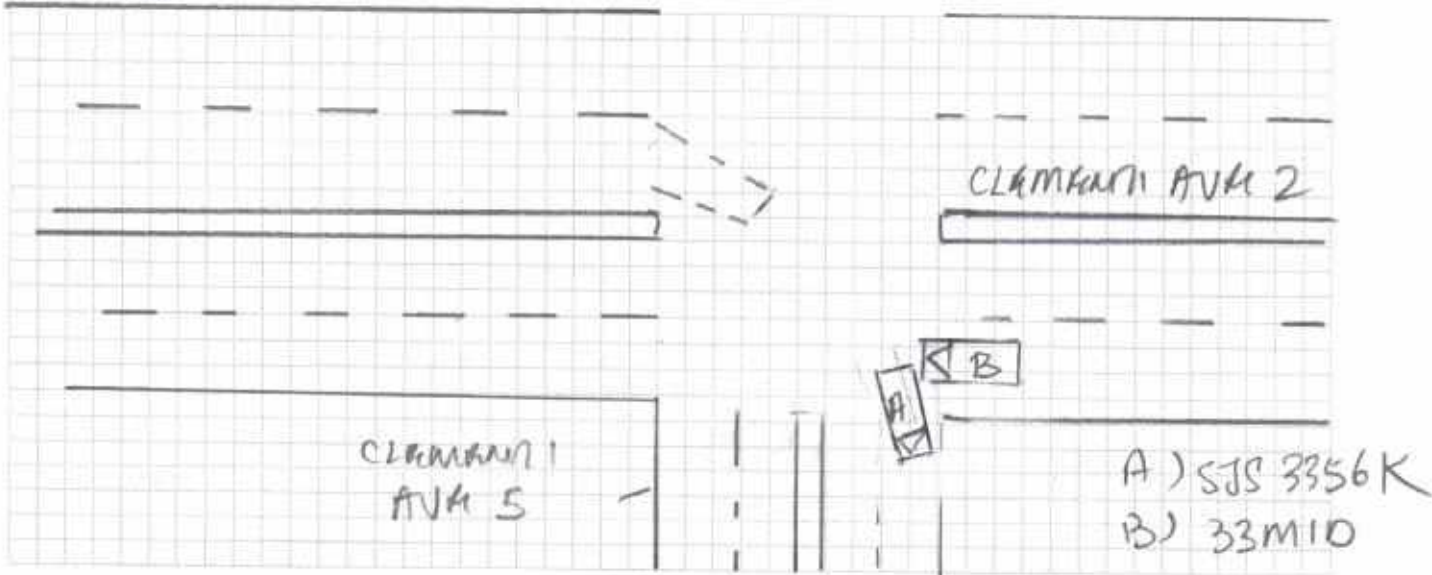
Vehicle Registration Number	33MID
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	YEO ZI JIE ,EDMUND
NRIC/Passport Number	S9409008C
Contact Number	88264878
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	CHUA TZE KIAN SHERMAN
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Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SJS3356K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was turning right onto Clements Avenue 5 at around 7.50 am, but before turning right as the light was green, I checked for any oncoming traffic on the opposite before turning. When I was turning out, a black mercedes benz 33M10 hit my car 33S3356K at the left rear side. After that I quickly pulled up to the side to check for any damages

DECLARATION

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



Policyholder's Signature
Date & Time:

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

[Signature] 15/02/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: 14/02/2018 (DD/MM/YYYY), TIME: 07.50 (HH:MM)
 LOCATION: Tanjong Clamanti BKE 2 / Clamanti BKE 5

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SJS 2356 K
 b) INSURANCE COMPANY: AIG
 c) POLICY NUMBER: 2100 999994801
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: MITSUBISHI LANCER
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

a) NAME: CARCOVE LIMBING PTE LTD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 201602573M CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

a) NAME: CHUA TZE KIAN SHARON (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S98324561 CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: 04/01/2018 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

i) DATE OF DRIVING PASS: _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HUSBAND

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: 33 MID MODEL: MARCOAS BLM 2
 b) DRIVER'S NAME: YAO ZI JIE, EDWARD
 c) NRIC/FIN/PASSPORT: S9409008C CONTACT: 88264878

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email = michael@carcove.com.sg

Fax =

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S98324561



Name

CHUA TZE KIAN SHERMAN

蔡子健

Race

CHINESE

Date of birth

06-10-1998

Sex

M

Country/Place of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

S98324561



CHUA TZE KIAN SHERMAN

Exp. Date: 06 Oct 1998

Issue Date: 04 Jan 2018



5175620



NRIC No: S98324561



Date of issue

20-05-2013

40 FABER WALK #01-04
SINGAPORE 128989
NRIC No: S98324561

Date: 27/09/2017

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 04 Jan 2018

NP 428A





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, 1980

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M 2 400

TPFT COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SJS3356K	POLICY EXCESS	S\$2000.00 Section (II)
POLICY NO. 999994802		WINDSCREEN EXCESS	S\$100.00
1) VEHICLE REGISTRATION NO.		SUM INSURED	Market Value
2) NAME OF INSURED		INSURING WITH COE/PAFF	Yes
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		SJS3356K	
4) DATE OF EXPIRY OF INSURANCE		Car Cove Leasing Pte Ltd	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		12 February 2018	
		11 February 2019	
Any person who is driving on the Insured's order or with their permission. If You or Your Authorised Driver is below the age of 23 years old and/or above 65 years old and/or has less than 1 year driving experience, the additional excess Section 2 is S\$3,000, outside Singapore is S\$5,000 and Fire & Theft excess Section 1 is S\$1,500.			
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*			
1) Use for social, domestic, pleasure purposes and business purposes of Insured			
2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.			
3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.			
The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.			
LOSS OF USE		Not Included	
HIRE PURCHASE COMPANY		Heritage Auto Enterprise Pte Ltd	
*Limitations rendered inoperative 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 06 Mar 2018

AIG Asia Pacific Insurance Pte. Ltd.

891991-000
Moh Kok Heng
3 Tampines Grande, AIA Tampines
#02-36
SINGAPORE 528799


AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC