

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 | 21/02/2018 17:50 |
| Date Of Accident | 21/02/2018 12:30 |
| Exact Location Of Accident | PIE (TUAS) BEFORE JURONG TOWN HALL EXIT |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SGS1214K |
| Insured/Policyholder | |
| Name Of Registered Owner | YEW KER CHIN |
| NRIC No | S6820023G |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-97696909 |
| Alternative Phone No | Office-97696909 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | NISSAN |
| Model | SYLPHY-1.5 (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? | YES |
| If No, Please state action to be taken | |
| 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 | 2100009481 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | YEW KER CHIN |
| NRIC No | S6820023G |
| Date Of Birth | 28/05/1968 |
| Occupation | INDOOR |
| Date Of Driving Pass | 22/03/1988 |
| Driving Experience | 29 YEARS AND 10 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-97696909 |
| Fax Number | |
| Contact Number | OFFICE-97696909 |
| EMail Address | NOEMAIL |

| | |
|---|--------------------------|
| Address | 89 TAMPINES AVE 1 #11-33 |
| Postcode | 528689 |
| 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 | CHAIN COLLISION |
| 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) | 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

VEHICLE C SUDDENLY JAM BRAKE CAUSE VEHICLE B TRY TO SWERVE LEFT BUT STILL HIT ONTO VEHICLE C. I COULDN'T STOP IN TIME AND HIT ONTO VEHICLE B REAR.

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 | SJX5603H |
| Vehicle Make/Model/Colour | |
| Details Of Properties | VEHICLE B |
| 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) | |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|-----------------------------|--------------------|
| Vehicle Registration Number | GBE6711S |
| Vehicle Make/Model/Colour | |
| Details Of Properties | VEHICLE C |
| Vehicle Category | COMMERCIAL VEHICLE |
| 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:

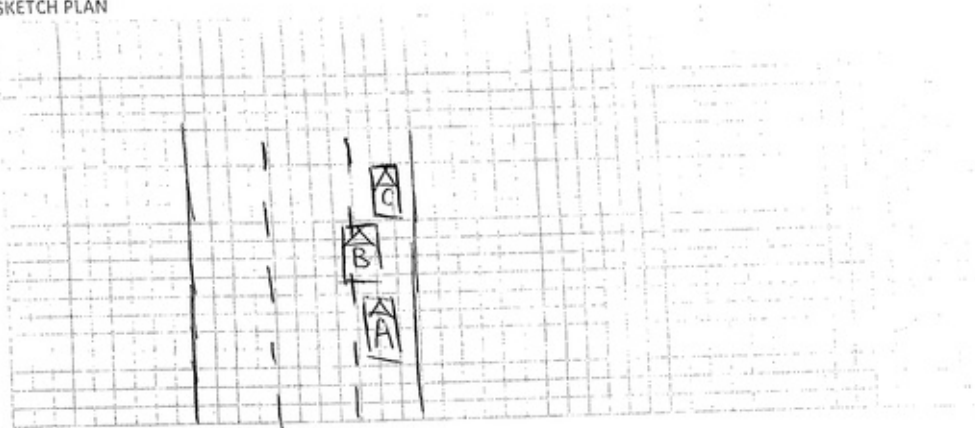
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the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

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

VEHICLE C SUDDENLY JAM BRAKE CAUSE VEHICLE B TRY
TO SWERVE LEFT BUT STILL HIT ONTO VEHICLE C.
I COULDN'T STOP IN TIME AND HIT ONTO VEHICLE
B REAR.

DECLARATION

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


Policyholder's Signature
Date & Time:

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

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

5/1-20/20 State PlanForm VS

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : YEW ROK CHAN
VEHICLE NUMBER : SG5 1214E
DATE/TIME OF ACCIDENT : 21/02/2015 @ 12:30pm
PLACE OF ACCIDENT : PIE (TURNS) BEFORE JURONG TOWARD HALL EXIT
THIRD PARTY VEHICLE (IF ANY) : 8JX5603H, QBE 671CS

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

YIO CHU KANG TO JURONG EAST

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

NO

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

CHAIN COLLISION

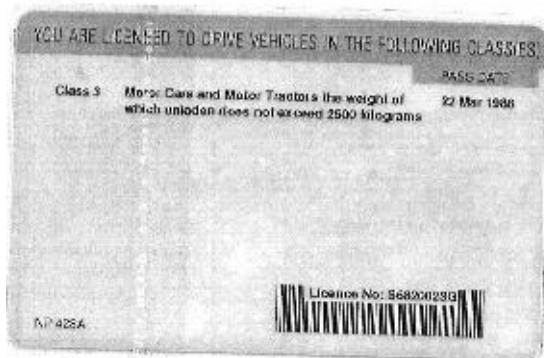
WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

NO

x YR
Name: _____

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

Driving License



INSURANCE



HOTLINE TEL: (65) 6719 2008
FAX: (65) 6413 1793

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 169)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

M.X.1

NISSAN AUTO PROTECTOR

CERTIFICATE NO. 2100009481-10000

(This Cover is not subject to GST)

OWN DAMAGE EXCESS S\$500.00 (1)
WINDSCREEN EXCESS S\$100.00
(For vehicles with effect from 1st November 2007)

SUM INSURED Market Value
INSURING WITH COE/PAF Yes

- 1) VEHICLE REGISTRATION NO. SGS1214K
- 2) NAME OF INSURED Yow Ker Chin
- 3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 3 Mar 2017
- 4) DATE OF EXPIRY OF INSURANCE 2 Mar 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 ("YIDER") 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, tuition, driving test, racing, pace-making, reliability trial, speed-testing, the carriage 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 Bl Tishah Rd (T: 6489409/1/2/3) 2. Tan Chong Mir - 17 Lor 6 Toa Payoh (T: 6357075/3/4)
3. TC AutoClinic - No 1 Sixth Lok Yang Rd (T: 6262221/2) 4. Automation Industries - 19 Ubi Rd 4 (T: 6460066)
5. TC AutoClinic - 25 Leng Kee Rd (T: 6703851/1/2/3)

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

6. ComfortDelgro Engrg - 205 Brascoe Rd (T: 6363711/8) 7. DPS Body & Paint Workshop - 209 Pandan Gardens (T: 6568460/1)
8. Ethos - 30 Bukit Batok Cres (T: 6654777/7) 9. Glass-Fix - 52 Ubi Ave 3 (T: 8278098/7) - For windscreen only
10. Kan Fook Sing Motor - 61 Dafu Lane 12 (T: 6747956/0) 11. Lai Hui (Meng Kee) Motor - 21 Sin Ming Ind (T: 6453611/0)
12. Mays Automotive - 1006 Bukit Merah Lane 3 (Tel: 6272386/2) 13. Progressive Automotive - 3022A Ubi Rd 1 (T: 6741533/6)
14. SME Motor - 1 Kaki Bukit Ave 6 Bld D (T: 6747610/8)

LOSS OF USE - Loss of Use 10 Days (1500 - 150000) - Refer to policy wordings for details

* NAMED DRIVER NA

HIRE PURCHASE COMPANY MayBank
EMPLOYER'S LOAN

*Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169) 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 169) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 27 Feb 2017

AIG Asia Pacific Insurance Pte. Ltd.

500610-505
TAN CHONG CREDIT PTE LTD - CAF
911 BUKIT TIMAH ROAD
TAN CHONG MOTOR CENTRE
SINGAPORE 589522
ANSP-MOTOR

AUTHORISED REPRESENTATIVE

ORIGINAL

T00318

NISSAN MOTOR CO., LTD.

JALAPA 611Z00000

EDUAPCA

PERFORMANCE



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

