# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 01/03/2018 15:50

# 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 <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	01/03/2018 15:34
Date Of Accident	27/02/2018 07:10
Exact Location Of Accident	JALAN DUA TRAFFIC LIGHT JUNCTION WITH CASSIA LINK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGR121G
Insured/Policyholder	
Name Of Registered Owner	PANG CHIE WEN
NRIC No	S8022081B
Email Address	JEROME@ECHOLTECH.COM
Mobile Phone No	(LOCAL) +65-98204163
Alternative Phone No	Office-98204163
Vehicle Particulars	
Manufacturer	LEXUS
Model	GS300-3.0 3 (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	2100350901-04
Cover Note Number	
Driver	
Name of Driver	DANC CHIE WEN

Name of Driver PANG CHIE WEN
NRIC No S8022081B
Date Of Birth 25/06/1980
Occupation INDOOR
Date Of Driving Pass 13/11/2000

Driving Experience 17 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98204163

Fax Number

Contact Number OFFICE-98204163

EMail Address JEROME@ECHOLTECH.COM

Address 12 OXFORD ST 798415

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

-

**OWNER** 

Insurance Company of Driver's Own Vehicle

-

NO

NO

NO

#### **General Information of the Accident**

Type Of Accident COLLISION - HEAD TO REAR

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?

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.

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?

If Yes, against whom?

## **Circumstances of Accident**

#### REFER TO REPORT

#### 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**

96303047

Vehicle Registration Number SJF7591P

Vehicle Make/Model/Colour TOYOTA VIOS 2009

Details Of Properties

Vehicle CategoryPRIVATE CARName of DriverLIM SDCK HOONNRIC/Passport Number\$7317913J

Address Postcode

Contact Number

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Sketch Plan

SKETCHPLAN		
-		
1 .	CASSIA LINK.	
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- CAR B Was	stationary. A approach	and did not brake in
time bury	o into the rear.	
- no one in	as injured. Speed & 1	5 Kuph.
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La Damie		4
LARATION	ticulars are true in every respect.	//
- New pare	ucoisis are true in every respect.	//- 16
//		[1 1/3/
/holder's Signature	Data de Girano	
neider's Signature & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:

## SKETCH PLAN

# IMP CHANT NOTICE

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- By thibdgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of
  the import being made available aforesaid.
- 8. Core Set under the Personal Data Protection Act (PDPA)

I un destand, 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:
  - 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.
- (6) 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.
- (a) 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.

oli cyholder's Signature

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

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8022081B



PANG CHIE WEN

CHINESE 25-06-1980 M SINGAPORE

60022081c

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S 8 0 2 2 0 8 1 B

PANG CHIE WEN

E:#: Date: 25 Jun 1980 Issue Date: 08 Sep 2003





02-11-2010

12 OXFORD STREET SINGAPORE 798415 NRIC No: \$80220818

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIE.



# CERTIFICATE OF INSURANCE

# AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Pang Chie Wen
Period of Insurance : 19 Sep 2017 To 18 Sep 2018
Engine No. : 3GR0249515

: JTHBH96\$605062374

Vehicle No.

: SGR121G : 2100350901-04

Policy No. Endorsement No.

Issued Date

: 24 Aug 2017

# ABOUT THE COVER

Driver Restriction

Make/Model

LEXUS GS300

Engine Capacity/Tonnage : 2.995.00 CC . NA

Off Peak Car : No-

Sum Insured : Market Value

First Year of Registration : 2008 Insuring with COE/PARF : Yes

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

a) The Policyholder

10 Any other person who is criving on the Policyholder's order or wich halther certification.

This Policy will independ yithis Policyholder or any extraonaud driver only if heather meals the specified age condition.

Annound Matunesencod Drivet Excess" (\*\*1004\*) if You are or You have to pay an additional sum of \$3,000 as "Young and/or Maxpenenced Drivet Excess" (Y10R\*) if You are or Your Aud Men 2 years' driving expensesce.

Age Condition

: All Age Condition

Limitation as to use\*

Use only for social, comestic and pleasure purposes and for the Policytholeu's business. This Policy dies not cover use for his or maint, shwing tuition, driving test, racing pace associating, the carriage of goods other than sametic in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

ation) Act (Cop. 180) and Section 95 of the Road Transport Act, 1987 (Malaysla), are not to \* Umballons randered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Competitive) under these treadings.

# EXCESS

Section 1 Fire - 50 Own Damage - \$800 Theft - 50 Flood Cover - \$0

Section 2 Property Damage - 50

Named Driver and Excess (where applicable)

Pang Chie Wen - \$800 (Own Damage)

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

Approved Reporting Centres/AIG Authorised Repairtry (For claims related operation).

Any account repairs to the Vehicle must be carried out by one of out Authorised Repairtry, Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accolerat repairs carried out at the 50% Agains workshow.

For other Approved Reporting CentresiAIG Authorised Repairers, please contact our 24-hour accident emergency holling at +05 6338 8200, Alternatively. You may refer to AIG website www.ling.com.sc critical first Approved Reporting CentresiAIG Authorised Repairers, please contact our 24-hour accident emergency holling at +05 6338 8200, Alternatively. You may refer to AIG website www.ling.com.sc critical first Approved Reporting CentresiAIG Authorised Repairers.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

Who hereby certify that the paticy to which this Certificate of the warene relates is secured in accompanie with the provisions of the Military Certify that the Certification Certifica

STARION ENTERPRISE DEK 2010 COMPASSVALE DRIVE #15-435

SINGAPORE 543204.

AIG Asia Pacific Insurance Pte. AUTHORISED REPRESENTATIVE







**Accident Photo** 



# **Accident Photo**







# **Accident Photo**

