

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	23/02/2018 16:21
Date Of Accident	23/02/2018 13:55
Exact Location Of Accident	JURONG KECHIL TOWARDS UPPER BUKIT TIMAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE8837T
Insured/Policyholder	
Name Of Registered Owner	TAM KOK LEONG
NRIC No	S1666047G
Email Address	GOLDFINGER189@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94579139
Alternative Phone No	OFFICE-94579139

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (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 THIRD PARTY

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	2100296824-05000
Cover Note Number	

Driver

Name of Driver	CELINA KOK LEONG
NRIC No	S2677568Z
Date Of Birth	12/02/1966
Occupation	OUTDOOR
Date Of Driving Pass	28/07/1995
Driving Experience	22 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94579139
Fax Number	
Contact Number	
EMail Address	RHYTHM388@GMAIL.COM

*Address 29 LORONG PISANG ASAM
 Postcode 597974
 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 - HEAD TO REAR
 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) 3

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

REFER TO STATEMENT

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 CB7301P
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category BUS
 Name of Driver SOH TOH HOCK
 NRIC/Passport Number S0135358F
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

SKETCH PLAN

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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:



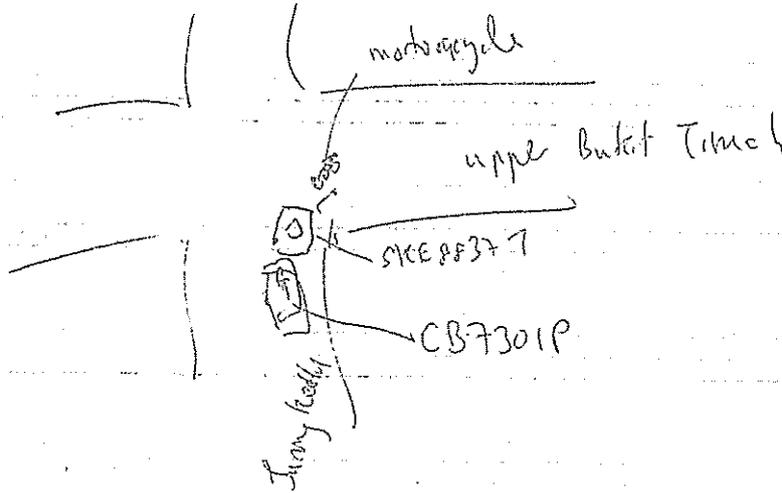
 Driver's Signature
 (if driver is not the policyholder)
 Date & Time:



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

Sketch Plan Pg. 2

SKETCH PLAN



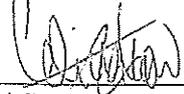
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was at the traffic light of Jln Jurong Kecil turning ~~into~~ Right into upper bukit timah road, the light was green and a motorcycle was directly in front of me, ^{who stopped suddenly} I braked and the back bus hit into my back of my Toyota Wish.

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.:

Sketch Plan Pg. 3

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2677568Z



Name
CELINA KOW SOW LENG
侯秀玲
Race
CHINESE
Date of Birth 12-02-1966 Sex F
Country of Birth
MALAYSIA



REPUBLIC OF SINGAPORE DRIVING LICENCE
S2677568Z
CELINA KOW SOW LENG
Date of Birth 12 Feb 1966
Date 07 Jan 2013




REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1666047G



Name
TAM KOK LEONG
譚國良
Race
CHINESE
Date of Birth 05-03-1964 Sex M
Country of Birth
SINGAPORE



0266948



NRIC No S2677568Z



Nationality
MALAYSIAN
Blood Group O+ Date of issue 15-12-1997

29 LORONG PISANG ASAM
SINGAPORE 597974
NRIC No: S2677568Z Date: 23/04/2008 No: 5922314

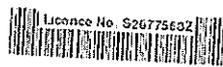
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE 26 Jul 1995

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg

NP 428A

Licence No. S2677568Z



0502593



NRIC No S1666047G



Blood Group A- Date of issue 17-10-1992

29 LORONG PISANG ASAM
SINGAPORE 597974
NRIC No: S1666047G Date: 23/04/2008 No: 5922313



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, 1988
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

AUTOPLUS	OWN DAMAGE EXCESS S\$600.00 (1)
CERTIFICATE NO. 2100296824-05000	WINDSCREEN EXCESS S\$100.00 <small>(for policies with effect from 1st November 2002)</small>
	SUM INSURED Market Value
1) VEHICLE REGISTRATION NO.	INSURING WITH COE/PARF Yes
2) NAME OF INSURED	SKE9837T Tam Kol Leong
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	13 Apr 2017
4) DATE OF EXPIRY OF INSURANCE	12 Apr 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, 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.	
SOLE AGENT'S WORKSHOP : For new vehicles less than 3 years from initial registration, you have the option for claims-related repairs to be done at Sole Agent's workshop. APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS) 1. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 2. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 3. Ethoz - 30 Bukit Batok Cres (Tel: 66547777) 4. DPS Body & Paint (Subsidiary of C & C) - 209 Pandan Gardens (Tel: 65664501) 5. Kan Pook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 6. Lai Hwat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110) 7. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 8. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336) 9. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476105)	
LOSS OF USE Loss of Use 10 Days (1600cc) - Refer to policy wordings for details	
NAMED DRIVER NA	
HIRE PURCHASE COMPANY / EMPLOYER'S LOAN DBS BANK 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 At Singapore 30 Mar 2017

AIG Asia Pacific Insurance Pte. Ltd.

030210-082
 AIG - AUTO DIRECT
 78 SHENTON WAY
 #07-16 AIG BUILDING
 SINGAPORE 079120

AUTHORISED REPRESENTATIVE

ORIGINAL

SECRET

Co. Reg. No. 2016020035

GEN04102/13

Addendum Sheet Pg. 1

THANKS TO TP Mr Lim



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : WCD 518026360 Vehicle Registration No: SKE 8837 T
Name (as shown in NRIC) : Tan Kok Leung NRIC/FIN/Passport No : S16660474
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 29 Lorong Pisang Asam Singapore 597974
Contact (Tel) : _____ Mobile No. : 98788981
Email Address : goldfinger189@gmail.com
Date of Accident : 23/02/2018 Time of Accident : 1:55 pm
Place of Accident : Junction of Jorong Kekil turning right to upper
Insurance Company: AIG. butok Timah Road

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Made an initial report on 23/02/2018
Driver of M.mib.w CB7301P Mr Soh Poh Hock
S0135318 F now want to settle with insurance claim
instead of private settlement

[Signature]
Policyholder / Driver's Signature
Date: 05/03/2018

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