

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	14/03/2018 16:36
Date Of Accident	14/03/2018 08:10
Exact Location Of Accident	JALAN ANAK BUKIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS7887G
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Insured/Policyholder

Name Of Registered Owner	TAN BEE LING CECILIA
NRIC No	S7044578F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94509152
Alternative Phone No	Office-64185342

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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	2100255236-06000
Cover Note Number	

Driver

Name of Driver	TEY SIANG CHIEN MARK
NRIC No	S6807534C
Date Of Birth	06/03/1968
Occupation	INDOOR
Date Of Driving Pass	01/03/1987
Driving Experience	31 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94509152
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	5 JALAN TUMPU
Postcode	878418
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?	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

REFER TO ATTACHED.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER CSE YIK
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH6678C
Vehicle Make/Model/Colour	
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

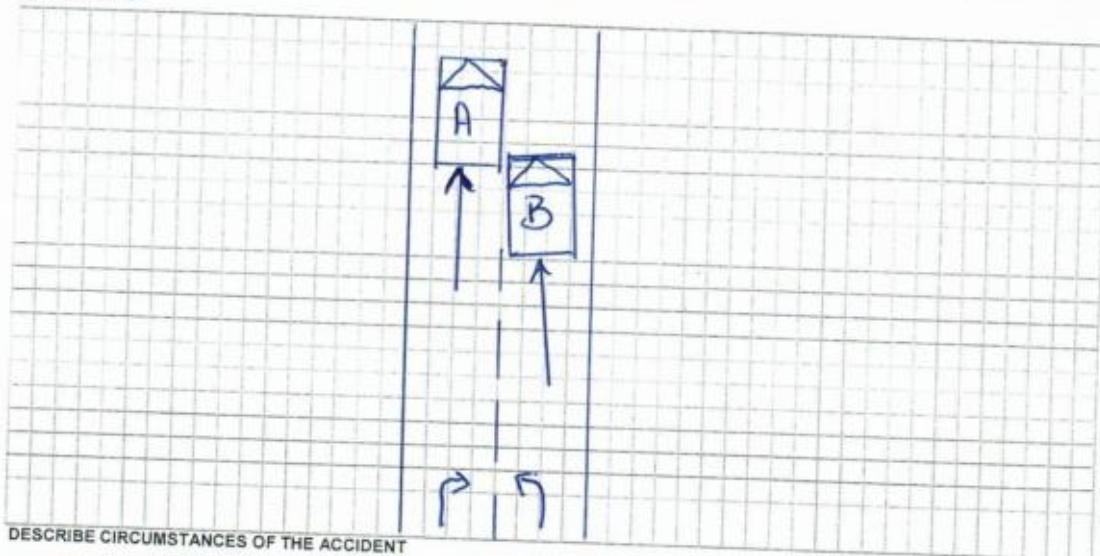


Driver's Signature
(If driver is not the policyholder)
Date & Time

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe-yik@cyclecarriage.com.sg

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached.

DECLARATION

We declare the foregoing particulars are true in every respect.

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
Date & Time

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

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6877 1272
Email: chanhoe.yik@cyclecarriage.com.sg

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

At 14th March 2018, about 0809 am, I was driving along Jalan Anak Bukit. I stopped at the traffic light at the cross junction of Jalan Jurong Kechil and Jalan Anak Bukit. The Comfort Delgro taxi, SH 6678, was stopped just behind me. The road ahead going straight after the traffic junction is a two lane road, then merge into 1 lane for about 100 to 200 metres and then split into 2 lanes again upon reaching the left turn junction towards Upper Bukit Timah Road.

When the traffic light turned green, I drove my car forward. Suddenly at the point where the 2 lanes merged into 1 lane, I saw the taxi was side by side with my car on a single lane, attempting to squeeze passed my car. Suddenly I felt my car jerked. Both drivers drove to the side of the main road along Upper Bukit Timah road, right around where Courts Super store is located and we exited our respective cars to examine the damages sustained.

My rear driver side rim sustained minor scratches while his front left side bumper near the wheel at the mud guard appeared to have black rubber stains. It seems that his front left side bumper near the wheel touches my rear driver side tire and rim.

The driver, Ken, mobile number: 9459 7692, sustained no injury. A Chinese lady passenger came out of the taxi at 816 am and told the taxi driver that she would like to take a bus. Ken told her that he would be on his way soon and she returned back into the taxi and closed the taxi car door. No injury was sustained at both drivers and the passenger of the taxi from the point of impact. Ken indicated over the phone on the same day, at 1024 am, that when he drove off from the site of the accident, he did confirmed with his passenger that they are not injured as well.

At 1024 am, when Ken called me, he has indicated that the Indian passenger on board intend to file an injury claim.

Date: 14th March 2018

Authorization Letter

S. Cecilia Tan
I, Tan Bee Ling, Cecilia (IC: 7044578F), authorized, Tey Siang Chien, Mark (IC: 6807534C) to
file the accident report and signed all relevant insurance and other required
documentations, for my vehicle, SKS7887G, for the accident that happened on 14th March
2018 along Jalan Anak Bukit, beside Beauty World Centre.

Cecilia Tan
Tan Bee Ling, Cecilia

(IC: 7044578F)

Cecilia Tan



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, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

MERCEDES-BENZ MOTOR INSURANCE

CERTIFICATE NO. 2100255236-06000

OWN DAMAGE EXCESS S\$800.00 (1)
WINDSCREEN EXCESS S\$100.00
(for policies with effect from 1st November 2002)

SUM INSURED Market Value
INSURING WITH COE/PARF Yes
SKS7887G

Tan Bee Ling Cecilia

18 Apr 2017

17 Apr 2018

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT
OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

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.

APPROVED REPORTING CENTRES / MERCEDES-BENZ AUTHORISED REPAIRERS

1. Cycle & Carriage Pandan Loop Service Center - 188 Pandan Loop (Tel: 6777 8388)

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

2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. Ethos - 30 Bukit Batok Cres (Tel: 66547777)

4. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 5. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560)

6. Lai Huat (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: 67476106)

LOSS OF USE 15 Days Replacement Car only for repairs at C & C - Refer to policy wordings for details

NAMED DRIVER NA

HIRE PURCHASE COMPANY MayBank
/ EMPLOYER'S LOAN

* 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 21 Mar 2017

500660-050
CYCLE & CARRIAGE - CORPORATE
239 ALEXANDRA ROAD
SINGAPORE 159930
ANSP-NONLIFE

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

ORIGINAL

AIG Building, 78 Shenton Way #07-16 Singapore 079120

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SSPFHX

Sketch Plan #6

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6807534C

Name
TEY SIANG CHIEN MARK

鄭項堯

Race
CHINESE

Date of Birth
06-03-1968

Sex
M

Country of Birth
SINGAPORE




REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7044578F

Name
TAN BEE LING CECILIA

陳美霖

Race
CHINESE

Date of Birth
12-12-1970

Sex
F

Country of Birth
SINGAPORE




FOR C&C USE ONLY

A8077502

Barcode

NRIC No. S6807534C

5 JALAN TUMPU
SINGAPORE 678418
S6807534C

Valid Until
10-11-2001

22/02/2014



FOR C&C USE ONLY

A8077503

Barcode

NRIC No. S7044578F

5 JALAN TUMPU
SINGAPORE 678418
S7044578F

Valid Until
10-11-2001

05/10/2013



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

