MKFS18039250 / Kan Fook Sing Motor Workshop - Defu ENTRY DATE & TIME: 22/03/2018 18:09 SUBMITTED BY: Yen Boo

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass **Driving Experience**

Gender

Mobile Number

Contact Number **EMail Address**

Fax Number

- 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 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

By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	22/03/2018 18:09		
Date Of Accident	22/03/2018 15:00		
Exact Location Of Accident	CTE (AYE) 10KM		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SDK7808K		
Insured/Policyholder			
Name Of Registered Owner	LIEW CHIN YEONG		
NRIC No	S6928533C		
Email Address	DAVE.PANSIN@GMAIL.COM.SG		
Mobile Phone No	(LOCAL) +65-92378320		
Alternative Phone No	Others-92378320		
Vehicle Particulars			
Manufacturer	BMW		
Model	730LI AT ABS D/AB 2WD 4DR NAV HID SR		
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	2100422278-02		
Cover Note Number	01/10/2017 TO 30/09/2018		
Driver			
Name of Driver	LIEW CHIN YEONG		
NRIC No S6928533C			
Date Of Birth	19/08/1969		
Occupation	INDOOR		

04/09/1989

MALE

28 YEARS AND 6 MONTHS

(LOCAL) +65-92378320

DAVE.PANSIN@GMAIL.COM.SG

OTHERS-92378320

Address Postcode APT BLK 721 BEDOK RESERVOIR RD #06-4630 (S) 470721

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

_

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? YES Was any injured conveyed to hospital by ambulance? YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

1

YES

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 65470000 - **FAX NO**:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

refer with attach.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJJ4965T

Vehicle Make/Model/Colour TOYOTA VIOS

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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJH9093L

Vehicle Make/Model/Colour MERCEDES BENZ B170

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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number FU9911E

Vehicle Make/Model/Colour YAMAH MTN850A

Details Of Properties

Vehicle Category MOTORCYCLE

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 4

Vehicle Registration Number SLC369D

Vehicle Make/Model/Colour MERCEDES BENZ E250 CGI A

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)

DETAILS OF INJURED PERSON 1

Name MOTOR RIDER

Approximate Age

Injuries Sustain HOSPITAL
Injured person in which vehicle? FU9911E
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES

Address Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. The 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 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:

- 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)
 - (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
- (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
- 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.
- 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

(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			A: 501-7808K
The state of the s			B: SJJ4965T C: SJH 90931
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
refe	er with	boline Leb	Д.
			1
DECLARATION /We declare the foregoing partic	ulars are true in every respect.	22/3/18	J. WALES
Policyholder's Signature	Driver's Signature (If driver is not the policy	. 22/3/18 - 18:25 - pholder)	Reporting Centre Personners Signature
Actions of store to	Date & Time:		RIC/FIN No.:

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: Lieu chin Yeone				
VEHICLE NUMBER	: SDK-7808/2				
DATE/TIME OF ACCIDENT	: 22/2/2018 (9) 1500hrs				
PLACE OF ACCIDENT	: CTE CAYE) loken				
THIRD PARTY VEHICLE (IF ANY)	: 537,4965 7 , 574 9593L , 51C 3690				
WHERE DID YOU START YOUR JOU BEFORE THE ACCIDENT? from woodlands -	RNEY AND WHERE WAS THE INTENDED DESTINATION				
WHAT IS THE TYPE OF COLLISION VEHICLES INVOLVED?	AND THE EXTENSIVENESS OF THE DAMAGES TO ALL				
WERE YOU OR YOUR PASSENGER/S TAKEN TO THE TRAFFIC POLICE FO	INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU OR INVESTIGATION?				
Name:					

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





1 of 3 Report No. T/20180322/2135

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/03/2018 17:35			Vide Report No.: E/20180322/0091	Station Diary No.:	
Informa	nt's Particu	ılars			
	Informant: IIN YEONG	ì	Address: APT BLK 721 BEDOK RE BEDOK SINGAPORE 470	SERVOIR RD #06-4630 HDB- 721	
	/ ID No.: D / S692853	33C	Contact No.: Home/Office: Mobile: 92378320		
	Nationality: SINGAPORE CITIZEN		Email:		
Sex: Age: Date of Birth: Male 48 19/08/1969			Type of Informant: Driver		
Race: Chinese			Language: Institution / School Na English		
Occupation: BUSINESS MAN			Driving Licence Informatio Class: 3	n: Date of Expiry:	

General Inform	ation of the Accident					
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/03/2018 15:00	Type of Location Straight Road	:	
Location:						
CENTRAL EXF						
Weather:		Road Surface:		Road Speed Limit:	_	
Clear		Dry				
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate		
Type of Collision	n:			Anyone conveyed by	П	
Between Movin	g Vehicles - Head To R	ear		ambulance: Yes		

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FU9911E		YAMAHA	MTN850A	Black		0
SDK7808K		BMW	730LI AT ABS D/AB 2WD 4DR NAV HID SR	Silver		0
SJH9093L		MERCEDES BENZ	B170	Grey		0
SJJ4965T		TOYOTA	VIOS E MANUAL	Silver		0





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20180322/2135

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLC369D		MERCEDES BENZ	E250 CGI A	White		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDK7808K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100422278-02	01/10/2017	30/09/2018

Brief Details.

On the above mentioned date, time and location, I was travelling on the extreme right of 4 lanes road along CTE > AYE. Traffic flow was heavy and suddenly vehicle infront brake due to heavy traffic and I manage to stop in time without any contact with the vehicle infront. Suddenly I felt one great impact from my rear from the vehicle behind bearing: SJJ4965T which cause my vehicle to collide into the vehicle infront bearing: SJH9093L. I have both front and back in-built camera in my vehicle.

That's all.





T/20180322/2135

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20180322/2135

CONTINUATION OF REPORT

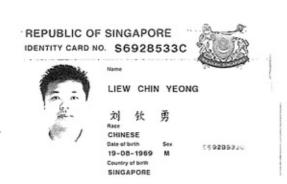
Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the <u>report number</u> as reference.

Signature Of Officer Record TP /	ing The Report:	Signature Of Informant:
TONG HWEE SIONG	2	Tool.
Signature Of Interpreter: Not applicable		Date/Time: 22/03/2018 17:35
Officer In Charge Of Case: TP / GIT / Staff Sgt SHAHRUL NIZAM Contact No.: 65476904	BIN SAMARRI	Classification Of Case:
Authentication Stamp NP168	Signature:	h

insurer's nric & license











CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Liew Chin Yeong

Period of Insurance : 01 Oct 2017 To 30 Sep 2018

Engine No. Chassis No.

: 08737254N52B30AF : WBAKB22070CN74179 Vehicle No. Policy No.

Issued Date

SDK7808K : 2100422278-02

Endorsement No.

: 13 Sep 2017

ABOUT THE COVER

: BMW 730LI Make/Model

Engine Capacity/Tonnage: 2,996.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2010

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*;

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with higher permission. This Policy will indumnly the Policyholder or any authorised driver orlig if heither meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Inexperienced Driver Eucess" (TDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience

Age Condition ; 40 years old and above

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving twisin, driving test, racing, pace-making reliability trial or speed-return, the comise of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cxp. 185) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under installings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Liew Chin Young - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accriters repairs to the Vahidle must be carried out by one of our Authorised Repairers, Within the first 3 years of the first registration of the Vahidle must be carried out at the Sale Agent's workship

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, You may refer to AIG website www.nig.com.sg
or AIG SG Mobile App. Simply scarch and download "AIG SG" from it unes or Google Play

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

IWe horeby certify that the policy to which this Cortificate of insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act. 1997 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

0591355000

LIEW SHAW ING SHIRLEY. BLK 349 TAMPINES STREET 33 #04-420 SINGAPORE 520349 SP-AFFLUENCE Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE





















