

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	05/04/2018 18:40
Date Of Accident	05/04/2018 08:40
Exact Location Of Accident	PIE TOWARDS CHANGI (BEFORE CTE EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK5454R
Insured/Policyholder	
Name Of Registered Owner	JEFFERY ONG @ JEFFERY RAHARDJA
NRIC No	S2202650Z
Email Address	JENNIFERONG@ESE.COM.SG
Mobile Phone No	(LOCAL) +65-90064088
Alternative Phone No	OTHERS-90064088
Vehicle Particulars	
Manufacturer	NISSAN
Model	NOTE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	2100494619-01
Cover Note Number	
Driver	
Name of Driver	ONG CHIN GEOK, JENNIFER
NRIC No	S1426180Z
Date Of Birth	06/11/1960
Occupation	INDOOR
Date Of Driving Pass	15/06/1995
Driving Experience	22 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90064088
Fax Number	
Contact Number	OTHERS-90064088
Email Address	JENNIFERONG@ESE.COM.SG

Address BLK 87 HILLVIEW AVENUE
#04-08
Postcode 669623
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured FRIEND
Vehicle Registration Number of Driver's Own Vehicle -
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 2
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

PLEASE REFER TO SKETCH PLAN AND ATTACHMENT

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 SLB7932L
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


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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:

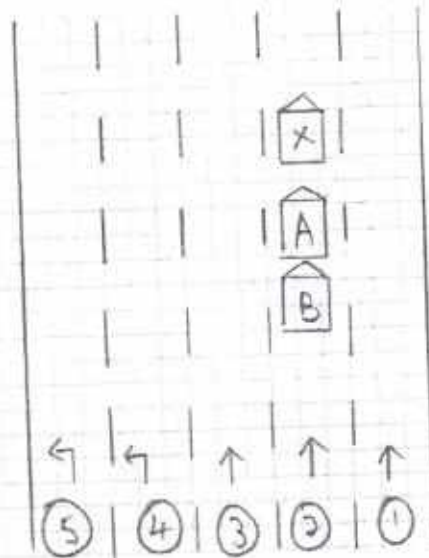
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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



A = SLK 5454R

B = SLB 7932L

P/E towards Changi
(Before CTE Exit)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attach

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.:

On 05.04.18 at about 08:40 hours at along PIE towards Changi (Before CTE Exit). While I was travelling straight on the lane 2, traffic was heavy and slow moving.

Suddenly I heard a loud bang from behind and when I alighted I realized it was vehicle (B) who hit my rear portion of my vehicle (A) causing damages to my vehicle.

Vehicle (A) : SLK5454R

Vehicle (B) : SLB7932L

Cheng

*an 05/04/2018
Roshini*

SINGAPORE ACCIDENT STATEMENT

Accident Date:	05/04/2018	Time:	08:40	(hh:mm) 24 hr format
Location	PIE towards Changi (Before CTE Exit)			
Vehicle Number	SLK 5454R			
Insured Name	Jeffery Ong			
NRIC/FIN	522026502	Contact Number	-	
Make	Nissan	Model	Note	
Are you claiming under your own insurance policy for repair to your vehicle?				
() Yes If No, Pls select: (<input checked="" type="checkbox"/>) Third Party () Reporting				
Insurance Company	AIG			
Type of Policy	(<input checked="" type="checkbox"/>) Comprehensive	() Third Party Fire & Theft	() TP Only	
Policy Number	2100494619-01			
Name of Driver	Ong Chin Geok, Jennifer () Same as Insured			
NRIC / FIN	514 261802	Contact Number	9006 4088	
Date of Birth	06/11/1960			
Driving Pass Date	15/06/1995			
Occupation	(<input checked="" type="checkbox"/>) Indoor	() Outdoor		
Gender	() Male	(<input checked="" type="checkbox"/>) Female		
Email Address	jenniferong@ese.um.sg			() NO EMAIL
Address of Driver	BLK 87 Hillview Avenue			
	#04-08 Singapore 669623			
Was driver an employee of the Insured's Company? () Yes (<input checked="" type="checkbox"/>) No				
If No, Relationship of the Driver with the Insured				
() Owner () Spouse (<input checked="" type="checkbox"/>) Friend () Relative () Children () Sibling				
Does the Driver Own Any Other Vehicle? () Yes () No				
If Yes, Vehicle Registration Number of Driver's Own Vehicle				
Insurance Company of Driver's Own Vehicle				
Weather Conditions (<input checked="" type="checkbox"/>) Clear () Raining () Others				
Road Surface (<input checked="" type="checkbox"/>) Dry () Wet () Others				
Was any foreign vehicle involved in this accident? () Yes (<input checked="" type="checkbox"/>) No				
Was anybody injured in the accident? () Yes (<input checked="" type="checkbox"/>) No				
If yes, injured detail				
Was there any video captured by Car Camera? () Yes (<input checked="" type="checkbox"/>) No				
Was the Accident reported to the Police? () Yes (<input checked="" type="checkbox"/>) No If yes attach police report				
DETAILS OF 3 rd party		Name / Nric	Contact	
Veh B	SLB 7932L			
Veh C				
Veh D				
Veh E				
Veh F				

Driver Only.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1426180Z



NAME
ONG CHIN GEOK, JENNIFER

RACE
CHINESE
Date of Birth
09-11-1960
Country of Birth
SINGAPORE

Sex
F



SLK 5454 R

Driver

1353397



NRIC No. S1426180Z



Blood Group
A+

Date of Issue
26-07-1994

Address
BLK 87 HILLVIEW AVENUE #04-08
SINGAPORE 669623

NRIC No. S1426180Z

Date: 20-11-2002

No. 4316817

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Portrait photo of a woman.

Licence Number: **S1426180Z**
Name: **ONG CHIN GEOK, JENNIFER**

Birth Date: **06 Nov 1960**
Issue Date: **17 May 2003**

Barcode: 1000485654A

SLK5454R

driver

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


	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	15 Jun 1995

NP 428A

Barcode: Licence No: S1426180Z

Owner.
SLK5454R

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2202650Z



Name
JEFFERY ONG
@JEFFERY RAHARDJA

Race
CHINESE


Date of birth
23-10-1956

Country of birth
INDONESIA


Sex
M

S2202650Z

4509612



NRIC No. S2202650Z



Date of issue
12-01-2010

21 NATHAN ROAD #17-02
SINGAPORE 248743

NRIC No: S2202650Z

Date: 22/12/2015



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Jeffery Ong @Jeffery Rahardja
 Period of Insurance : 19 Dec 2017 To 18 Dec 2018
 Engine No. : HR12213727B
 Chassis No. : JN1TBAE12Z0982847

Vehicle No. : SLK5454R
 Policy No. : 2100494619-01
 Endorsement No. :
 Issued Date : 07 Dec 2017

ABOUT THE COVER

Make/Model : NISSAN NOTE 1.2 (SUPERCHARGED/NON-SUPERCHARGED)
 Engine Capacity/Tonnage : 1,198.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2016
 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 his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIEDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

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 tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage 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

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 185) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0; Own Damage - \$600; Theft - \$0; Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Jeffery Ong @Jeffery Rahardja - \$600 (Own Damage)

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

1. TC AutoClinic Add: No. 1, Sixth Lok Yang Road Singapore 620099 62622212
2. Autolub Industrial Add: 19 Ulu Road 4 Singapore 408623 64909606
3. TC AutoClinic Add: 25 Leng Kee Road Singapore 150097 67038511 67038512 67038513
4. Tan Chong Motor Sales Add: 915 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: 17 Lorong 8 Tua Payoh Singapore 319254 63570753 63570754

For other Approved Reporting Centres/Autolub Repairers, please contact by 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.


IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 185), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third-Party Risks) Rules, 1955 (Malaysia).

0500610367

TAN CHONG CREDIT PTE LTD-NLL
 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
 SINGAPORE 589622 ANSP-MOTOR
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


 AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

201810