

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	04/04/2018 17:15
Date Of Accident	04/04/2018 11:00
Exact Location Of Accident	WAYANG SATU FLYOVER (DUNEARN RD)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF2382K
Insured/Policyholder	
Name Of Registered Owner	TEO ZHEN ZHI
NRIC No	S8220187D
Email Address	ZEE.DANCE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98267175
Alternative Phone No	Office-98267175

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	2100480018
Cover Note Number	

Driver

Name of Driver	SEOW WEICONG
NRIC No	S8209925E
Date Of Birth	13/04/1982
Occupation	INDOOR
Date Of Driving Pass	16/08/2002
Driving Experience	15 YEARS AND 7 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98369829
Fax Number	
Contact Number	
E-Mail Address	DAMONSWC@GMAIL.COM
Address	BLK 2 QUEENS RD #03-179
Postcode	260002
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	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?	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 AS ATTACHED

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	SFT582K
Vehicle Make/Model/Colour	HYUNDAI/SONATA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YVONNE KOH
NRIC/Passport Number	S8221788F
Contact Number	97382396

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

China Taiping Insurance (Singapore) Pte. Ltd.

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SGZ1749Y

TOYOTA/VIOS

PRIVATE CAR

RENNIE TOH QIAN YU

98373770

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SGN6948U

AUDREY CHAN

S9715995E

81821167

Accident Sketch Plan

Describe Circumstances of the Accident


- Driving straight along duenn road going up Wymy Sntu Flages.
- Was on extreme right lane travelling normal speed.
- ~~the~~ car in front braked suddenly, my car stopped behind it, but the car behind knocked into my car, resulting in a chain collision accident.

CAR A	CAR B	CAR C	CAR D
SPT528K	SLF2382K	SLG21749Y	SLG21749Y
HYUNDAI SANTA	TOYOTA PRIUS	TOYOTA VIOS	BMW (WHITE)
	(MY CAR)		SGN6948U

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time


 4/4/18, 11 am

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



 Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

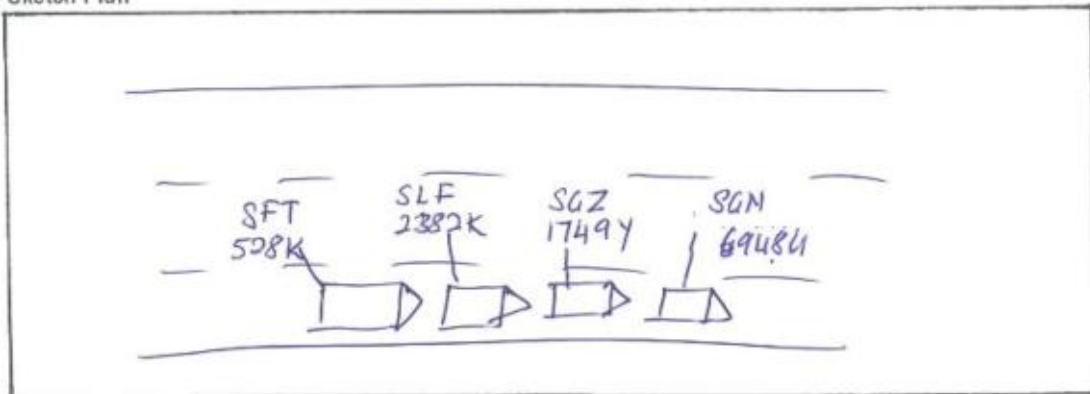
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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 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.
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time
4/4/18, 11am

Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : SEOW WEI LONG.
VEHICLE NUMBER : SLF 23 82 K.
DATE/TIME OF ACCIDENT : 4/4/2018 8.45 am.
PLACE OF ACCIDENT : Wayang Satu Flyover (Duneam Road).
THIRD PARTY VEHICLE (IF ANY) : SFT 582K

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Start Journey : Blk 2 Queen's Road #03-179
S'pore 260002.
Intended Destination : Singapore Flyer.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Chau collision

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No injuries at point of accident.

SEOW WELCONE

Name:

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

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building 78 Shenton Way #07-16 Singapore 079120
Tel: 6419 3000

Individual Statement

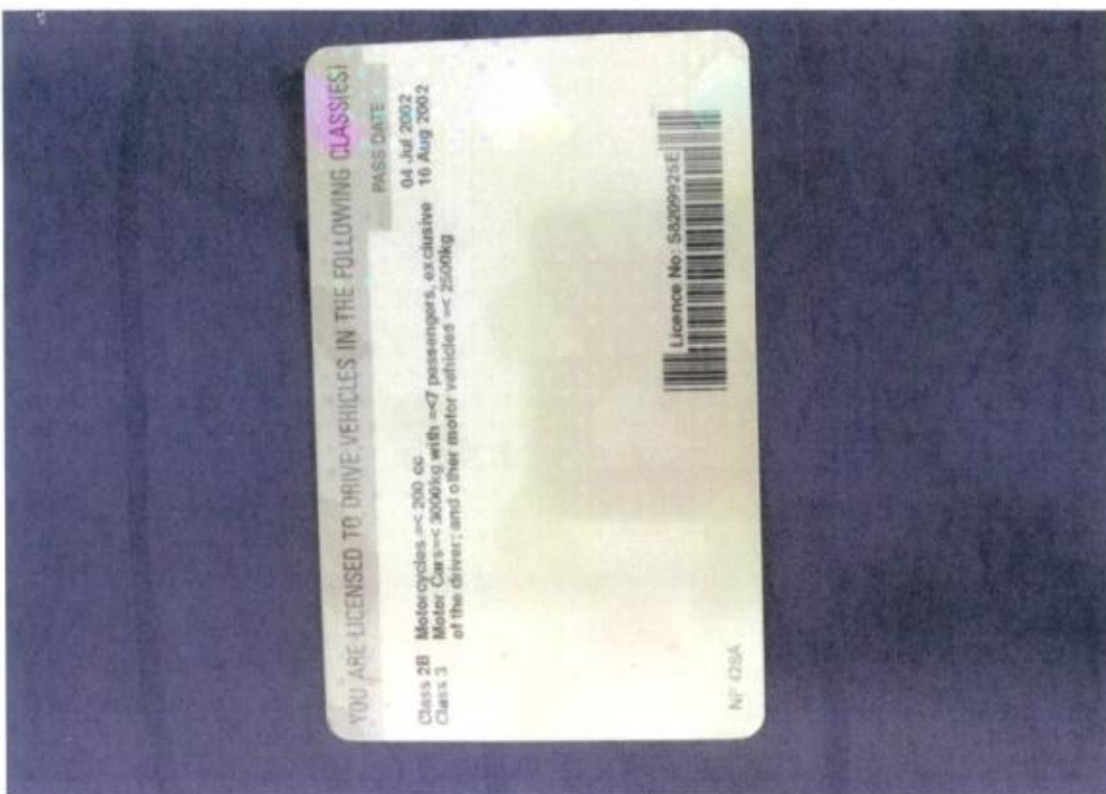
RE: Accident Reporting for Vehicle : SLF 2382 K

I, TED ZHENZHI, NRIC S8220187D, hereby authorize
SEOW WEICONG, NRIC S8209925E to file the accident
report on my behalf.

Ted Zhenzhi (TED ZHENZHI)
04/04/18

C.A.C.S NUS

cultural activities & community service club





CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Teo Zhenzhi
Period of Insurance : 01 Sep 2017 To 31 Aug 2018
Engine No. : 2ZRR929541
Chassis No. : JTDKB3FU603531443

Vehicle No. : SLF2382K
Policy No. : 2100480018-01
Endorsement No. :
Issued Date : 16 Aug 2017

ABOUT THE COVER

Make/Model : TOYOTA NEW PRIUS
Engine Capacity/Tonnage : 1,798.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2016
Insuring with COE/PAF : 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" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 25 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, prize-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 Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 186) and Section 96 of the Road Transport Act, 1987 (Malaysia), are not to be construed under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$1000 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Teo Zhenzhi - \$1000 (Own Damage)

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

Approved Reporting Centres/AIG Authorised Repairers (For claims related repairs)
Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 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: DBS BANK LTD

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. 186), Part IV of the Road Transport Act, 1987 (Malaysia), and Motor Vehicles (Third-Party Risks) Rules, 1969 (Malaysia).

0050210000

AIG ASIA PACIFIC INSURANCE P.L.
78 SHENTON WAY #07-16 AIG BUILDING
SINGAPORE 079120
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Manik

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

6/20/2017

78 Shenton Way #07-16 AIG Building 079120 | T: +65 6415 3300 | F: +65 6415 3723 | www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo

