Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 11/04/2018 17:33

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 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.

$7. \ \mbox{By the lodgement of this report to the insurers, you hereby constatoresaid.}$	ent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	11/04/2018 08:43		
Date Of Accident	09/04/2018 08:20		
Exact Location Of Accident	TAMPINES AVE 10		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SLK6412E		
Insured/Policyholder			
Name Of Registered Owner	RONALD SOH LI LOONG		
NRIC No	S7128026H		
Email Address	SOH.RONALD@GMAIL.COM		
Mobile Phone No	(LOCAL) +65-97492371		
Alternative Phone No	Others-97492371		
Vehicle Particulars			
Manufacturer	NISSAN		
Model	QASHQAI-1.2 (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	2100498971		
Cover Note Number			
Driver			
Name of Driver	RONALD SOH LI LOONG		
NRIC No	S7128026H		
Date Of Birth	02/08/1971		

INDOOR

03/02/1995

23 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97492371

Fax Number

Contact Number OTHERS-97492371

EMail Address SOH.RONALD@GMAIL.COM

Address BLK 851 YISHUN ST. 81 #09-50

Postcode 760851
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own -

Vehicle

Insurance Company of Driver's Own Vehicle -

_

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

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

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

SEE ATTACHED SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHA4513K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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 the purpose of the pu
 - 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: 10041 Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

UNIVERSITION INDUSTRIAL PTE LTD 19 UBI ROAD 4 SINGAPORE 408623

SINGAPURE 400023 FL: 6490 9666 FAX: 6846 7483

		AKLADE AMALISK	
	unotion of Tampines Av. wards Singapora EXPO.	e 10 waiting to turn is of the time of 0800 and of side swipe my car was close to my car side swipe me.	
we turn. 1 st	owed down when he	side zwipe mi.	
DECLARATION I/We declare the foregoing parti	culars are true in every respect.	4 M	
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	AUTOLIJAON CHOUSTRIAL PERLET 19 UBBROAD 4 SINGAROME MOSE23 "EL: 6490 9666 FAX: 6846 7483	O:



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Ronald Sch Li Loong Period of Insurance : 23 Jan 2018 To 22 Jan 2019

Engine No. : HRA2345419A

Chassis No. : SJNFEAJ11U1808844 Vehicle No.

: St.K6412E : 2100498971-01

Policy No. Endorsement No.

Issued Date

: 13 Jan 2018

ABOUT THE COVER

Make/Model : NISSAN QASHQAI 1.2 DIG-TURBO

Engine Capacity/Tonnage : 1,197.00 CC Driver Restriction

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2017 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The PolicyIndian b) Any other present who is diving on the PolicyIndian's order or with his her permission. This Policy will indurinely the PolicyIndian or any authorised devict only if height indexts the specified age condition. You have to pay an additional sum of \$3,000 as "Young endire Independenced Driver Excess" ("YIDR"). If You are dr Yout Authorised Driver (named or unicamed) is once the ago of 23 ancier has less than 2 years' or ving expenses.

Age Condition : All Age Condition

Limitation as to use* :

Use day for social, consistic and pleasure purposes and for the Principles's lousness. This Policy does not observe for her or remail direct plantom, which great, racing, pace-making, reliability for or seasof-testing, the carriage of goods other than samples in connection entril any trade or business or use for any purpose in democratic with Moson Trade.

Loss of Use 1500cc - 1600cc Optional

* Landations rendered inoperative by Section 6 of the Motor Vehicles (Trins-Party Risks and Compensation) Act (Cap. 169) and Section 95 of the Road Transport Act, 1987 (Malayvia), are not to be individed under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Ronald Seh Li Loong - \$600 (Own Damage)

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

Approved Reporting Centrust AIG Authorised Reporters (For claims related reports)
Any accident repairs to the Vehicle inust be carried out by one of our Authorised Reporters. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs claimed out of the Side Agent's accident each side of the Side Agent's each side of

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

If 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. 189), Part IV of the Road Transport Act., 1667 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

0503878000

HO YEW PING LAMBERY

3 YAMPINES GRANDE #05-01 AIA TAMPINES

SINGAPORE 528799 SP-LAMBERTHO-EAS

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE LAMBERT HO

78 Stienton Way #07-16 AIG Building 5079120 | T.+65 6419 3000 | F.+85 6415 3723 | www.aig.com.eg

mentry danger S7128026H





RONALD SOH LI LOONG

CHINESE
Date of birth Sex
02-08-1971 M

O2-08-1971 Country of Birth SINGAPORE

MIC NO. 37 120020H

Date of lance

ADD BLK 851 YISHUN STREET 81 #09-50 SINGAPORE 760851



03 feb 1995

Private & Confidential

RONALD SOH LI LOONG

APT BLK 851 YISHUN STREET 81 #09-50 SINGAPORE 760851

You will receive your photocard driving licence by registered post within 10 to 14 working days from the date of application unless you made a special request to collect at Traffic Police at the time of application

You can drive while awaiting the delivery of your photocard driving licence

Please turn overleaf for important notes.

S7128026H

C001357411

\$25/-

YOU CAN DRIVE WHILE AWAITING THE

TRAFFIC POLICE

10, UBI AVENUE 3

www.police.gov.sg

SINGAPORE 408865 Tel: 65470000

SINGAPORE POLICE FORCE

(Please do not detach) DELIVERY OF YOUR PHOTOCARD

------11/04/2018-----



























