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 <u>truthful and accurate</u> 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. 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

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	ACCIDENT STATEMENT
Date Of Report	16/04/2018 16:05
Date Of Accident	15/04/2018 07:00
Exact Location Of Accident	KEPPEL UOB OPEN CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SCH608U
Insured/Policyholder	
Name Of Registered Owner	TSJENG PO KIANG
NRIC No	S2018740I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96734978
Alternative Phone No	OFFICE-96734978
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	GLC250
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?	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 2100464314

Cover Note Number

Driver

Name of Driver TSJENG PO KIANG

 NRIC No
 \$20187401

 Date Of Birth
 28/03/1948

 Occupation
 INDOOR

 Date Of Driving Pass
 03/06/1969

Driving Experience 48 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96734978

Fax Number

Contact Number OFFICE-96734978

EMail Address NOEMAIL

Address 47 SHELFORD RD

Postcode 288439

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 - 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?

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

1

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

I WAS TRYING TO PARK MY CAR NEXT TO CAR B (SLS3840E). UNFORTUNATELY, I SCRATCHED HIS CAR ON THE RIGHT SIDE OF CAR B. CAR B WAS EMPTY, THE DRIVER HAD LEFT THE CAR PARKING THERE. IT WAS HAPPENED IN THE EARLY MORNING (7.00AM) ON 15 APRIL 2018 IN THE CARPARK ON KEPPEL HUB.

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 SLS3840E

Vehicle Make/Model/Colour

BMW

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver LEOW

NRIC/Passport Number

Contact Number 90577449

Address

Postcode

Insurance Company Name

Nature Of Damage RHF FENDER AND FRONT BUMPER

No. Of Passenger (Including Driver)

0

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.
- 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
 - (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
 - (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
- 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:

16/04/18 15:30 pm

(i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing raud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or A THE STATE incent

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time

Driver's Signature

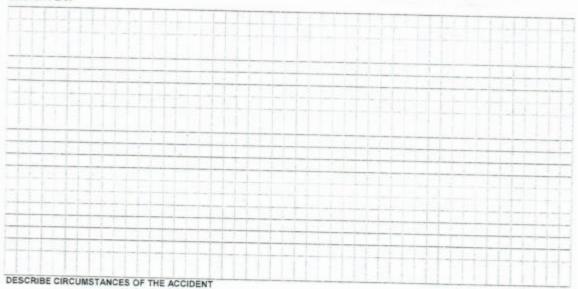
(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name

NRIC/FIN No.:



I was trying to punk my core wort to

SLS 3840 E. unfortuity I sorodched

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driven had left the CARR Propley there.

97 we happened in the zonly your (7.mm)
08 15/04/2018 in the correposal on kepneclub.

DECLARATION

I/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)

Poulos!

16/04/18 15:30 pm

Policyholder's Signature

Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name:

NRIC/FIN No.:



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, 1967 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

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MERCEDES-BENZ MOTOR INSURANCE

OWN DAMAGE EXCESS WINDSCREEN EXCESS

\$\$800.00(1) S\$100.00

CERTIFICATE NO. 2100464314-01000

SUM INSURED

Market Value

INSURING WITH COE/PARF SCH608U

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

Tsjeng Po Kiang

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

4) DATE OF EXPIRY OF INSURANCE

31 May 2017

30 May 2018

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 SS3,000.00, in additional 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 curriage 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. ComfortDelaro Engrg - 205 Braddell Rd (Tel: 65837118) 3. Ethoz - 30 Buški Batok Cres(Tel:66547777)

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

/ EMPLOYER'S LOAN

HIRE PURCHASE COMPANY MERCEDES-BENZ FINANCIAL SERVICES (S) LTD

* 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 28 Apr 2017

AIG Asia Pacific Insurance Pte. Ltd.

CYCLE & CARRIAGE - ANTANG 239 ALEXANDRA ROAD SINGAPORE 159930

AUTHORISED REPRESENTATIVE

ORIGINAL.



FOR C&C USE ONLY

* FOR











