# 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 <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

	ACCIDENT STATEMENT
Date Of Report	20/04/2018 13:37
Date Of Accident	19/04/2018 23:00
Exact Location Of Accident	JUNCT RD OF SIGLAP ROAD AND EAST COAST PARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGE2628S
Insured/Policyholder	
Name Of Registered Owner	CHOY LONG ONN
NRIC No	S0021331D
Email Address	CAROLINEPAT@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93394120
Alternative Phone No	Office-93394120
Vehicle Particulars	
Manufacturer	BMW
Model	520I-2.0 AT D/AB 2WD 4DR LED NAV (A)
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	REPORTING ONLY
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	2100470973
Cover Note Number	
Driver	
Name of Driver	CHUA GEK CHOO
NRIC No	S1361764C
Date Of Birth	26/09/1959

**INDOOR** 

01/08/1977

40 YEARS AND 8 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-98558628

Fax Number

Contact Number OFFICE-98558628

EMail Address CAROLINEPAT@HOTMAIL.COM

Address 107 FIDELIO STREET

Postcode 458475
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 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? NO

Was any injured conveyed to hospital by

ambulance?

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?

NO

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

# **Circumstances of Accident**

STATEMENT RECORDED BY SOO - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

# 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 SHB8625C

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

#### SKETCH PLAN

## IMPORTANT NOTICE

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- 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:
  - 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 Vehicle No A-SHE 26285 B-SHB 8625C. Legend Bike DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 8625C) 133 ed 717 DECLARATION I/We declare the foregoing particulars are true in every respect. Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Driver's Signature

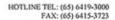
Date & Time:

(If driver is not the policyholder)

Policyholder's Signature

GIARIMC SketchPlanForm, V3

Date & Time:





# 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, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

AUTOPLUS

CERTIFICATE NO. 2100470973-01000

excess is subject to GSTI

OWN DAMAGE EXCESS S\$500.00 (1) WINDSCREEN EXCESS \$\$100.00

SUM INSURED Market Value INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

SGE2628S

2) NAME OF INSURED

Choy Long Onn

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

30 Jun 2017

4) DATE OF EXPIRY OF INSURANCE

29 Jun 2018

5 ) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

SUBJECT TO AGE CONDITION: 40 years old and above

 a) The Insured.
 b) Any other person who is driving on the Insured's order or with his permission. A Young and/or Inexperienced Driver Excess ("YIDR") of \$\$3,000.00, 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 carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

SOLE AGENT'S WORKSHOP: For new vehicles less than 3 years from initial registration, you have the option for claims-related

repairs to be done at Sole Agent's workshop.

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

- 1. ComfortDelgro Engrg 205 Braddell Rd (Tel: 63837118) 2. Glass-Fix 52 Ubi Ave 3 (Tel: 62780887) For windscreen only 3. Ethoz 30 Bukit Batok Cres(Tel:68547777) 4. DPS Body & Paint (Subsidiary of C&C) 209 Pandan Gardens (Tel: 65684501) 5. Kan Fook Sing Motor 61 Defu Lane 12 (Tel: 67478580) 6. Lai Huat (Meng Kee) Motor 21 Sin Ming Ind (Tel: 64538110) 7. Mova Automotive 1006 Bukit Merah Lane 3 (Tel: 62723892) 8. Progressive Automotive 3022A Ubi Rd 1 (Tel: 67415336) 9. SME Motor 1 Kaki Bukit Ave 6 Bik D (Tel: 67476108)

LOSS OF USE Loss of Use 10 Days (1600cc) - Refer to policy wordings for details

\* NAMED DRIVER NA

HIRE PURCHASE COMPANY NA

IEMPLOYER'S LOAN

\*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 (Majaysia).

Issued in Singapore 12 Jun 2017

AIG Asia Pacific Insurance Pte. Ltd.

472006-000 CHUA GEOK LAN 19 SERANGOON GARDEN RISE SINGAPORE 554388

AUTHORISED REPRESENTATIVE

ORIGINAL

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1361764C





CHUA GEK CHOO

蔡玉珠

CHINESE 26-09-1959 F Courty of Buth SINGAPORE



2299461





S1361764C

Blood Group Date of asse

0+ 23-08-1994

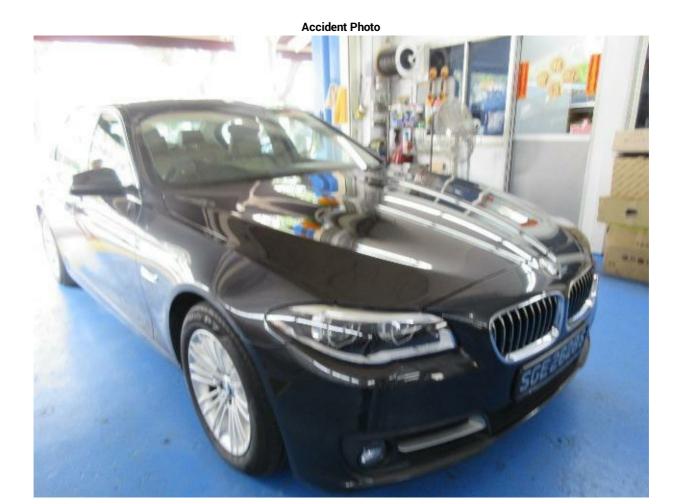
Oqto: 04-05-2000 No: 3627778

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

Class 3 Motor Cars and Motor Tractors the weight of 01 Aug 1977 which unladen does not exceed 2500 kilograms

NP 428A







# **Accident Photo**



# **Accident Photo**

