## SINGAPORE ACCIDENT STATEMENT

## **IMPORTANT NOTICE**

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 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	21/07/2015 09:37
Date Of Accident	25/06/2015 23:25
Exact Location Of Accident	WOODLANDS CENTRE ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SP52R
Insured/Policyholder	
Name Of Registered Owner	TAN SWEE KIAM
NRIC No	S1750445B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96333164
Alternative Phone No	Office-96333164
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E200
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
f 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	2100307629-03000
Cover Note Number	
Driver	
Name of Driver	TAN SWEE KIAM
NRIC No	S1750445B
Date Of Birth	11/02/1966
Occupation	INDOOR
•	

26/03/1985

30 YEARS AND 2 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-96333164

Fax Number

**Contact Number** OFFICE-96333164

**EMail Address NOEMAIL** 

Address BLK 641 YISHUN ST 61 #12-212

Postcode 760641 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 **UNKNOWN - REFER SKETCH PLAN** 

NO

YES

NO

**Weather Conditions CLEAR** Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident? NO Was any other material or property damaged? YES Was there any video captured by Car Camera? NO Number of Passengers (Including Driver) 2

## **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] **CLEMENTI NPP** 

Was notice of intended Prosecution given?

If Yes, against whom?

## **Circumstances of Accident**

Are accident photos available for attachment? YES

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number JDQ1015

Vehicle Make/Model/Colour

**Details Of Properties** 

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **Details of Witness**

Name

Phone Number

**Email Address** 

#### Sketch Plan

## SKETCH PLAN

## IMPORTANT NOTICE

- 1. Rease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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 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)

Funderstand, 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 at 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 mating 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 S	ignature / D	late &	Driver's & Time	Signat	ure (1	drive	r is no	t the p	olicy	holde	r) / D:	E)	mai!	DID : ke:	Cerl 677 lyn.	yn ( 1 442 ingg	Ong OHA	Kaj	Li 36 51	113 Com.
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	refer to police rep	DM NO. T 20150720 2131.
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lectars the foregoing pa	articulars are true in every respect.	
	7	V1
		Kerlyn Ong Kai Li DID : 6771 4420 HP : 9186 511:
	W/	- didit, Ecilyn Ongonevelsonsin
nolder's Signature / Dat	e & Oriver Signature (If driver is not the p	Cycle & Carriage Industries Pte Customers of Epothny Contantant
1	& Time	Personnel
1		

Page 2 of 2

Police Station Of Origin: Clementi NPP 427 Clementi Avenue 3 #01-456 SINGAPORE 120427



Station Diary No.:

l of 3

Report No. T/20150720/2131

## Tel No: 1800-7759999

# Date/Time Report Made: Vide Report No.: 20/07/2015 16:52

20/07/2013 10:32				25				
Informa	nt's Particu	lars'						
Name of Informant: TAN SWEE KIAM			Address: APT BLK 641 YISHUN STREET 61 #12-212 SINGAPORE 760641					
ID Type / ID No.: NRIC NO / \$1750445B			Contact No.: Home/Office:	Mobile: 96333164				
Nationality: SINGAPORE CITIZEN		EN	Email:					
Sex: Male	Age: 49	Date of Birth: 11/02/1966	Type of Informant:					
Race: Chinese		+	Language: English	Institution / School Name:				
Occupation: BUSINESSMAN			Driving Licence Information: Class: 3	Date of Expiry:				

Type of Accident:	Non-Injury Foreign Vehicle	Drink I	Drive:	Date/Time of Accident 25/06/2015 23:25	: Type of Location
Location: Along Road 1 WOODLANDS CH Woodlands Checkr Weather: Clear	ENTRE ROAD soint, Extreme Left La	ne. Malaysia to Sing Road Surface; Dry	gapore		ad Speed Limit:
Traffic Flow:	Traffic Control:		1,200,000	affic Volume:	
Type of Collision: Between Moving V	ehicles - Side Swipe -	Same Direction			yone conveyed by bulance:

Vehicle No.	Type	A Property of the second	1000000			The same of the same
THE RESERVE THE PROPERTY OF	The state of the s	Make	Model	Color	Condition	No of Passenger
JQD1015	Car			White	Slightly	0
CDEAD	1 00			3	Damaged	
SP52R	Car	MERCEDES	E 200	Grey	Slightly	1
		BENZ		1-500-500	Damaged	1.0

Details of Ve	hicle Insurance	# F . F . F . F . W.	PARTICIPATION FOR	n market war
Vehicle No.	Insurance Company	Insurance No	Effective Dat	e Expiry Date
SP52R	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100307629	16/07/2015	15/07/2016

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA				

Police Station Of Origin: Clementi NPP 427 Clementi Avenue 3 #01-456 SINGAPORE 120427 Tel No: 1800-7759999





2013

Report No. 1/20150720/2131

## CONTINUATION OF REPORT

Name	TAN SWEE KIAM	<b>新国际企业工作</b>	都有動	经济	15215253453452254200
D.I.		8	ID 1	No.	S1750445B
Related Vehicle	SP52R (Car)		-		
Hospital/Clinic	1.00		Con	tact No.	96333164
Hospital/Clinic NIL			Clas	s of	(1)
			Driv Lice:	ing nce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Expi	ry Date	
No. of Days grant	ed Medical Leave (MC) NIL	Date Disc	harge	NIL	
discriger	Mark The Tree Sales and Course	Degree of	Injury	NIL	
Name	MR ZAIN	1746575.79	124.2	<b>美国的</b>	TEACHER PROPERTY.
			ID N	D.	NIL
Related Vehicle	SP52R (Car)		-		
To a de Novembre			Conta	ct No.	93868284
Hospital/Clinic	NIL		Cl	- +	
			Class Drivin Liceno	ig ce &	Class: NIL Date of Expiry: NIL
ate Treatment	NIL.	T	Expiry	Date	
o, of Days granter	Medical Leave (MC) NTI	Date Disch.	arge	NIL	
Date Treatment No. of Days granted	NIL I Medical Leave (MC) NIL	Date Disch Degree of I	Expiry arge	Date	

## Brief Details.

On 25/06/2015 at around 2325hrs, I was driving my vehicle, SP52R, a Grey Mercedes from Malaysia back to Singapore. At the Woodlands checkpoint, I am travelling on the extreme left lane and I was proceeding through the lane. I stopped behind the car ahead of me. When the car ahead of me drove off, suddenly I saw a vehicle on my right coming and squeezing his way into my front. It did not manage to drive though and side swiped with my front and he just didn't wish to provide and keep insisting that I am in the wrong. I told him that we can either settle by traffic police report was required since he did not wish to settle thus, I did not proceed to lodge any insurance or police report. On 19/07/2015, I opened my letterbox and discovered a letter from the insurance telling me that the Malaysian vehicle had claim insurance and I was told to lodge the Traffic Accident Report. No one was injured at the point of time. My vehicle and the Malaysian vehicle suffered minor scratches at the bumper area.

lice Station Of Origin:
Tementi NPP
427 Clementi Avenue 3 #01-456 SINGAPORE
120427
Tel No: 1800-7759999





3 of 3

Report No. T/20150720/2131

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
LOW BAO CAN CALVIN	A CONTRACTOR OF THE CONTRACTOR
Signature Of Interpreter: Not applicable	Date/Time:
	20/07/2015 16:52
Officer In Charge Of Case:	Classification Of Case:
TP/AEIT/	or care.
Toh Hoe Sian Jenn	
Contact No.: 65476185	
Authentication Stamp NP168	



## 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)

MIX.1

ha barew a reason io subject to GST)

OWN DAMAGE EXCESS \$\$800.00 (1) WINDSCREEN EXCESS \$\$100.00

CERTIFICATE NO. 2100307629-03000

SUM INSURED. Market Value INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

SP52R

Tan Swee Kiam

2) NAME OF INSURED

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

16 Jul 2015

4 ) DATE OF EXPIRY OF INSURANCE

15 Jul 2016

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

SUBJECT TO AGE CONDITION : All Age Condition

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 frieds the age conditions.

An "Elderly, Young and/or inexperienced Driver Excess" ("EY/DR") of an additional sum of \$\$3,000.00 in additional to the Policy Excess applies to You and an Authorised Driver (named or unnamed). If You are or the said.

Authorised Driver is above the age of 65, below the age of 23 and/or has less than 2 year's driving excenence.

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 lest, racing, page-making, reliability trial speed-testing, the carrage 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 REPAIRERS)

1. ComfortDelgno Engig - 205 Braddel Rd (Tel: \$3837118) 2. Glass-Fix - 52 Ubi Avg 3 (Tel: \$2730837). For windscreen only

3. Ethoz - 30 Bukit Batok Cres Tel: 665477777 4. DPS Body & Paint (Subsidiery of Q8C) - 209 Padden Gardens (Tel: 66894501)

5. Kan Fook Sing Motor - 61 Deft Lane 12 (Tel: 67479860) 6. La Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)

7. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 8. Progressive Automotive - 3022A Upi Rd 1 (Tel: 67415356)

9. SME Motor - 1 Kaki Bukit Ave 6 Bik D (Tel: 67478106)

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

NAMED DRIVER NA

HIRE PURCHASE COMPANY MERCEDES-BENZ FINANCIAL SERVICES (S) LTD /EMPLOYER'S LOAN

"Limitations rendered incoerative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Molaysia), are not to be included under these headings.

Parry Risks and Compensation| Act (Chapter 189) and Part IV of the Road Transport Act, 1987 [Malaysia]

Issued in Singapore 15 Jul 2015

AIG Asia Pacific Insurance Pte. Ltd.

503842-000 TALKOK YONG 3 TAMPINES GRANDE #04-18 AIA TAMPINES SINGAPORE 528799 SP-XMLEE-MOH

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPORP

AIG Asia Pacific Insurance Ptc. Ltd.

REPUBLISHE

DRIVING LICENCE

Licence Number: \$1750-45B

TAN SWEE KIAM

Birth Date: 11 Feb 1966 Issue Date: 19 Mar 2004



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

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

26 Mar 1985

NP 428A

Licence No: \$1750445B

**Accident Photo** 



## **Accident Photo**



## **Accident Photo**





