#### 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 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.	
	ACCIDENT STATEMENT
Date Of Report	03/05/2018 10:56
Date Of Accident	02/05/2018 18:10
Exact Location Of Accident	PIE EXIT TO BUKIT BATOK EAST AVE 3
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGL2898S
Insured/Policyholder	
Name Of Registered Owner	FOONG CHIN CHEE
NRIC No	S0192548B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98307846
Alternative Phone No	OFFICE-98307846
Vehicle Particulars	
Manufacturer	HONDA
Model	CITY-1.5 VTEC (A)
Exact Purpose for which vehicle was being used at time of accident	t en
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No. Diagon state action to be talen	TUDD DADTY

If No, Please state action to be taken THIRD PARTY PRIVATE CAR Vehicle Category

**Insurance Company** 

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 2100428619-02

Cover Note Number

**Driver** 

Name of Driver FOONG JUNHONG, FABIAN

NRIC No S8731706D Date Of Birth 11/10/1987 Occupation **OUTDOOR** Date Of Driving Pass 23/11/2006

**Driving Experience** 11 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97657099

Fax Number

Contact Number

**EMail Address** FABIANFOONG@YAHOO.COM.SG Address BLK 4TOH YI DRIVE #11-217 SINGAPORE 590004

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

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 WET

**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 YES

NO

1

NO

NO

Was any other material or property damaged?

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

soliciting/offering accident claims assistance.

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?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number YN1863A

Vehicle Make/Model/Colour MITSUBISHI

**Details Of Properties** 

Vehicle Category COMMERCIAL VEHICLE

Name of Driver MANDIP SINGH
NRIC/Passport Number G8011122W
Contact Number 93552110

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### **SKETCH PLAN**

#### **IMPORTANT NOTICE**

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- 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 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.
- ent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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)
  - (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' 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.
- - 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 iff driver is not the policyholder?

Date & Time:

Name

Reporting Centre Personnel's Signature

NRICHIN NO .: Toh Khar K....

GIARMC Spendsfunktion with

Page 3 of 42

# SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT CAD Vehicle SGL 28985 was stationer quering to exil PIE towards But Batk East An I when we hale number (B)4N1863A hit the near of SGL 28985. Important: Reporting Only You have been advised by the workshop that in the Claim OD event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the Claim TP Claim OD/ TP at other workshop DECLARATION I/WE declare the foregoing particulars are true in every respect. Policyholder's signature Driver's Signature Reporting Centre Personnel's Signature Date & Time (if driver not the policyholder) Name:

Date & Time 5/5/1/8

Toh Khar Kian

Nric/Fin No.



## CERTIFICATE OF INSURANCE

#### PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

: Foong Chin Chee Name of Policyholder Vehicle No. : SGL2898S : 11 Sep 2017 To 10 Sep 2018 Policy No. : 2100428619-02 Period of Insurance

Engine No. : L15A14806985 Endorsement No.

: MRHGD86506P040404 Issued Date : 29 Aug 2017 Chassis No.

## ABOUT THE COVER

: HONDA CITY VTEC CVT Make/Model

Engine Capacity/Tonnage : 1,497.00 CC Sum Insured : Market Value First Year of Registration : 2006 · NA Off Peak Car : No Insuring with COE/PARF : No Driver Restriction

#### 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.

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, pace-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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

#### EXCESS

Section 1 Fire - \$0 Theft - \$0

Section 2 Property Damage - \$0

Windscreen: NA

Named Driver and Excess (where applicable)

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

Sproved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)
any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).
To Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency holline 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

1. (c) (c) (b) 

tifre Purchase Company/Employer's Loan: DBS BANK LTD

PAPALIA 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 1997 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

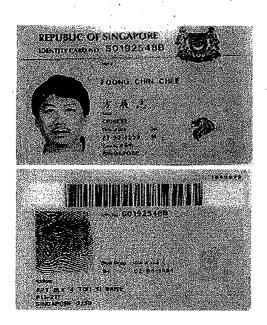
AlC Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE SSPECE

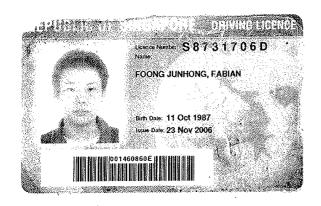
<sup>10</sup>/ <sup>807</sup>-15 AIG Euilding S079120 | T:+65 6419 3000 | F:+65 6415 3723 | www.alg.com.99

AIG Asia Pacific Insurance Ple. Ltd.

#### Sketch Plan Pg. 3



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REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8731706D





FOONG JUNHONG, FABIAN

方俊宏

Pacco
CHINESE
Date of Birth
11–10–1987
Country of Birth
SINGAPORE

Sox M 597**31706**U

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

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 23 Nov 2006 of the driver; and other motor vehicles =< 2500kg •

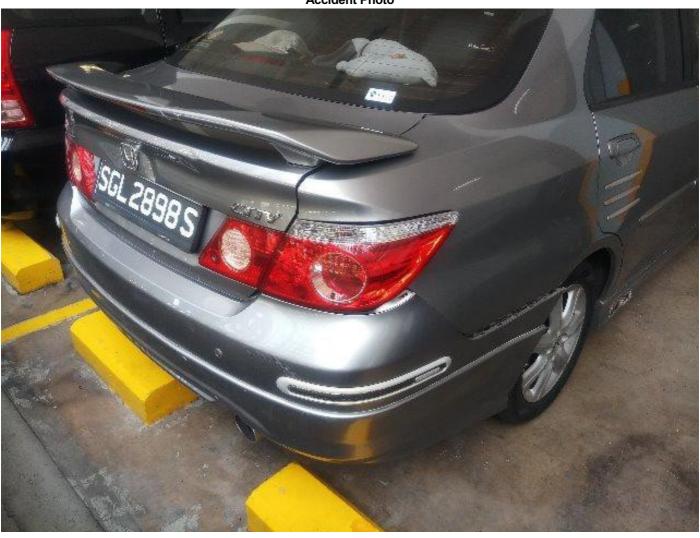
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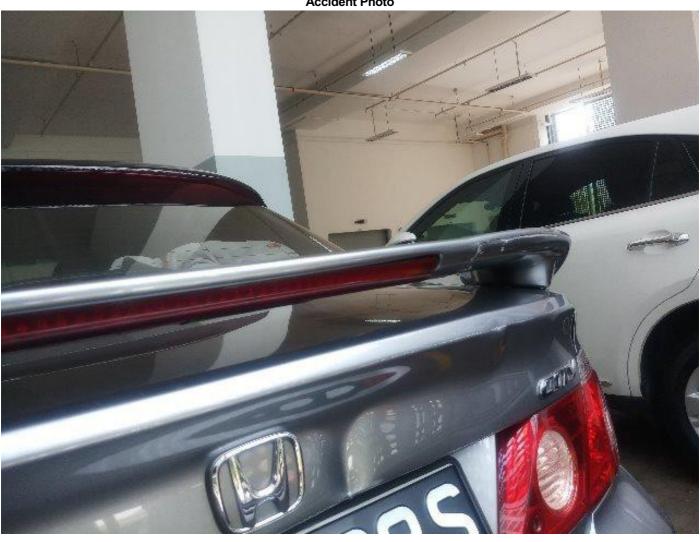
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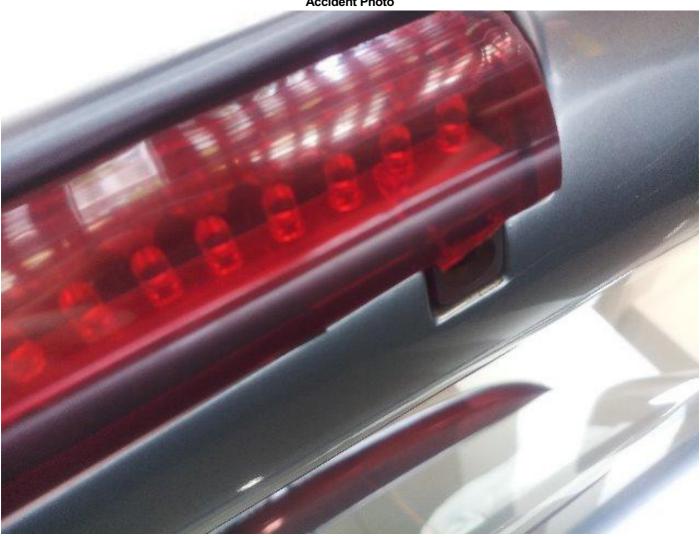






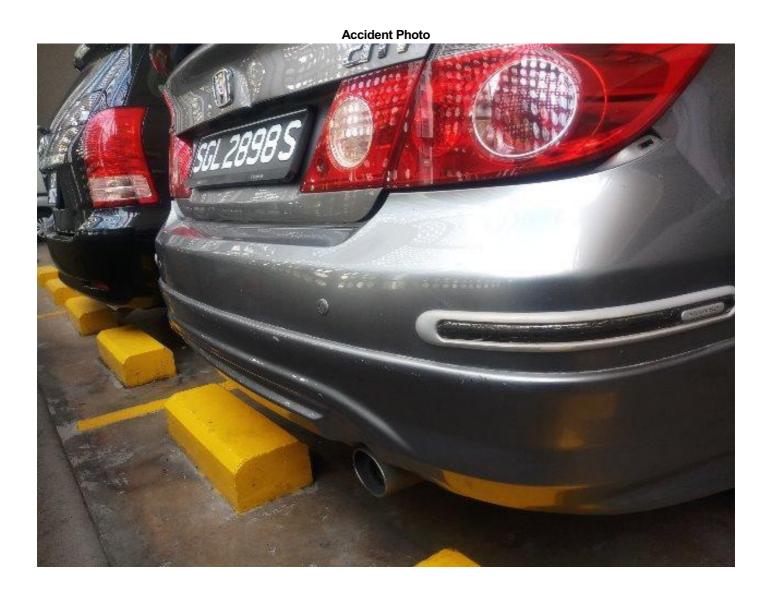








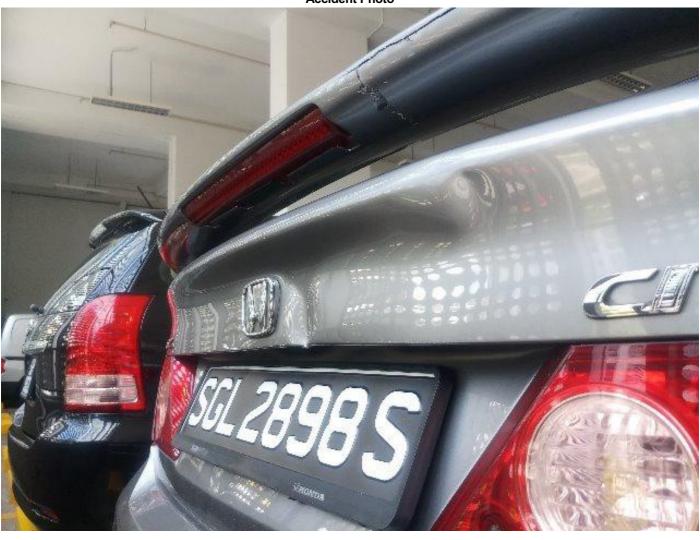














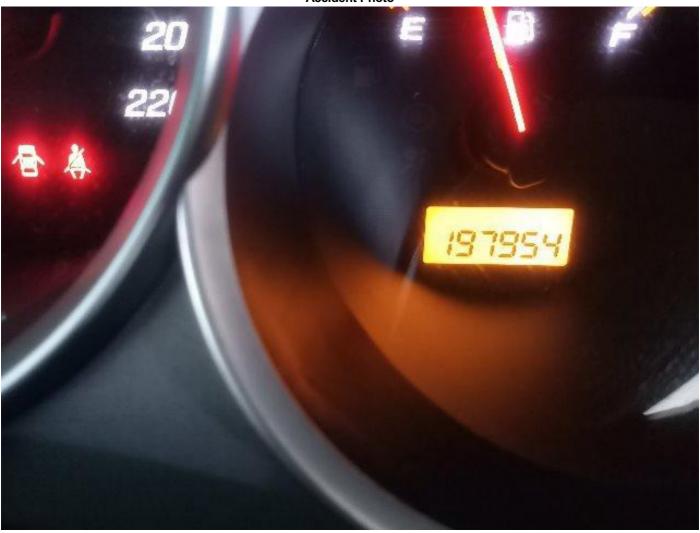




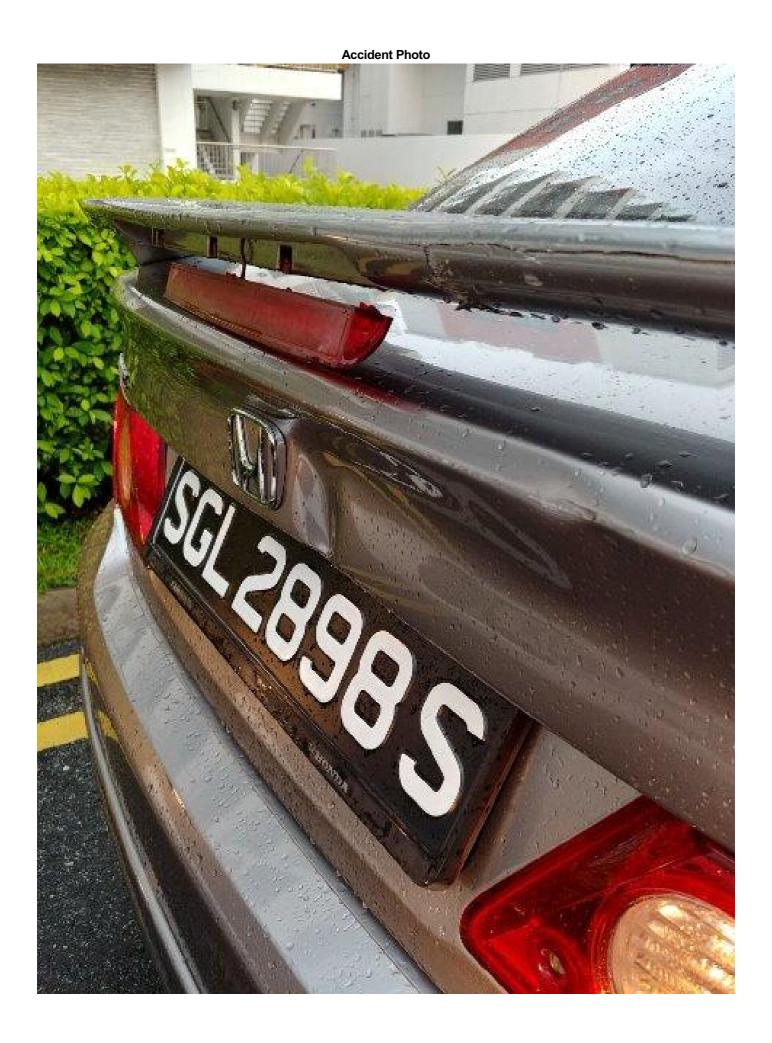






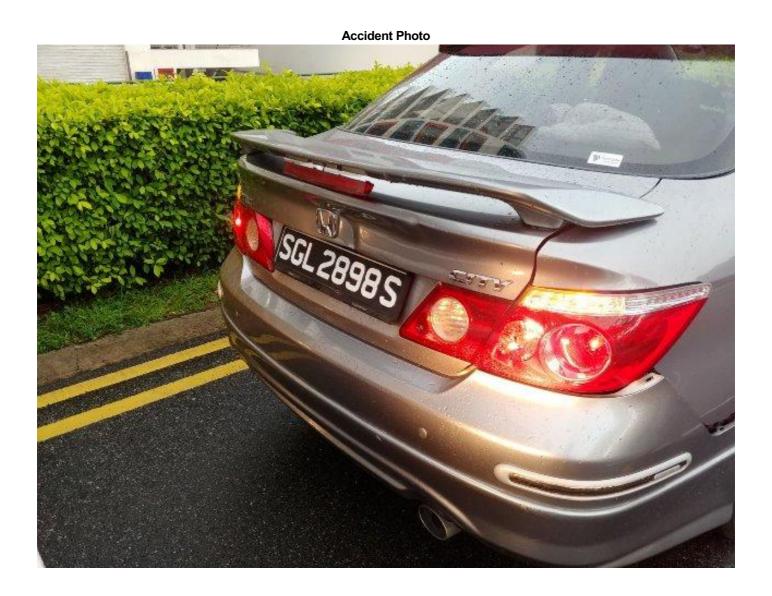




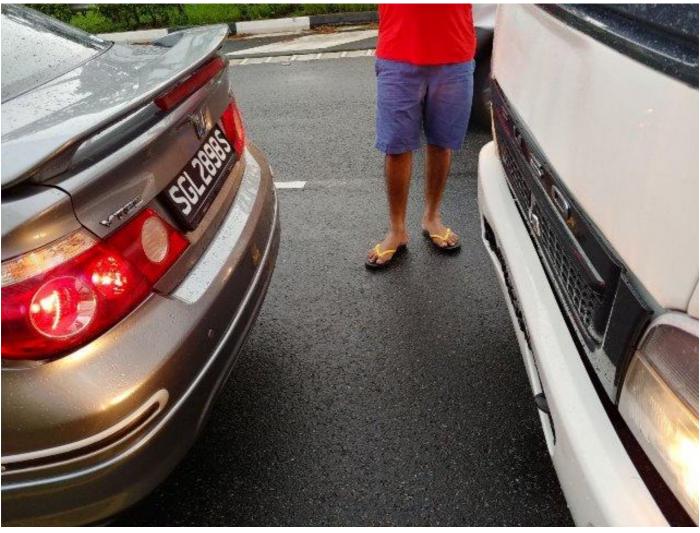


**Driving License** 



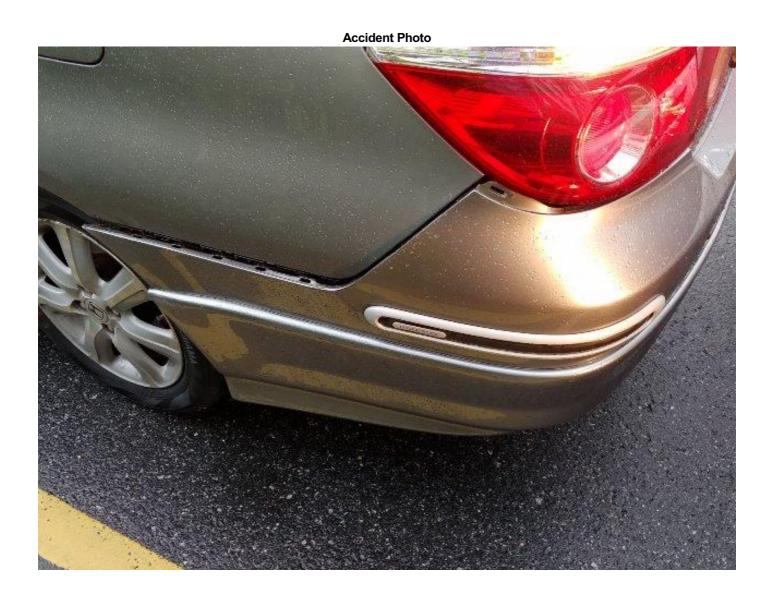












## **Identification Card**

