

(Draft)

MLHM18062112 / Lai Huat (Meng Kee) Motor Pte Ltd - Sin Ming
 ENTRY DATE & TIME: 14/05/2018 10:09
 SUBMITTED BY: [To Be Confirmed]

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 withholding 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 14/05/2018 10:09
 Date Of Accident 12/05/2018 13:15
 Exact Location Of Accident ALONG BISHAN ROAD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFE988C
Insured/Policyholder
 Name Of Registered Owner LIM ENG LAI (LIN RONGLAI)
 NRIC No S7111843F
 Email Address ENGLAILIM@YAHOO.COM.SG
 Mobile Phone No (LOCAL) +65-97553258
 Alternative Phone No Home-97553258

Vehicle Particulars

Manufacturer SUZUKI
 Model VITARA 2.0 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 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 2100153993-08000
 Cover Note Number

Driver

Name of Driver LIM ENG LAI (LIN RONGLAI)
 NRIC No S7111843F
 Date Of Birth 11/04/1971
 Occupation INDOOR
 Date Of Driving Pass 09/03/1992
 Driving Experience 26 YEARS AND 2 MONTHS
 Gender MALE

5/14/2018

E-FILE

Vehicle Category

GOODS VEHICLE

Name of Driver

MONG CHAK KUAN

NRIC/Passport Number

S1759051J

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

5/14/2018

E-FILE

(LOCAL) +65-97553258

Mobile Number

Fax Number

Contact Number

EMail Address

Address

Postcode

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

HOME-97553258

ENGLAILIM@YAHOO.COM.SG

700 LORONG 1 TOA PAYOH
#15-11

319773

NO

OWNER

-

-

-

-

-

-

General Information of the Accident

Type Of Accident

Weather Conditions

Road Surface

COLLISION - HEAD TO REAR

CLEAR

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?

Was any other material or property damaged?

YES

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

NO

Number of Passengers (Including Driver)

4

Passenger 1

Name: : HO YOKE PING
Gender: : Female

Passenger 2

Name: : LIM ZI TUNG CHRISSIE
Gender: : Female

Passenger 3

Name: : LIM ZI SHAN PORSHA
Gender: : Female

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

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

GY4938D

Vehicle Make/Model/Colour

VAN

Details Of Properties

SKETCH PLAN

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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:
 - (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
- (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:

14 MAY 2018

0950 AM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

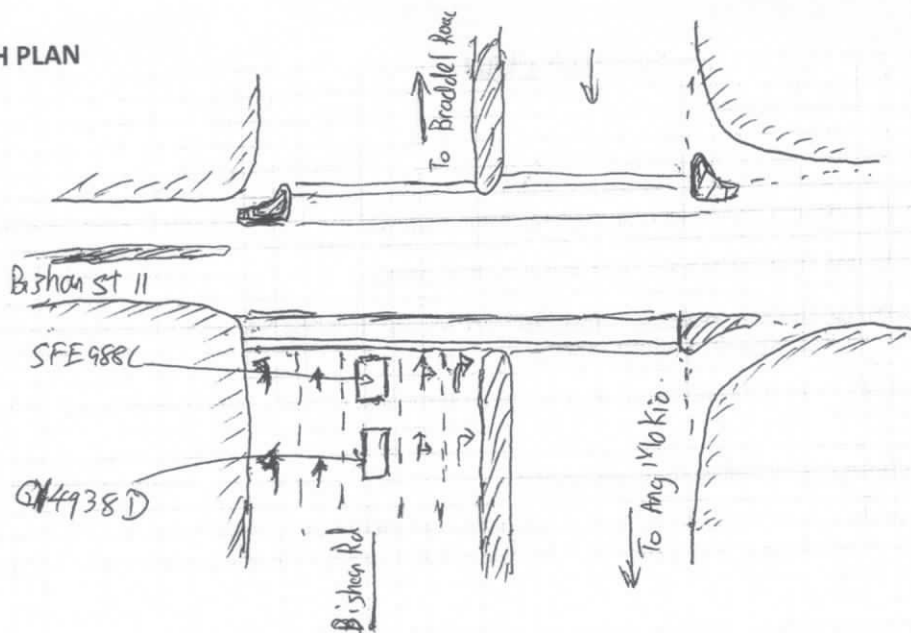
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Poh Kwee Choo
S6840583A

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12 May 18 at about 1:15 pm, I was driving along Bishan Road with my family in my vehicle SFE 988C towards Braddell Road. As I approached the junction of Bishan Road / Bishan Street 11, the traffic lights turned Red and I slowed down to a stop. Just as I stopped, I heard a loud bang and my car jerked forward. I realised that my vehicle had been hit from the rear. I alighted from the car and met the other vehicle's driver. The rear of my car was badly damaged. We exchanged driver license details and agreed to report to the respective insurance.

The rear vehicle driver is Mong Chak Kuan (S 1759051J) and his vehicle number is GY 4938D.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 14 May 18

0950h

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

Poh Kwee Choo

NRIC/FIN No.:

S6840583A