

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	16/05/2018 14:00
Date Of Accident	15/05/2018 15:05
Exact Location Of Accident	CTE TOWARDS ANG MO KIO (NEAR BRADDELL)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT2301U
Insured/Policyholder	
Name Of Registered Owner	CHONG CHIN HOE RICKY
NRIC No	S7303202D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90213088
Alternative Phone No	Office-90213088

Vehicle Particulars

Manufacturer	SUZUKI
Model	APV-1.6 (A)
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
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	THIRD PARTY
Fleet Policy	NO
Policy Number	2100383709
Cover Note Number	

Driver

Name of Driver	LIM SIEW CHIN
NRIC No	S7719946B
Date Of Birth	19/07/1977
Occupation	INDOOR
Date Of Driving Pass	04/11/2003
Driving Experience	14 YEARS AND 6 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-90213088
Fax Number	
Contact Number	
EMail Address	SHIRLII@HOTMAIL.COM
Address	217C SUMANG WALK#11-224
Postcode	823217
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	RAINING
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?	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)	2
Passenger 1	Name: : SOO YEN MOI 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

REFER TO REPORT ATTACHED

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

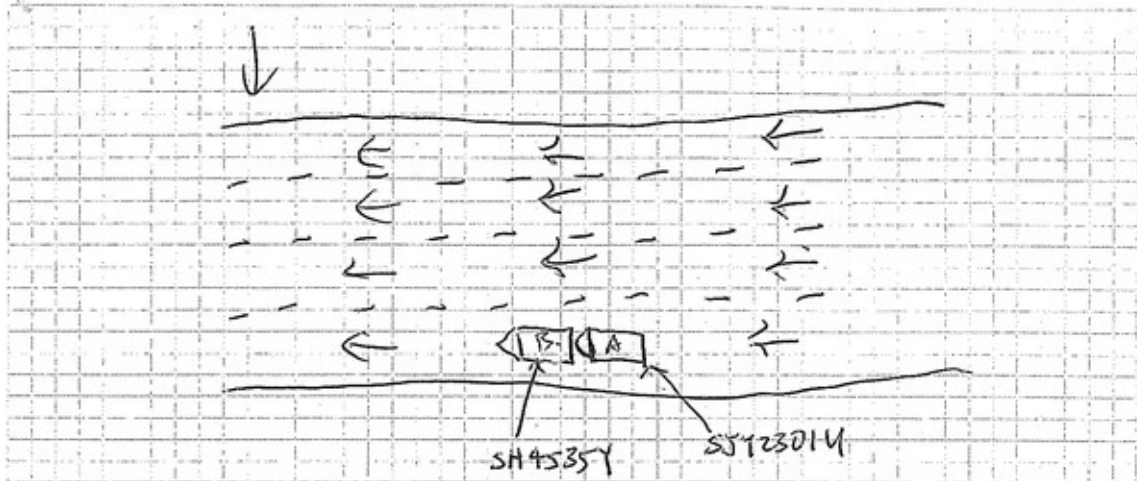
Vehicle Registration Number	SHA4535Y
Vehicle Make/Model/Colour	TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHUA KIAN TIONG
NRIC/Passport Number	S1378106J

Contact Number	97705274
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

CTE Towards AMK (near Braddell)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along CTE towards Ang Mo Kio (near Braddell) at around 3.10pm when it was raining. The road was crowded and traffic was slow. The taxi which was in front of me suddenly stopped and I also stepped on my brake. However, ~~the~~ ^{both} our vehicles touched. It was a slight touch and there ~~was~~ ^{was not} no physical damage seen. No one was injured. The other driver and I exchange particulars and contact number and we proceeded. The driver contacted me to say that he would have to file a report with his company since there was a passenger on his vehicle.

[Signature]

DECLARATION

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

[Signature]

Policyholder's Signature

Date & Time: 10/5/2018
@ 1322pm

[Signature]

Driver's Signature

(If driver is not the policyholder)

Date & Time: 16/5/18 13.22pm

[Signature] 16/5/18.

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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: 16/5/2018
@ 1324pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 13.22pm
16/5/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

5305027

4075250


 NRIC No: S7303202D

 Date of issue
 14-05-2014
 APT BLK 217C SUMANG WALK #11-224
 SINGAPORE 823217
 NRIC No: S7303202D Date: 07/06/2016


 NRIC No: S7719946B

 Date of issue
 20-07-2007
 APT BLK 217C SUMANG WALK #11-224
 SINGAPORE 823217
 NRIC No: S7719946B Date: 07/06/2016

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

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg
 EFFECTIVE DATE 04 Nov 2003

NP 428A



REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S7303202D



Name
 CHONG CHIN HOE, RICKY
 (ZHANG JUNHAO, RICKY)

张俊豪

Race
 CHINESE

Date of birth
 25-01-1973

Country/Place of birth
 SINGAPORE

Sex
 M

S7303202D

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S7719946B



Name

LIM SIEW CHIN
 (LIN XIUJING)

林秀晶

Race
 CHINESE

Date of birth
 19-07-1977

Country of birth
 SINGAPORE

Sex
 F

S7719946B

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
 S7719946B

Name
 LIM SIEW CHIN
 (LIN XIUJING)

Birth Date: 19 Jul 1977
 Issue Date: 09 Mar 2018





CERTIFICATE OF INSURANCE

PRIVATE AUTO (THIRD PARTY ONLY) - PRIVATE VEHICLE

Name of Policyholder : Chong Chee Hui Beryl
Period of Insurance : 19 Sep 2017 To 24 Sep 2018
Engine No : G4A10016616
Chassis No : MBT3DHT W000002220

Vehicle No : NJ170010
Policy No : 240025219400
Endorsement No :
Issue Date : 20 Aug 2017

VEHICLE MAKE (COVER)

Make/Model : SUZUKI APV
Engine Capacity/Tonnage : 1,590.00 CC
Driver Restriction : NA
Sum Insured : NA
Oil Peel: Car : No
First Year of Registration : 2009
Insuring with COE/PARF : NA

Person or Classes of Persons Entitled to Drive*

1. The Policyholder
2. Any person named as driver in the Policyholder's name or driver's licence
The Policyholder is not responsible for any damage caused by any person driving the vehicle without his/her consent.

Age Condition : 35 years old and above

Limitation as to use*

Excludes motor vehicle used for hire or reward, public transport, racing, or any other use not intended for private use. The Policyholder is not responsible for any damage caused by any person driving the vehicle without his/her consent.

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EXCESS

Section 1

Section 2

Private Excess : \$0

Windscreen : \$15

Named Driver and Excess : None specified

VEHICLE REPORTING CENTRE (VRC) FOR KUALA LUMPUR POLICE

For Vehicle Reporting Centre (VRC) for Kuala Lumpur Police, please refer to the VRC for Kuala Lumpur Police at the following address: 100, Jalan Sultan Ismail, Kuala Lumpur, Malaysia.

IMPORTANCE INFORMATION

Hire Purchase Company/Employer's Loan: Standard Chartered Bank

This Certificate is valid only for the vehicle described above. It does not cover any other vehicle. The Policyholder is not responsible for any damage caused by any person driving the vehicle without his/her consent.

Copy No:

2. Certificate of Insurance

Policyholder: Chong Chee Hui Beryl

Policy No: 240025219400

Issue Date: 20 Aug 2017

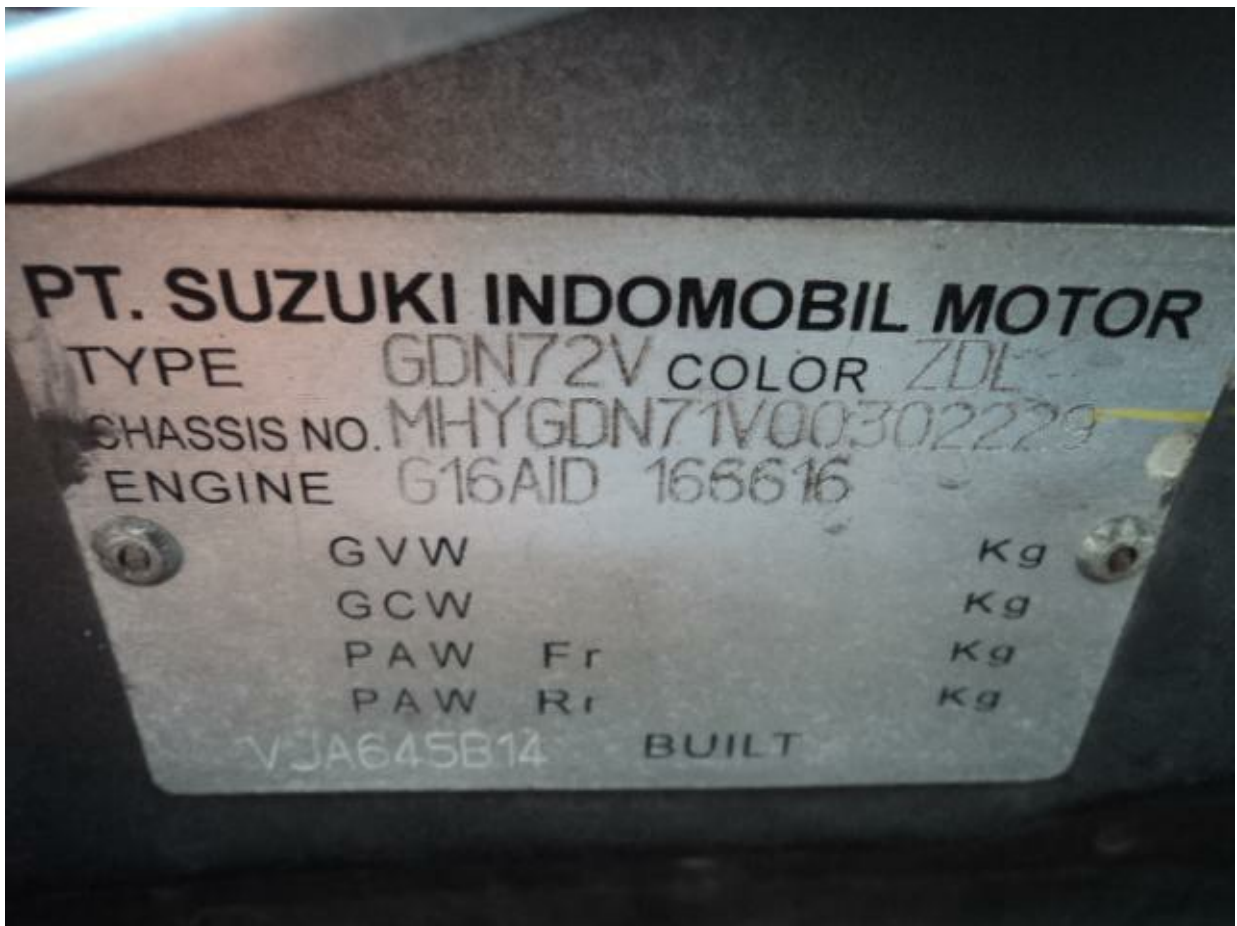
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Mobile

AIG Asia Pacific Insurance Pte. Ltd.
Incorporated in Singapore

This Certificate is valid only for the vehicle described above. It does not cover any other vehicle. The Policyholder is not responsible for any damage caused by any person driving the vehicle without his/her consent.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

