

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	25/05/2018 14:02
Date Of Accident	24/05/2018 19:35
Exact Location Of Accident	LANE 4 PIE TWDS TUASBEFORE ADAM ROAD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL763B
Insured/Policyholder	
Name Of Registered Owner	LIM HWEI MIEN
NRIC No	S7527085B
Email Address	JESSYE_HM@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90106308
Alternative Phone No	Office-90106308

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-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?	YES
If No, Please state action to be taken	
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	2100499749
Cover Note Number	

Driver

Name of Driver	LIM HWEI MIEN
NRIC No	S7527085B
Date Of Birth	08/09/1975
Occupation	INDOOR
Date Of Driving Pass	02/11/2000
Driving Experience	17 YEARS AND 6 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-90106308
Fax Number	
Contact Number	OFFICE-90106308
E-Mail Address	JESSYE_HM@YAHOO.COM.SG
Address	BLK 34 FLORA DRIVE #03-31
Postcode	506893
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	YES
Number of Passengers (Including Driver)	3
Passenger 1	Name: : HO KOK WENYING Gender: : Female
Passenger 2	Name: : DAPHNE WEE 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?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE4022A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE

Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SFR8879M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

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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.
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' law yers/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' 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

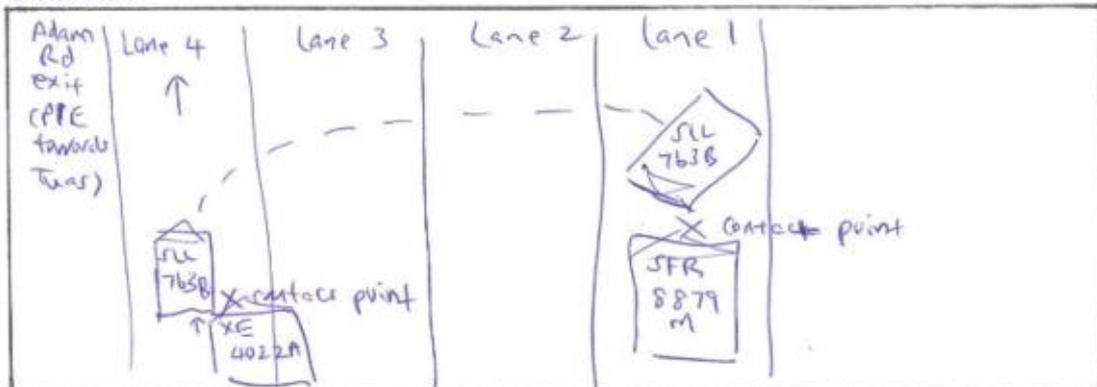
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


 Policyholder's Signature / Date & Time

 Driver's Signature (If driver is not the policyholder) / Date & Time


 Witnessed by Reporting Centre Personnel

Sketch Plan



Common Statement

Describe Circumstances of the Accident

SLL 763 B was heading towards Adam Road exit on Lane 4, NE towards Tuar on 24/5/18. At about 7:36pm, SLL 763 B felt sudden jolt at the back ~~of it~~ (right side). Driver of SLL 763 B ~~was~~ was unable to control the steering wheel due to impact, and SLL 763 B swerved towards the right, across lanes 3 and 2, before colliding head-on with SFR 8P79M.

SLL 763 B subsequently discovered that the collision of the back of the car was caused by truck XE4022A, which had already pulled over at the road shoulder after the accident.

Declaration

We declare the foregoing particulars are true in every respect.

 25/5/18
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : LIM HWEI MIEN

VEHICLE NUMBER : SLL 763 B

DATE/TIME OF ACCIDENT ^{Defin} : 24/5/2018 7:36 pm

PLACE OF ACCIDENT : lane 4, PIE towards Tuas, before Adam Rd exit.

THIRD PARTY VEHICLE (IF ANY) : SFR 8879 M and XE 4022 A

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

left Irrawaddy Road (Niners) and heading to Dempsey Road.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

NO.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

XE4022A Trucks collided into ~~right~~ back of my car (right side), causing my car to swerve across 2 lanes and collided head-on with SFR 8879 M at lane 1.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No visible injury.

Defin
LIM HWEI MIEN
Name: LIM HWEI MIEN

I Affirmed The Above Information Is Given To My Best Knowledge.

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building 78 Shenton Way #07-16 Singapore 079120
Tel: 6419 3000



HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

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

<p>TOYOTA AUTO PROTECTOR (2-YEAR) CERTIFICATE NO. 2100499749-00000</p>	<p style="font-size: small;">(The below excess is subject to GST)</p> <p>OWN DAMAGE EXCESS S\$600.00 (1) WINDSCREEN EXCESS S\$100.00 <small>(Windscreen excess is waived if the repair is done at Borneo Motors Workshop.)</small></p> <p style="text-align: right;">SUM INSURED Market Value</p> <p>INSURING WITH COE/PARF Yes</p>
<p>1) VEHICLE REGISTRATION NO.</p>	<p>SLL763B</p>
<p>2) NAME OF INSURED</p>	<p>Lim Hwei Mien</p>
<p>3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT</p>	<p>14 Feb 2017</p>
<p>4) DATE OF EXPIRY OF INSURANCE</p>	<p>13 Feb 2019</p>
<p>5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*</p> <p style="font-size: small;">SUBJECT TO AGE CONDITION : All Age Condition</p> <p style="font-size: x-small;">a) The Insured. 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 meets the age conditions. A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition 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.</p>	
<p style="font-size: x-small;">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.</p>	
<p>6) LIMITATION AS TO USE*</p> <p style="font-size: x-small;">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, pacemaking, 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.</p>	
<p>APPROVED REPORTING CENTRES / TOYOTA AUTHORISED REPAIRERS 1. Borneo Motors (S) Pte Ltd - 2 Pandan Crescent (Tel: 6631 1188) APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS) 2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501) 4. Ethoz - 30 Bukit Batok Cres(Tel:66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110) 8. Movva Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336) 10. SME Motor - 1 Kaki Bukit Ave 6 Bk D (Tel: 67476106)</p>	
<p>LOSS OF USE Loss of Use 15 Days (1500 - 1600cc) - Refer to policy wordings for details</p>	
<p>* NAMED DRIVER NA</p>	
<p>HIRE PURCHASE COMPANY /EMPLOYER'S LOAN HONG LEONG FINANCE LTD</p>	
<p>*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.</p>	

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 (Malaysia).

Issued in Singapore 15 Feb 2017

AIG Asia Pacific Insurance Pte. Ltd.

030210-080
INCHCAPE AUTO TOYOTA-LK1AE
33 LENG KEE ROAD
SINGAPORE 159102



AUTHORISED REPRESENTATIVE

ORIGINAL

IASMOK.

Nric And Driving Licnece

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7527085B



Name
LIM HWEI MIEN
林慧敏

Race
CHINESE

Date of birth
08-09-1975

Sex
F

Country of birth
SINGAPORE

S7527085B

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7527085B

Name
LIM HWEI MIEN

Issue Date: 08 Sep 1975
Issue Date: 13 Sep 2003



9750520



NRIC No. S7527085B



Date of issue
13-09-2005

APT BLK 34 FLORA DRIVE #03-31
SINGAPORE 506893

NRIC No. S7527085B Date: 27/05/2016 (R)

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

PASS DATE
02 Nov 2000

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

NP 438A

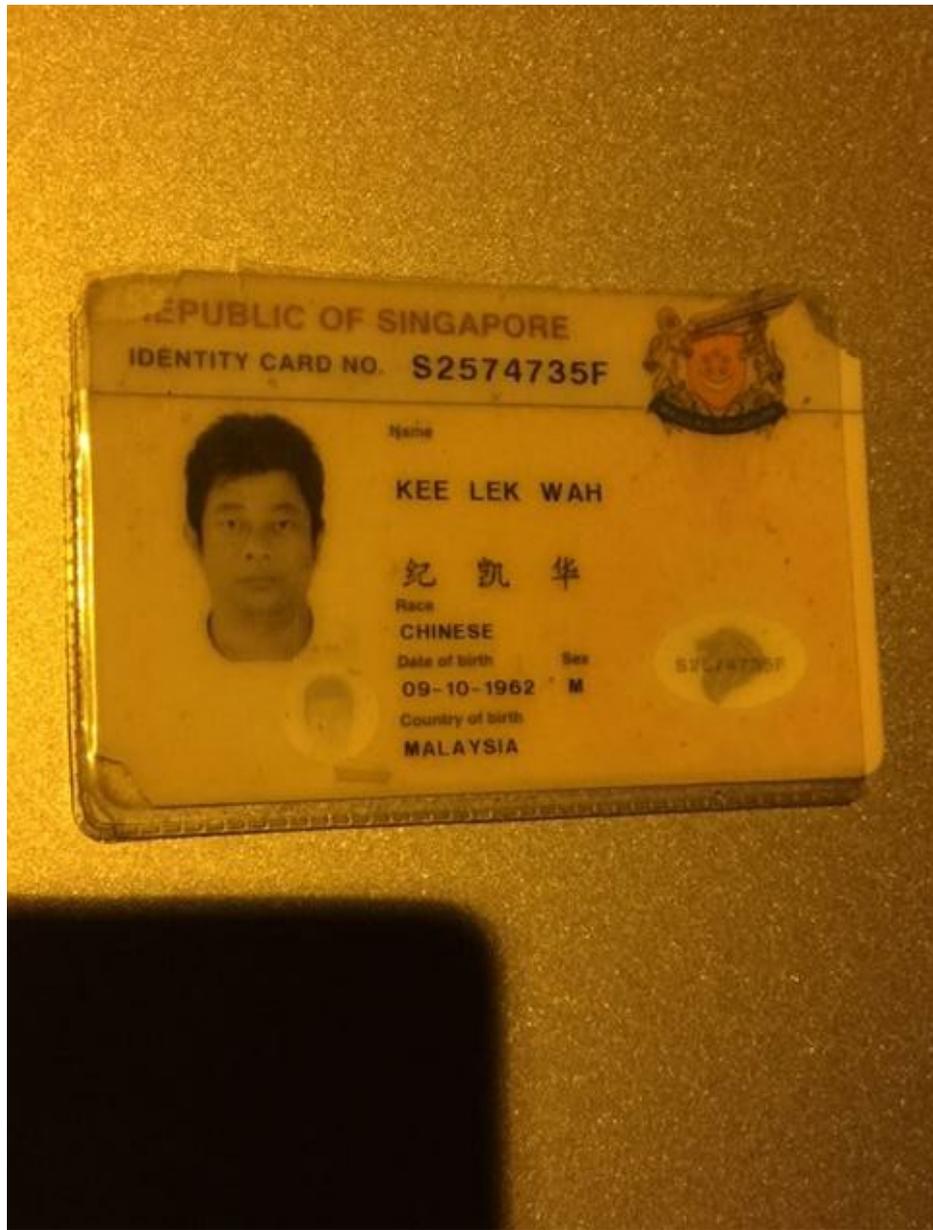


Licence No. S7527085B

Third Party Driver Nric



Third Party Driver Nric



Third Party Driver Driving Licence



Third Party Driver Driving Licence



Third Party Driver WorkPermit



Third Party Driver WorkPermit

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
KOK YONG CONSTRUCTION PTE LTD

Sector **SERVICE**

Name
HOO KIAN LAI

Occupation
LORRY/ TRUCK DRIVER

Work Permit No.
S 23860756

Date of Application
04-11-2014

Date of Issue
29-05-2015

Date of Expiry
30-06-2018



L6952227

Accident Photo



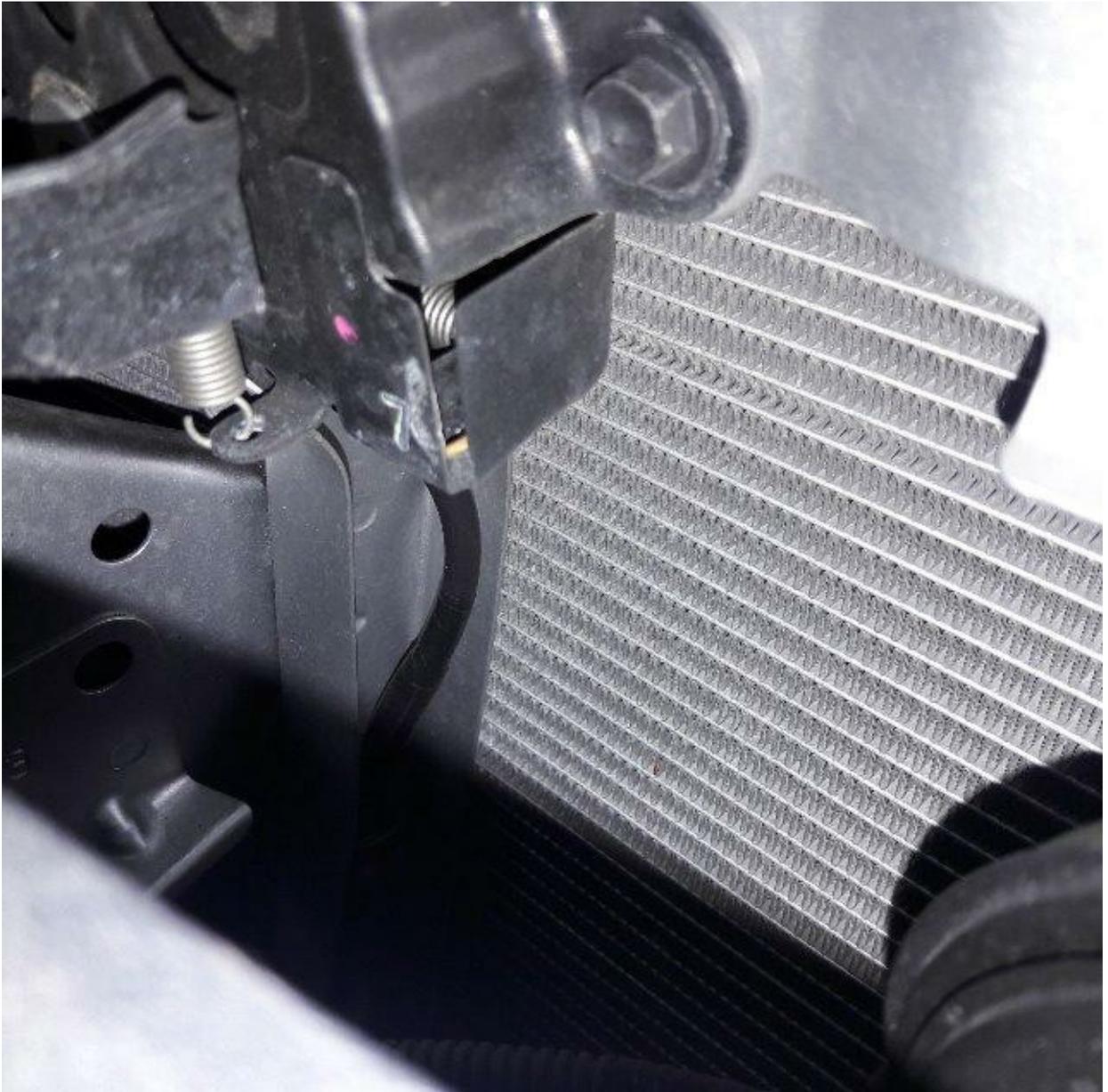
Accident Photo



Accident Photo



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