

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	04/06/2018 14:31
Date Of Accident	02/06/2018 17:20
Exact Location Of Accident	ALONG BEACH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS79E
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Insured/Policyholder

Name Of Registered Owner	LIM SIEW HONG
NRIC No	S1764791A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98193630
Alternative Phone No	Office-98193630

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	B180

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
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If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100468750-01000
Cover Note Number	

Driver

Name of Driver	LIM SIEW HONG
NRIC No	S1764791A
Date Of Birth	05/07/1966
Occupation	INDOOR
Date Of Driving Pass	27/03/2008
Driving Experience	10 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-98193630
Fax Number	
Contact Number	OFFICE-98193630
EMail Address	NOEMAIL
Address	2 KIM CHUAN DRIVE #08-08
Postcode	537080
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	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?	NO
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)	3
Passenger 1	Name: : TAN CHECK LENG Gender: : Male
Passenger 2	Name: : TAN YI XUAN 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 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	SHA8152S
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)

Sketch Plan

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.



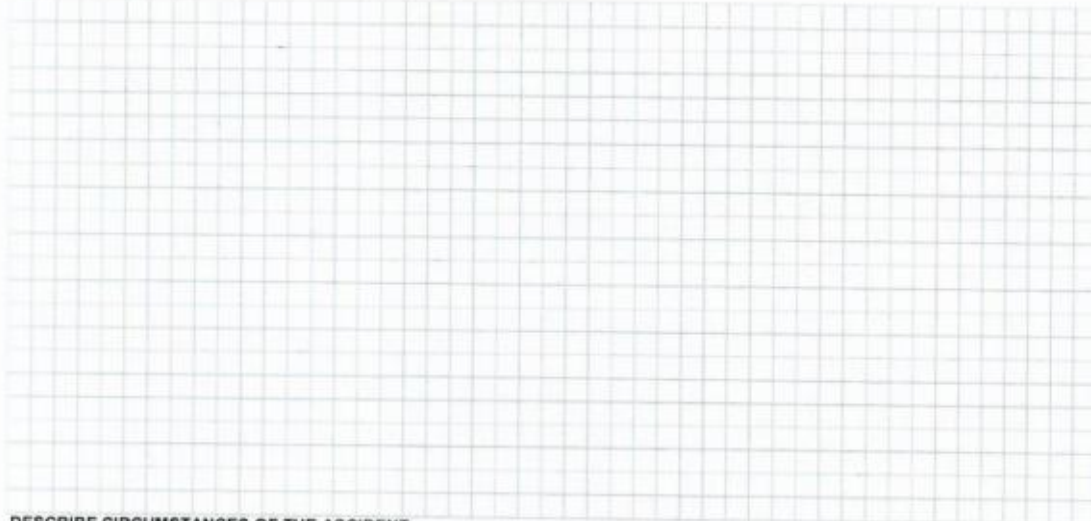
Policyholder's Signature
Date & Time 04/06/2018 1306

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

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Reporting Centre Personnel's
Name: KERLYN
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING MY CAR (SJS79E) ALONG BEACH ROAD. I WAS TRAVELLING AT THE EXTREME RIGHT LANE AND INTEND TO FILTER TOWARD THE CENTER LANE. AS I SIGNALLED AND CHECKED, THERE WASNT ANY ONCOMING VEHICLE, I PROCEED TO FILTER TO THE CENTER LANE.

AS I WAS ALMOST IN THE LANE, VEHICLE B (SHA8152S) CAME FROM THE EXTREME LEFT LANE SUDDENLY CUT INTO MY LANE AND BRUSHED AGAINST MY LEFT PORTION.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)



Policyholder's Signature
Date & Time 04/06/2018 1306

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

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Reporting Centre Personnel
Customer Service Centre - Pandan
Name: KERLYN
NRIC/FIN No.:

Date: 2/6/18

Time: NO. 5.18 pm

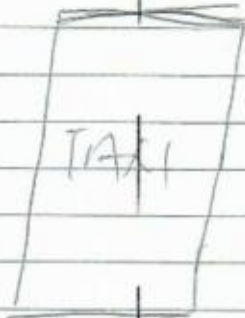
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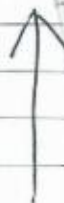
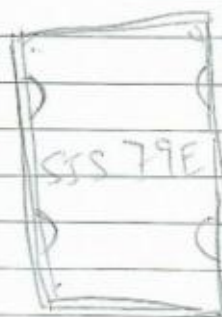
TAXI 1

Damage

Damage



79E



SIS 79E



AIGHOTLINE 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

MERCEDES-BENZ MOTOR INSURANCE

CERTIFICATE NO. 2100468750-01000

OWN DAMAGE EXCESS S\$800.00 (1)

WINDSCREEN EXCESS S\$100.00

(for policies with effect from 1st November 2002)

SUM INSURED Market Value
INSURING WITH COE/PAF Yes

1) VEHICLE REGISTRATION NO.

SJS79E

2) NAME OF INSURED

Lam Siew Hong

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

8 Jun 2017

4) DATE OF EXPIRY OF INSURANCE

7 Jun 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

SUBJECT TO AGE CONDITION: All Age Condition

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.

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 test, racing, pace-making, 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.

APPROVED REPORTING CENTRES / MERCEDES-BENZ AUTHORISED REPAIRERS

1. Cycle & Carriage Pandan Loop Service Center - 188 Pandan Loop (Tel: 6777-8388)

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

2. ComfortDelgro Engng - 205 Braddell Rd (Tel: 63837118) 3. Ethos - 30 Bukit Batok Crest (Tel: 66547777)

4. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 5. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560)

6. Lai Hual (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110) 7. Moyn Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892)

8. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336) 9. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)

LOSS OF USE 15 Days Replacement Car only for repairs at C & C - Refer to policy wordings for details

NAMED DRIVER NA

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

* 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.

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 At Singapore 12 May 2017

AIG Asia Pacific Insurance Pte. Ltd.

504580-230
CYCLE & CARRIAGE - JASTAN
230 ALEXANDRIA ROAD
SINGAPORE 159930

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPSHA

Co. Reg. No. 20100468750

20160110/13

Accident Sketch Plan

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1764791A**

Name: **LIM SIEW HONG**

Birth Date: **05 Jul 1966**
Valid Date: **27 Mar 2008**

001585357J

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1764791A**



Name: **LIM SIEW HONG**

Race: **林秀凤**

CHINESE

Date of Birth: **05-07-1966**

Country of Birth: **SINGAPORE**

Sex: **F**

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

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg
with =< 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals =< 2500kg

PASS DATE
27 Mar 2008

FOR C&C USE ONLY



NP 428A



1028919

NRIC No. **S1764791A**



Word Group: **A+** Date of issue: **15-06-1993**

Address:

**APT BLK 114 LENGKONG TIGA #13-177
SINGAPORE 410114**

NRIC No: **S1764791A** Date: **05-12-2008** No: **2710870**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

