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 <u>truthful and accurate</u> 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 Accident 28/05/2018 13:15	Date Of Report	28/05/2018 16:24
	Date Of Accident	28/05/2018 13:15
Exact Location Of Accident CITY SQUARE MALL	Exact Location Of Accident	CITY SQUARE MALL
Country/State of Loss SINGAPORE	Country/State of Loss	SINGAPORE

DETAILS OF O	T. T. T. W. W. I M. I
\$	كسو الإنجاز المتاسية المتال الإنجاز الماليات

Vehicle Registration Number SCY9003R

Insured/Policyholder

Name Of Registered Owner TAN GIM CHENG

Co Reg No S0404190I

Email Address TANTIONGBIN@SINGNET.COM.SG

Mobile Phone No

Alternative Phone No OFFICE-81280055

Vehicle Particulars

Manufacturer TOYOTA

Model CAMRY-2.0 (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

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 2100097928

Cover Note Number

Driver

Name of Driver TAN TIONG BIN
NRIC No S0128842C
Date Of Birth 14/04/1952
Occupation INDOOR

Date Of Driving Pass 19/11/1969

Driving Experience 48 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81280055

Fax Number

Contact Number

EMail Address TANTIONGBIN@SINGNET.COM.SG

Address 12, WOODSVILLE CLOSE #09-02 WOODSVILLE MANSION

Postcode 357768

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SIBLING

Vehicle Registration Number of Driver's Own

Vehicle -

Insurance Company of Driver's Own Vehicle

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NO

General Information of the Accident

Type Of Accident COLLISION - HEAD ON 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver) 4

rumber of Passengers (including briver)

Passenger 1 NAME: : TEO SIONG LIAN

GENDER: : FEMALE

Passenger 2 NAME: : KINGSLEY TAN

GENDER: : MALE

Passenger 3 NAME: : KELLY TAN

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT, TP REVERSING AND HIT MY VEHICLE

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 SKV4618X
Vehicle Make/Model/Colour TOYOTA WISH

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver PUSPANATHAN CHETTIAR S/O ARUMUGAM CHETTIAR

NRIC/Passport Number S7729824Z

Contact Number

Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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- 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.
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- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I un derstand, 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:
 - 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.

P olicyholder's Signature D eta & Time: Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SKETCH PLAN		
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DESCRIBE CIRCUMSTANCES C	F THE ACCIDENT	
I driving My	Vehicle No SCY 9003	R turning right to
basement Co	arpark B3, Before -	turning right, I Stopped 5KV 4618× is quickly front left side bumper
my Vehicle	because Vehicle 3	5KV4618× is quickly
veversine pack	eward and Couse My	front left side bumper
stractches.	· ·	
<u></u>		

DECLARATION		
I/We declare the foregoing particul	ars are true in every respect.	Λ
	是中区	W,
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:

Date & Time:

Page 5 of 30

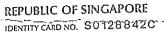
NRIC/FIN No.:

I TAN GIM CHENG 1/c SO404190I Authorised

TAN TIONG BIN 50128842C to file Accident

Report on 28/05/2018.

张原注



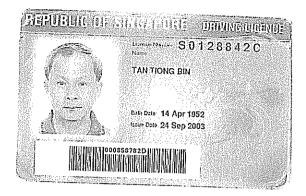




TAN TIONG BIN

陳中民 Paca CHINESE

Onto of Bath Sex 14-04-1952 M Country of Eith SINGAPORE







KERTERLETE OF HUSTERS IE

Maria Maria

Hame of Policyholder : Tan Gim Cheng Period of insurance

: 29 Sep 2017 To 28 Sep 2018 : 1AZE118185

: MR053BK4107036386

Vehicle No. Policy No.

: SCY9003R : 2100097928-09

Endorsement No.

Issued Date

: 04 Sep 2017

AGOUT THE COVER

Make/Model Driver Restriction

.

Engine No.

Chassis No.

: TOYOTA CAMRY 2.0

Engine Capacity/Tonnage : 1,998.00 CC : NA

Off Peak Car : No

Sum Insured : Market Value

First Year of Registration : 2008 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive":

a) The Policyholder
b) Any office person who is driving on the Policyholder's enfer or with higher pernyssion
This Policy will informally the Policyholder or any editionished driver only if herebe meets the specified age condition

You have to play an outditional count of \$0,000 as "roung and/or inseparated Ower Eucess" ("YIDR") if You are or Your Authorised Ower (named or innamed) is under the age of 23 perior to a 125 feat 2 perior diving or parameter.

Age Condition

: All Age Condition

Limitation as to use: :

Use only for social, demastic and pleasure proposes and far in: Politynoided's observer. This Polity does not cover use for hire or revers, driving british using seat roung, post-moting, reliability trist or speed-teating. The comagn of goods other than samples in connection with any trade or business or use for any purpose in connection with fallor. Tinds

Loss of Use 1600cc - 1600cc Optional

* Landations rendered increasive by Section S of the filator Vehicles (Time-Party Ricks and Comparatition) Act (Cap. 103) and Section 95 of the Road Triangular Act, 1987 (Malaysia), are not to be included under these headings.

ENERGY.

Section 1
Fire - S0 Ovm Damage - \$1100 Thell - \$0 Flood Cover - \$0

Section 2 Property Damage • 50

Windspream: \$100

Named Driver and Excess (where expelicable)

Tan Gim Chang - 31100 (Own Damaga)

ARPRIONED BEFOR THE CENTRESION THORISE FERMENS (FOR CLAIMS RELATED REPAIRS).

Approved Reporting Control AIG Authorized Repaired (For claims related repaired
Any accident reports to the Vehicle must be dismale oil by one of our Anthonized Repaired. Within the first 3 years of the first registration of the Vehicle in Suigapore Tou have the option of having me
assistant reprovementated at the Sale Agent a contactor.

For other Approved Repairing CentraryMore Approved in Plance Contactor 24-hour accident emergency healing at 465 6330 6200 Attenuatively. You may refer to AIG scalable storying coming
or AIG SG Mobile App Simply search and download. AIG SG from Hurse or Guagle Play.

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Hire Purchase Company/Employer's Loan: INA

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THE WELL PACIFIC HISTORIANCE PL

7.9 SHELITON MAY 407-16 MG BUILDING

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Underwiken by RIG Asia Pacific Insurance Pie Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED PEPPESENTATIVE