

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	31/05/2018 18:51
Date Of Accident	31/05/2018 11:00
Exact Location Of Accident	HUME AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ6248H
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Insured/Policyholder

Name Of Registered Owner	LOW LEE PEOW
NRIC No	S0233826B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96312642
Alternative Phone No	Home-96312642

Vehicle Particulars

Manufacturer	CHEVROLET
Model	CRUZE 1.6L AUTO ABS D/AB 2WD 4DR
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100459791
Cover Note Number	

Driver

Name of Driver	LOW LEE PEOW
NRIC No	S0233826B
Date Of Birth	31/05/1952
Occupation	INDOOR
Date Of Driving Pass	04/11/1974
Driving Experience	43 YEARS AND 6 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96312642
Fax Number	
Contact Number	HOME-96312642
E-Mail Address	NOEMAIL
Address	55 HUME AVE #06-10 SINGAPORE
Postcode	
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	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	1

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 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	SKS2065U
Vehicle Make/Model/Colour	AUDI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address

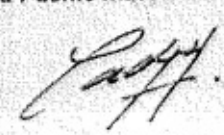
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

<div style="float: left;">AIG</div> <div style="float: right;"> <small>NOTES: TEL: 654 444 1000 FAX: 654 444 1000</small> </div>	
<h2>CERTIFICATE OF INSURANCE</h2> <p><small>MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1987 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1988 (MALAYSIA)</small></p>	
AUTOPOLIS CERTIFICATE NO. 2100458791-01000	<small>(This section is subject to 10/10/2017)</small> OWN DAMAGE EXCESS S\$600.00 (1) WINDSCREEN EXCESS S\$100.00 <small>(The excess will offset from 1st November 2020)</small>
SUM INSURED Market Value INSURING WITH COE/PAFF Yes	
1) VEHICLE REGISTRATION NO.	SJZ6248H
2) NAME OF INSURED	Low Lee Peow
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	14 Jun 2017
4) DATE OF EXPIRY OF INSURANCE	13 Jun 2018
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE* <small>SUBJECT TO AGE CONDITION: All Age Condition</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 ("YEDR") 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 25 and/or has less than 2 years' driving experience.	
<p>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>	
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 reward, tuition, driving test, racing, podium 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.	
<p>SOLD AGENT'S WORKSHOP: For new vehicles less than 5 years from initial registration, you have the option for claims-related repairs to be done at Sold Agent's workshop.</p> <p>APPROVED REPORTING CENTRES / AND AUTHORISED WORKSHOPS (FOR CLAIMS-RELATED REPAIRS)</p> <p>1. ComfortDelgro Engin - 205 Brasbas Rd (Tel: 65437118) 2. Glava-Pol - 52 Ulu Aze 2 (Tel: 62780617) - For windscreen only 3. Ethos - 30 Bukit Batok Cres (Tel: 64547777) 4. DYS Body & Paint (Subsidiary of C&C) - 200 Pandan Gardens (Tel: 65684501) 5. Kan Pak Sing Motor - 61 Delta Lane 12 (Tel: 67479066) 6. Lai Hoon (Ming Kee) Motor - 31 Sin Ming Ind (Tel: 64538110) 7. Move Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723962) 8. Progression Automotive - 3022A Ulu Rd 1 (Tel: 67415326) 9. SMI Motor - 1 Kaki Bukit Ave 6 Bld D (Tel: 67476106)</p>	
<p>LOSS OF USE - Loss of Use 10 Days (1600cc) - Refer to policy wordings for details.</p>	
<p>* NAMED DRIVER NA</p>	
<p>HIRE PURCHASE COMPANY TAI THONG LEE TRADING PTE LTD EMPLOYER'S LOAN</p> <p><small>*Conditions 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.</small></p>	
<p>I, Low Lee Peow 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).</p>	
Issued in Singapore 16 May 2017 S90659-000 INSURANCE AGENCY PTE NO 1 KAKI BUKIT ROAD 3 #02-07 ENTERPRISE ONE SINGAPORE 410634	AIG Asia Pacific Insurance Pte. Ltd.  AIG ASIA PACIFIC INSURANCE PTE. LTD.

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : LOW LEE PEOW
VEHICLE NUMBER : SJZ 6248 H
DATE/TIME OF ACCIDENT : 31/05/2018 11am
PLACE OF ACCIDENT : Hume Avenue
THIRD PARTY VEHICLE (IF ANY) : 3KS 2065 U

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

FROM Home ~~to~~ ^{WGS} ~~TURNING~~ TO Meet my Brother town

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?

COLLISION on 4 cross junction
Damage to my LH Front side Bumper.

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

No


Name:

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

3500267



NRIC No. S0233826B



Date of Issue
12-03-2004

Address
55 HUME AVENUE
#06-10
SINGAPORE 598752

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

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

PASS DATE

04 Nov 1974

NP 428A



Licence No: S0233826B

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0233826B



Name

LOW LEE PEOW

Race

CHINESE

Date of birth

31-05-1952

Sex

F

Country of birth

SINGAPORE

S0233826B



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S0233826B

Name:

LOW LEE PEOW

Birth Date: 31 May 1952

Issue Date: 12 Mar 2004



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SKETCH PLAN

IMPORTANT NOTICE

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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: 31/05/2018
7.15 PM

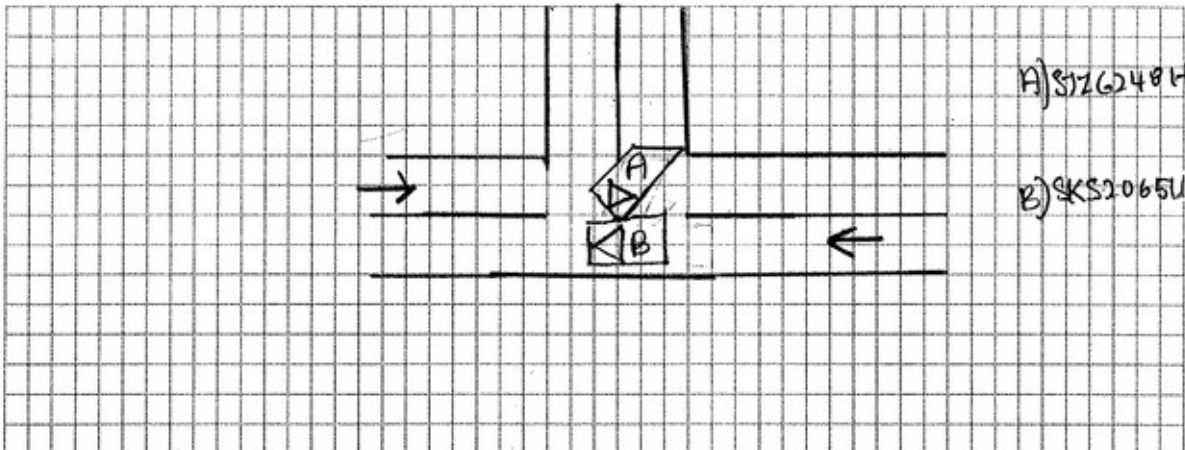
Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:
NRIC/FIN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was at the cross junction awaiting for clearance to make a right turn into the opposite. Checked cleared and move Across when suddenly a vehicle bearing reg. plate number SKS2065U came dashing from the opposite left and hit onto My front LH side bumper.
 We moved along forward (safe side road) and inspect the damage.
 My vehicle suffer only a minor dent to the LH Front side bumper and vehicle SKS2065U damage to the Rear door RH
 No injury to both of us (Driver)
 We exchange particular and left the scene.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.



- Reporting Only
- Claim OD
- Claim TP
- Claim OD/ TP at other workshop

DECLARATION

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

Policyholder's signature

Date & Time 31/05/2018

7.15 PM

Driver's Signature

(if driver not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name:

Nric/Fin No.

> Back to OneMotoring

Enquire Transfer Fee

Vehicle Details

Vehicle No.: SJZ6248H
 Vehicle Type: P10 - Passenger Motor Car
 Vehicle Attachment 1: No Attachment
 Vehicle Scheme: Normal
 Vehicle Make: CHEVROLET
 Vehicle Model: CRUZE 1.6L AUTO ABS D/AB 2WD 4DR
 Chassis No.: KL1JA6961BK057817

Propellant: Petrol
 Engine No.: F16D37806781

Engine Capacity: 1598 cc
 Maximum Power Output: 80.0 kW (107 bhp)

Maximum Laden Weight: 1813 kg

Unladen Weight: 1388 kg

Year Of Manufacture: 2010

Original Registration Date: 14 Dec 2010

Lifespan Expiry Date: -

COE Category: A - Car (1600cc & below)

Quota Premium: \$32,415.00

COE Expiry Date: 13 Dec 2020

Road Tax Expiry Date: 13 Jun 2018

PARF Eligibility Expiry Date: 13 Dec 2020

Inspection Due Date: 13 Jun 2019

Intended Transfer Date: 01 Jun 2018

CO2 Emission: -

CO Emission: -

HC Emission: -

NOx Emission: -

PM Emission: -

The current road tax expiry is 13 Jun 2018. You may renew the road tax from 14 Mar 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 13 Jun 2018, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable (From 14 Jun 2018 to 13 Dec 2018)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	371.00	-	371.00
Total Amount Payable:			396.00
Amount Payable (From 14 Jun 2018 to 13 Jun 2019)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	742.00	-	742.00
Total Amount Payable:			767.00

You may print this page for reference.

OK

Print

Accident Photo



Accident Photo



REPORTING MILEAGE



Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo

