

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	05/06/2018 08:36
Date Of Accident	04/06/2018 08:35
Exact Location Of Accident	CLEMENCEAU AVENUE NORTH AFTER WINSTEDT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ6596R
Insured/Policyholder	
Name Of Registered Owner	SEAH MIN FANN
NRIC No	S1415058G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91179730
Alternative Phone No	Others-91179730

Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3-1.6 SX (A)
Exact Purpose for which vehicle was being used at time of accident	COMMUTE
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	2100450598-02
Cover Note Number	

Driver

Name of Driver	JOHN LEO CAINES
NRIC No	S9014093J
Date Of Birth	25/04/1990
Occupation	INDOOR
Date Of Driving Pass	18/06/2014
Driving Experience	3 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-91179730
Fax Number	
Contact Number	
E-Mail Address	JLCAINES@ICLOUDE.COM
Address	BLK. 1 LORONG LEW LIAN #05-14 SINGAPORE
Postcode	531001
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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 ATTACHMENT

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	SKU6530G
Vehicle Make/Model/Colour	
Details Of Properties	CLIFFORD CLASSIC SERVICES
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	90400600 / JACK HO 97474422

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:

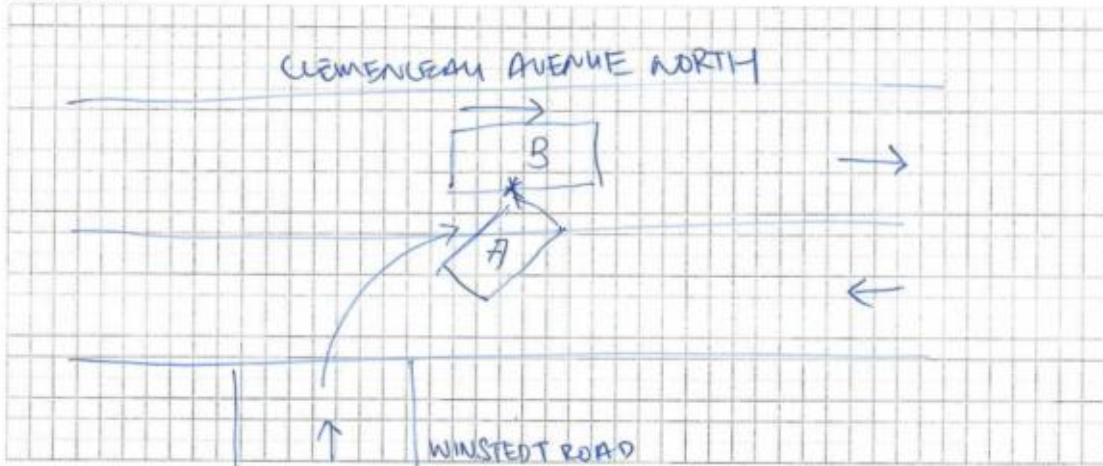
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

While turning right from Winstedt road onto Clemenceau avenue north, the left front of vehicle A made contact with vehicle B's right rear passenger door.

DECLARATION

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

Policyholder's Signature

Date & Time:

©ARMC SketchPlanForm V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

2 April 18 14:55

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Seah Min Fann
 Period of Insurance : 29 Jan 2018 To 29 Jan 2019
 Engine No. : G4FGFH600855
 Chassis No. : KNAFZ411MF5537893

Vehicle No. : SKZ6590R
 Policy No. : 2100450399-02
 Endorsement No. :
 Issued Date : 22 Jan 2018

ABOUT THE COVER

Make/Model : KIA FORTE K3 1.6 A SX
 Engine Capacity/Tonnage : 1,591.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2016
 Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

is The Policyholder
 is Any other person who is driving on the Policyholder's letter of authorisation/particulars.
 The Policy will insure only the Policyholder or any authorised driver only if he/she meets the specified age condition.
 The Policyholder must pay an additional sum of S\$100 for "Young and/or Inexperienced Driver Excess" (YIDR) if You are in Your Authorised Driver (insured or uninsured) is under the age of 25 and/or has less than 3 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, speed-racing, reliability trial or speed-testing. The carriage of goods which may be used in connection with any trade or business or use for any purpose in connection with Motor Trade.

Limit of Use: 1600cc - 1600cc

* Exemptions rendered irrespective by Section 2 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 185) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be construed as being included.

EXCESS

Section 1
 Fire & Theft: Car Damage - \$200; Theft - \$0; Road Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Seah Min Fann - \$500 (Car Damage)

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

- 1 Cycle & Carriage Body & Paint Centre, Add: 209 Parkland Gardens, Singapore 600559-43644001
 - 2 Cycle & Carriage Customer Service Centre (Fu - (Interchange - cash only), Add: 241 Alexandra Road Singapore 156001-69278800
 - 3 Cycle & Carriage Customer Service Centre (For windscreen claim only), Add: 3/11-11b Rd 3 Singapore 409950-67401000
- For other Approved Reporting Centres (ARCs) or Approved Repairers, please contact our 24-hour accident claim policy hotline at +65 6436 4200. Alternatively, you may refer to ARS website www.ars.com.sg or AIG 50 Motex Ave, Simply Repair and Insurance Ad 3.1/3.2 from iStore or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

Please hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 185), Part (V) of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1990 (Malaysia).

0600709209

CYCLE & CARRIAGE - MMILEK3A
 239 ALEXANDRA ROAD
 SINGAPORE 156000 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. J. J. J.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

059100

29, Singapore, 156000 AIG Building 20/24/26 Tel: 65 6436 4200 Fax: 65 6436 4201 www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

Identification Card



REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of John Leo Caines

Licence Number: **S9014093J**

Name: **JOHN LEO CAINES**

Birth Date: **25 Apr 1990**

Issue Date: **18 Jun 2014**

Barcode: 002315894G

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9014093J**

Portrait photo of John Leo Caines

Name: **JOHN LEO CAINES**

Race: **ENGLISH**

Date of birth: **25-04-1990** Sex: **M**

Country of birth: **SINGAPORE**

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

EFFECTIVE DATE: **18 Jun 2014**

Class 1A Motor cars without clutch pedals (Auto) <= 3000kg with not 7 passengers, exclusive of the driver, and other motor vehicles without clutch pedals <= 2500kg

NP 425A

Barcode: Licence No: S9014093J

FOR C&C USE ONLY

2707819

Barcode

NRIC No: **S9014093J**

Portrait photo of John Leo Caines

Date of issue: **28-04-2005**

APT BLK 1 LORONG LEW LIAN #05-14 SINGAPORE 531001

NRIC No: **S9014093J** Class: **08-12-2008** No: **5594752**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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