## 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.

Date Of Report 08/06/2018 14:33 Date Of Accident 08/06/2018 14:33 Date Of Accident 08/06/2018 11:10 Exact Location Of Accident CTE TOWARDS CITY AT BRADELL EXIT Country/State of Loss SINGAPORE  DETAILS OF OWN VEHICLE  Vehicle Registration Number SLG9690U Insured/Policyholder  Name Of Registered Owner LION CITY RENTALS PTE LTD Co Reg No 201504621K Email Address NOEMAIL Mobile Phone No OFFICE-66944919  Vehicle Particulars  Manufacturer HONDA Model GRACE 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? 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. COMPREHENSIVE Fleet Policy YES Policy Number 999995152 Cover Note Number	aloresalu.		
Date Of Accident 08/06/2018 11:10  Exact Location Of Accident CTE TOWARDS CITY AT BRADELL EXIT Country/State of Loss SINGAPORE		ACCIDENT STATEMENT	
Exact Location Of Accident Country/State of Loss SINGAPORE  DETAILS OF OWN VEHICLE  Vehicle Registration Number SLG9690U  Insured/Policyholder  Name Of Registered Owner Co Reg No Email Address NOEMAIL  Mobile Phone No Alternative Phone No OFFICE-66944919  Vehicle Particulars  Manufacturer HONDA GRACE 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?  If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company Type Of Coverage COMPREHENSIVE Fleet Policy Policy Number Core Town Vehicle Number  CTE TOWARDS CITY AT BRADELL EXIT SINGAPORE SINGAP	Date Of Report	08/06/2018 14:33	
Country/State of Loss  DETAILS OF OWN VEHICLE  Vehicle Registration Number  Insured/Policyholder  Name Of Registered Owner  Co Reg No  201504621K  Email Address  NOEMAIL  Mobile Phone No  Alternative Phone No  OFFICE-66944919  Vehicle Particulars  Manufacturer  Model  Exact Purpose for which vehicle was being used at time of accident  Are you claiming under your own insurance policy or pepair to your vehicle?  If No, Please state action to be taken  THIRD PARTY  Vehicle Category  PRIVATE CAR  Insurance Company  Name of Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE  Fleet Policy  Policy Number  SLG9690U  LION VEHICLE  LION CITY RENTALS PTE LTD  SLG9690U  AND  ADDED  ADDED  LION CITY RENTALS PTE LTD  LION CITY RENTALS PTE LTD  LION CITY RENTALS PTE LTD  ADDED	Date Of Accident	08/06/2018 11:10	
Vehicle Registration Number SLG9690U  Insured/Policyholder  Name Of Registered Owner LION CITY RENTALS PTE LTD  Co Reg No 201504621K Email Address NOEMAIL  Mobile Phone No OFFICE-66944919  Vehicle Particulars  Manufacturer HONDA Model GRACE  Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy or repair to your vehicle?  If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage COMPREHENSIVE Fleet Policy YES Policy Number  Cover Note Number	Exact Location Of Accident	CTE TOWARDS CITY AT BRADELL EXIT	
Vehicle Registration Number  Insured/Policyholder  Name Of Registered Owner  LION CITY RENTALS PTE LTD  Co Reg No  201504621K  Email Address  NOEMAIL  Mobile Phone No  Alternative Phone No  Vehicle Particulars  Manufacturer  Model  GRACE  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?  If No, Please state action to be taken  THIRD PARTY  Vehicle Category  Nome of Insurance Company  Name of Insurance Company  Name of Insurance Company  Name of Insurance Company  AlG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  COMPREHENSIVE  Fleet Policy  Pelicy Number  Suggested as Sugg	Country/State of Loss	SINGAPORE	
Insured/Policyholder  Name Of Registered Owner  Co Reg No  201504621K  Email Address  NOEMAIL  Mobile Phone No  Alternative Phone No  OFFICE-66944919  Vehicle Particulars  Manufacturer  Manufacturer  Model  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?  If No, Please state action to be taken  THIRD PARTY  Vehicle Category  PRIVATE CAR  Insurance Company  Name of Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  COMPREHENSIVE  Fleet Policy  Policy Number  Suppose Supp	DETAILS OF OWN VEHICLE		
Name Of Registered Owner  Co Reg No  201504621K  Email Address  NOEMAIL  Mobile Phone No  Alternative Phone No  OFFICE-66944919  Vehicle Particulars  Manufacturer  HONDA  Model  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?  If No, Please state action to be taken  THIRD PARTY  Vehicle Category  PRIVATE CAR  Insurance Company  Name of Insurance Company  Name of Insurance Company  AlG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  COMPREHENSIVE  Fleet Policy  Pelosy Synghesia  Cover Note Number	Vehicle Registration Number	SLG9690U	
Co Reg No 201504621K Email Address NOEMAIL  Mobile Phone No OFFICE-66944919  Vehicle Particulars  Manufacturer HONDA Model GRACE 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?  If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage COMPREHENSIVE  Fleet Policy YES  Policy Number  Cover Note Number	Insured/Policyholder		
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Mobile Phone No Alternative Phone No OFFICE-66944919  Vehicle Particulars  Manufacturer HONDA Model GRACE 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?  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 PS99995152  Cover Note Number	Co Reg No	201504621K	
Alternative Phone No  Vehicle Particulars  Manufacturer  Model  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?  If No, Please state action to be taken  Insurance Company  Name of Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  Fleet Policy  Policy Number  Separation  OFFICE-66944919  HONDA  GRACE  HIRER  NO  THIRD PARTY  PRIVATE CAR  Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE  Fleet Policy  PSI  999995152  Cover Note Number	Email Address	NOEMAIL	
Vehicle Particulars         Manufacturer       HONDA         Model       GRACE         Exact Purpose for which vehicle was being used at time of accident       HIRER         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       AIG ASIA PACIFIC INSURANCE PTE. LTD.         Type Of Coverage       COMPREHENSIVE         Fleet Policy       YES         Policy Number       999995152         Cover Note Number	Mobile Phone No		
Manufacturer HONDA  Model GRACE  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?  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 YES  Policy Number 999995152  Cover Note Number	Alternative Phone No	OFFICE-66944919	
Model GRACE  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?  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  Policy Number  Cover Note Number	Vehicle Particulars		
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time of accident  Are you claiming under your own insurance policy for repair to your vehicle?  If No, Please state action to be taken  Vehicle Category  Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  Fleet Policy  Policy Number  999995152  Cover Note Number	Model	GRACE	
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Vehicle Category Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. Type Of Coverage COMPREHENSIVE Fleet Policy YES Policy Number 999995152 Cover Note Number		NO	
Insurance Company  Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  COMPREHENSIVE  Fleet Policy  Policy Number  999995152  Cover Note Number	If No, Please state action to be taken	THIRD PARTY	
Name of Insurance Company  AIG ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE  Fleet Policy  Policy Number  Symptotic Symptot	Vehicle Category	PRIVATE CAR	
Type Of Coverage COMPREHENSIVE Fleet Policy YES Policy Number 999995152 Cover Note Number	Insurance Company		
Fleet Policy YES Policy Number 999995152 Cover Note Number	Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.	
Policy Number 999995152 Cover Note Number	Type Of Coverage	COMPREHENSIVE	
Cover Note Number	Fleet Policy	YES	
	Policy Number	999995152	
Driver	Cover Note Number		
	Driver		

 Name of Driver
 YAP SIEW LOON

 NRIC No
 \$7440369G

 Date Of Birth
 08/12/1974

 Occupation
 OUTDOOR

 Date Of Driving Pass
 07/07/2001

 Priving Experience
 16 VEARS AND 1

Driving Experience 16 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90106639

Fax Number

Contact Number

EMail Address NOEMAIL

Address 44 BENOI ROAD BLOCK B (ENTTRANCE B) ENTRANCE 6 BENOI

SECTOR

Postcode 629904

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

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**General Information of the Accident** 

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions LIGHT RAIN
Road Surface WET

**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

NO

2

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)

Passenger 1

NAME: : UNKNOWN

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?

If Yes, against whom?

NO NO

Circumstances of Accident

PLEASE REFER ATTACHED. THANK YOU.

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** 

SJQ8880R

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties VEH. B

Vehicle Category PRIVATE CAR

Name of Driver MARCUS NG KIM YEW

NRIC/Passport Number S8124230E Contact Number 98338880

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### Accident Sketch Plan Pg. 1

## SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
  - The 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.
  - 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 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 :
  - 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:
  - 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.:

# Accident Sketch Plan Pg. 2

SKETCH PLAN

(A) SLG9696U	
B) SJQ8880R.   TE towards eity ad braddl exist.	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  I was diving along CTE powards city at Bradell	
I was driving along CTE towards city at Bradell exit on a slow moing traffic.	
The car england of me stopped (braked), I als	0
braked. A few seconds later, suddenly I feel	
an empact from belind.	
10.2	
	-
DECLARATION  I/We declare the foregoing particulars are true in every respect.  Policyholder's Signature  Reporting Centre Personnel's Signature	<u></u>
Policyholder's Signature  Date & Time:  Date & Time:  Policyholder's Signature  Reporting Centre Person rel's Signature  Name:  NRIC/FIN No.:	

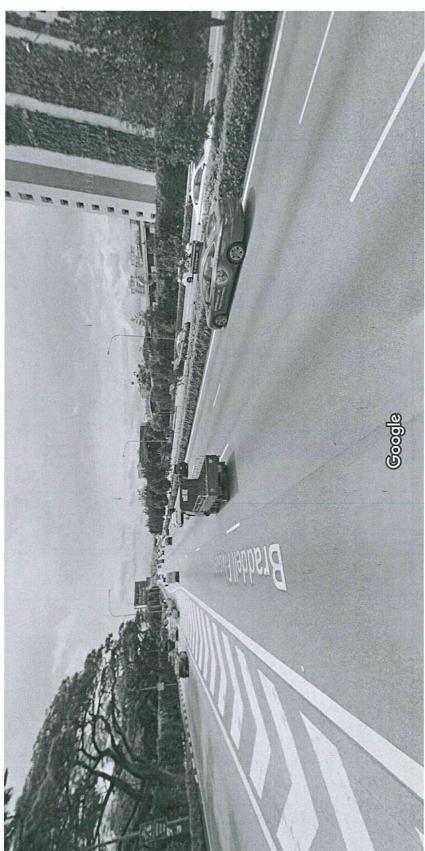


Image capture: Nov 2017 @ 2018 Google

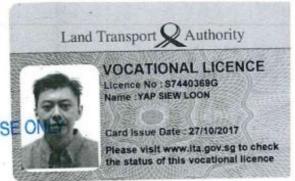
Singapore

Google, Inc.

Street View - Nov 2017

## **NRIC AND LICENSE**







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3

or cars with unladen weight =< 3000kg with =< 7 07 Jun 2001 lengers, exclusive of driver; and other motor cles with unladen weight =< 2500kg This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type 12

Description

Issue Date

- 4

TAXI VL

28/11/2011

VMG USE ONLY

NP 428A

Licence No:574403690

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5772424

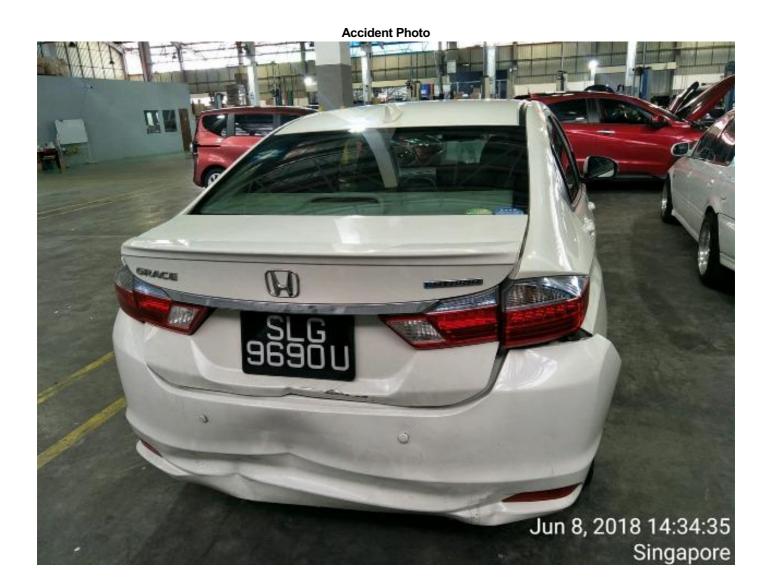


VMG USE ONL

O6-07-201

APT BLK 112 BUKIT PURMEI ROAD #05-215 SINGAPORE 090112









# Accident Photo | Accid

Singapore



