

## 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	21/06/2018 09:48
Date Of Accident	19/06/2018 17:55
Exact Location Of Accident	JUNCTION OF ROCHOR & BEACH RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT366Y
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#### Insured/Policyholder

Name Of Registered Owner	LEONARD CHIA YIXIONG
NRIC No	S8125492C
Email Address	LEONARD.CHIA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94882292
Alternative Phone No	OTHERS-94882292

#### Vehicle Particulars

Manufacturer	CITROEN
Model	GRAND C4 PICASSO
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	1700070146
Cover Note Number	

#### Driver

Name of Driver	LEONARD CHIA YIXIONG
NRIC No	S8125492C
Date Of Birth	10/08/1981
Occupation	INDOOR
Date Of Driving Pass	09/04/2003
Driving Experience	15 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94882292
Fax Number	
Contact Number	OTHERS-94882292
EEmail Address	LEONARD.CHIA@GMAIL.COM

Address	470A UPPER SERANGOON CRESCENT #16-306
Postcode	531470
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)	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 ATTACHED REPORT

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER TO OWNER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PA9666A
Vehicle Make/Model/Colour	WHITE BUS
Details Of Properties	
Vehicle Category	BUS
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

20/JUN/2018  
12:15 PM

Driver's Signature

(If driver is not the policyholder)

Date & Time

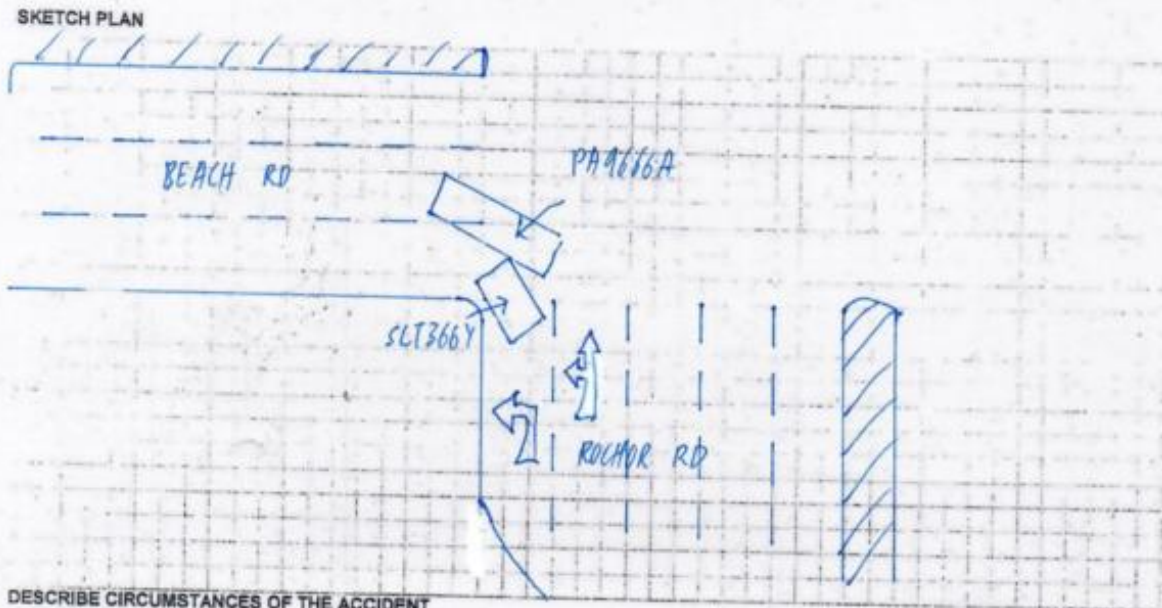
20/JUN/2018  
12/15 PM.

Reporting Centre Personnel's

Name:

NRIC/FIN No.:

## Sketch Plan #2



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I Leonard Chia, S8125492C, driver of vehicle SLT366Y was involved in a motor incident on 19/JUN/2018 at the junction of Rochor road and beach road at approximately 1755 hours. The following account is based on in vehicle video footage and first person account.

Having exited ECP, I was driving along Rochor road, with the intention to turn left at the junction of Rochor and Beach road. The junction allows for 2 left lane turning, and I was position at the left most lane. As the pedestrian light was in the favour of pedestrians, I came to a complete stop before the pedestrian cross path and was waiting.

Shortly after, Bus PA9666A made a left turn from the 2<sup>nd</sup> left most lane, narrowly missing a pedestrian that was crossing the road from left to right. At this point I felt a heard a loud impact on the right side of the vehicle and was thrown sideways from the impact.

**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 20/SUN/2018  
1215

Driver's Signature

(if driver is not the policyholder)

Date & Time 20/SUN/2018  
1215

Reporting Centre Personnel's

Name:

NRIC/FIN No.:



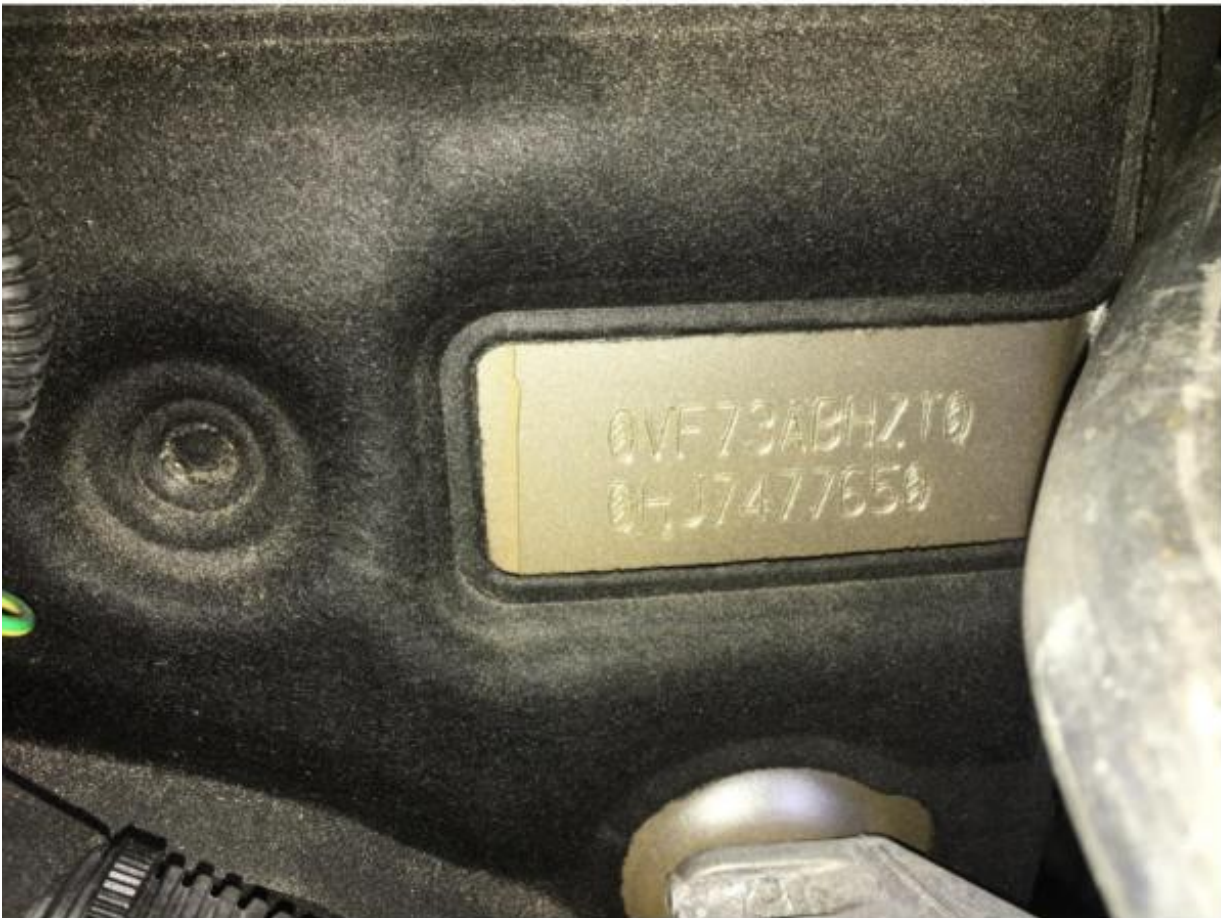
## Driving License



# Identification Card



Accident Photo



## Accident Photo





Accident Photo



Accident Photo



Accident Photo





**Accident Photo**





Accident Photo





Accident Photo



Accident Photo





# CERTIFICATE OF INSURANCE



## CERTIFICATE OF INSURANCE

### CITROEN AUTO PROTECTOR PRI /ATE VEHICLE

**Name of Policyholder** : CHIA YIXIONG, LEONARD  
**Period of Insurance** : 27 Oct 2017 To 26 Oct 2018  
**Engine No.** : 10JBHD3085580  
**Chassis No.** : VF73ABHZTHJ747765

**Vehicle No.** : SLT366Y  
**Policy No.** : 1700070146  
**Endorsement No.** : 000000000196830  
**Issued Date** : 26 Apr 2018

#### ABOUT THE COVER

**Make/Model** : CITROEN Grand C4 Picasso 1.6 BlueHDI  
**Engine Capacity/Tonnage** : 1,560.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2017  
**Insuring with COE/PARF** : Yes

#### Person or Classes of Persons Entitled to Drive\* :

- a) The Policyholder  
 b) Any other person who is driving on the Policyholder's order or with his/her permission.  
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 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, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

**Loss of Use** 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

#### EXCESS

**Section 1**  
 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

**Section 2**  
 Property Damage - \$0

**Windscreen** : \$100

#### Named Driver and Excess (where applicable)

CHIA YIXIONG, LEONARD

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

1. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
2. Cycle & Carriage Authorised Service Centre (For windscreen claim only) Add: 20 Lang Kee Rd Singapore 159094 64708600
3. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 606339 65654501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

#### IMPORTANT NOTES

**Hire Purchase Company/Employer's Loan:** HL Bank

We 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. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0502847631

CYCLE & CARRIAGE - JOSPHI  
 239 ALEXANDRA ROAD  
 SINGAPORE 159630

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*M. J. J. J.*

**AIG Asia Pacific Insurance Pte. Ltd.**  
 AUTHORISED REPRESENTATIVE

88CBAN