

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	20/06/2018 17:44
Date Of Accident	20/06/2018 13:20
Exact Location Of Accident	42 MACTAGGART RD (CARPARK OF MACTAGGART BUILDING)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL6653X
Insured/Policyholder	
Name Of Registered Owner	ONG SIONG KHIM
NRIC No	S1526635Z
Email Address	ONGONGSK@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96661001
Alternative Phone No	OTHERS-96661001

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI-1.2 (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	2100502989-01
Cover Note Number	

Driver

Name of Driver	ONG SIONG KHIM
NRIC No	S1526635Z
Date Of Birth	17/06/1962
Occupation	INDOOR
Date Of Driving Pass	04/02/1980
Driving Experience	38 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96661001
Fax Number	
Contact Number	OTHERS-96661001
E-Mail Address	ONGONGSK@YAHOO.COM.SG

Address	30 ONAN ROAD #16-04
Postcode	424482
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 - HEAD TO REAR
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

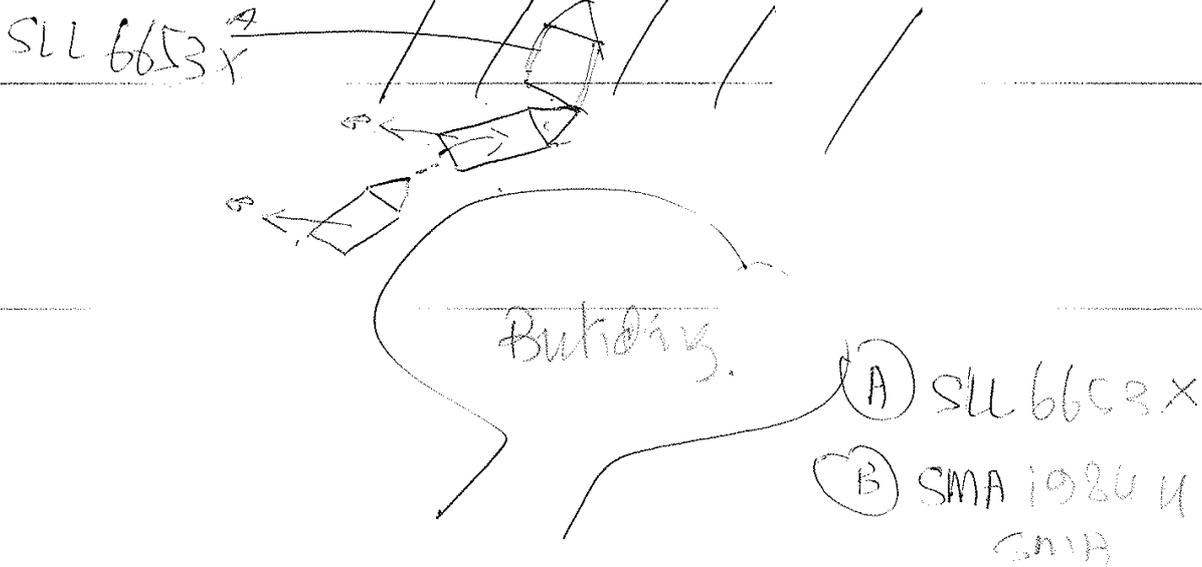
SEE ATTACHED SKETCH PLAN

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	SMA1984U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIN WEIWEN, WILLIAM
NRIC/Passport Number	S8439834I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the
 my vehicle was stationary at the car park
 of MacLassane. Busting suddenly
 vehicle number SMA 1986 U hit the back
 of my vehicle.
 I was very shocked after this impact

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
 Name: REVOLUTION INDUSTRIAL PTE LTD
 NRIC/EIN NO: [unclear]
 19 UBI ROAD 4
 SINGAPORE 408623
 TEL: 6490 9666 FAX: 6846 7483



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder	: Ong Siong Khim	Vehicle No.	: SLL6603X
Period of Insurance	: 06 Mar 2018 To 05 Mar 2019	Policy No.	: 2100502989-01
Engine No.	: HRA2334610A	Endorsement No.	:
Chassis No.	: SJNFEAJ11U1772834	Issued Date	: 12 Feb 2018

ABOUT THE COVER

Make/Model	: NISSAN QASHQAI 1.2 DIG-TURBO	Sum Insured	Market Value	First Year of Registration	: 2017
Engine Capacity/Tonnage	: 1,197.00 CC	Off Peak Car	: No	Insuring with COE/PARF	: Yes
Driver Restriction	: NA				

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 extend to 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 inexperience Driver Excess" ("YIDR") if You are or Your Authorised Driver (trained or licensed) 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 3 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)

Ong Siong Khim - \$600, Own Damage

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

- 1 TC AutoClinic, Add: No 1, Sixth Lok Yang Road, Singapore 628099 62822212
- 2 Autolator Industrial, Add: 19 Ubi Road 4, Singapore 408623 64909696
- 3 TC AutoClinic, Add: 25 Leng Kee Road, Singapore *59097 67038511 67038512 67038513
- 4 Tan Chong Motor Sales, Add: 913 Bukit Timah Road, Singapore 589823 64664091 64694092 64694093
- 5 Tan Chong Motor Sales, Add: 17, Lorong 8 Toa Payoh, Singapore 318254 63570753 63570754

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 5263. Alternatively, you may refer to AIG website 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: HONG LEONG FINANCE LTD

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).

0500610541

TAN CHONG CREDIT PTE LTD - NYJ
 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
 SINGAPORE 589622 ANSP-MOTOR
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. Tanile

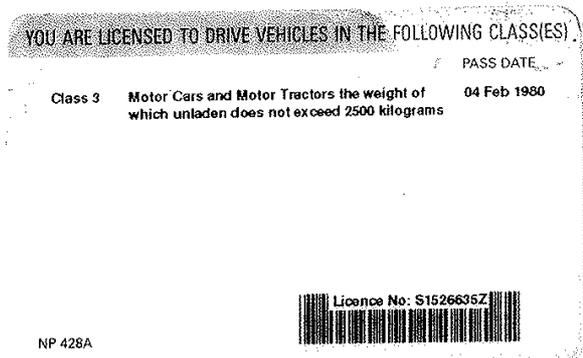
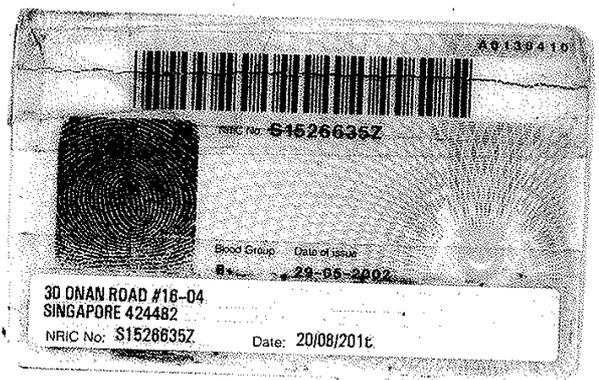
AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

ASPLUS

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1526635Z



Name
ONG SIONG KHIM
王相欽
Race
CHINESE
Date of Birth Sex
17-06-1962 M
Country of Birth
SINGAPORE



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



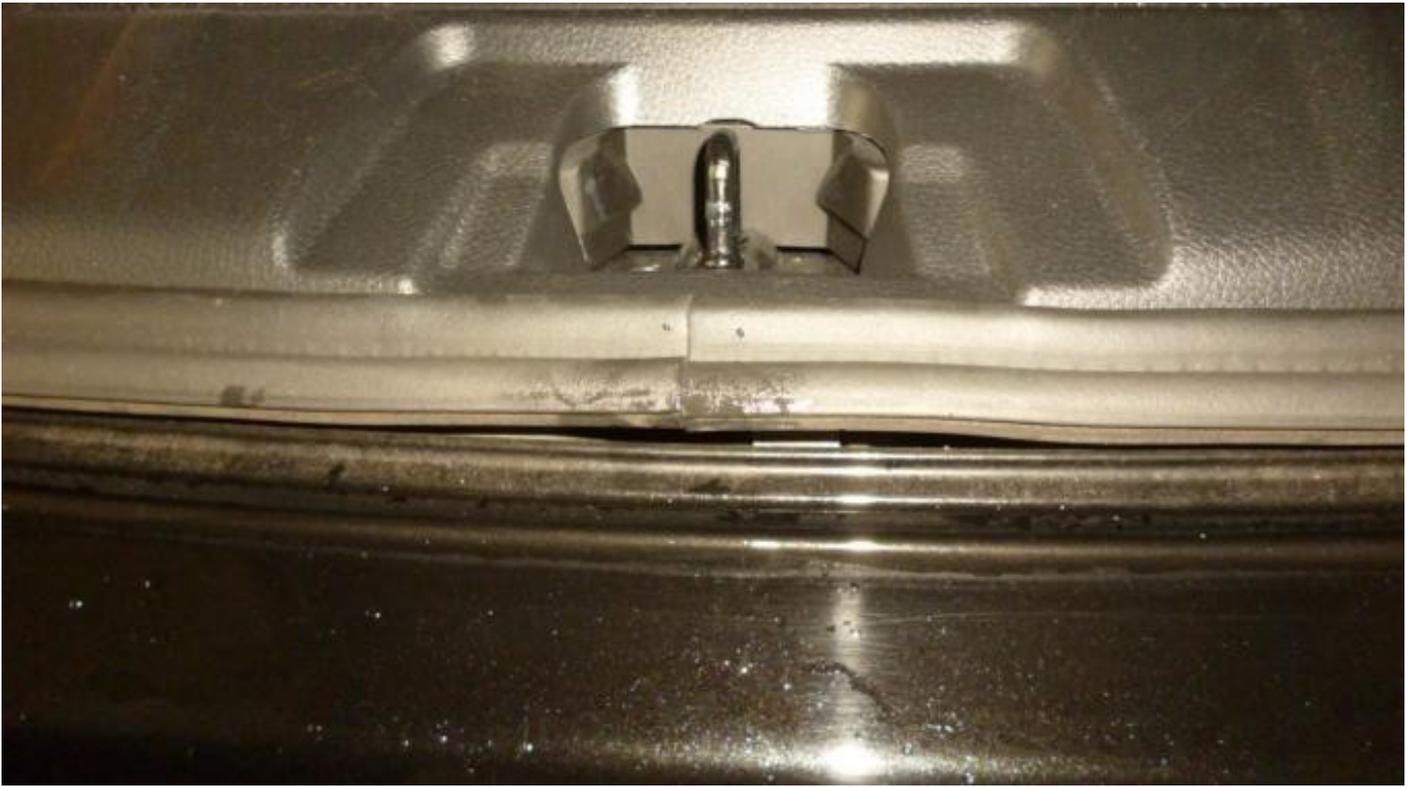
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