SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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

	ACCIDENT STATEMENT
Date Of Report	09/07/2018 14:12
Date Of Accident	07/07/2018 09:30
Exact Location Of Accident	25A JALAN MEMBINA LOADING UNLOADING BAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKP4093R
Insured/Policyholder	
Name Of Registered Owner	CHONG WAI KWOK
NRIC No	S1153904A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98586736
Alternative Phone No	Office-98586736
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	COROLLA ALTIS-1.6 L CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	1800022995
Cover Note Number	
Driver	
Name of Driver	CHOONG WAI SENG
NRIC No	S1100955G
Date Of Birth	26/05/1955

INDOOR

26/01/1995

23 YEARS AND 5 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-98766366

Fax Number

Contact Number

EMail Address WCHOONG@HOTMAIL.COM

BLK 52 CHAI CHEE STREET Address

#06-326

Postcode 460052 Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SIBLING

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

NO

NO

NO

1

NO

NO

General Information of the Accident

Type Of Accident **COLLIDED INTO PARKED VEHICLE**

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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)

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?

Circumstances of Accident

STATEMENT RECORDED BY SOO - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

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

SMA8382K Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver **KENNETH TAY** S9237963I NRIC/Passport Number Contact Number 81985575

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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 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:
 - (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:

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN Vehicle No A-SEP4093R B-SMA 8382K. B Legend DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 9.40 AM 7/3/18 Want (A) CN. No rentifica too WAS fig herd theo it hit mis n.t dent DECLARATION I/We declare the foregoing particulars are true in every respect.
Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

Date & Time:

Policyholder's Signature Date & Time:

GIARMC SketchPlanForm, VS

Driver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature

2

Name: NRIC/FIN No.:



CERTIFICATE OF INSURANC

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : CHONG WAI KWOK

Period of Insurance

: 30 Mar 2018 To 29 Mar 2019 : 1ZRX445203

Engine No. Chassis No.

: MR053REH104515571

Vehicle No.

: SKP4093R : 1800022995

Policy No. Endorsement No.

Issued Date

: 06 Mar 2018

ABOUT THE COVER

Driver Restriction

TOYOTA COROLLA ALTIS 16

Engine Capacity/Tonnage 1,598 00 CC

Sum Insured Off Peak Car No

Market Value

First Year of Registration Insuring with COE/PARE

2014

Person or Classes of Persons Entitled to Drive*

NA.

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Age Condition

All Age Condition

Limitation as to use:

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Loss of Use 1500cc - 1600cc Optional

* Conditions remined in granulous by Section is of the Motor Valuetys (Hand-Yang Ricks and Computes/Bon) And Section 55 of the World Trapoport Act. 1967 (Makey an are not to be included under those frequency).

Section 1 For 30 Own Principle 3500 Birth 50 Hood Cover 50

Windscreen: \$100

Named Driver and Excess whose applicable

CHOICE WALKVAOR

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

Approximation of the Authorized Proposes of a characteristic party of the last translation of the Veter from the Company of the Approximation of the Veter from the Company of the Approximation of the Veter from the Company of the Approximation of the Veter from the Company of the Approximation of the Company of the Comp

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan NA

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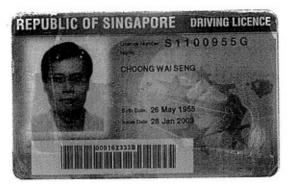
05/00/718000

201 JOO CHIAT ROAD #01-92

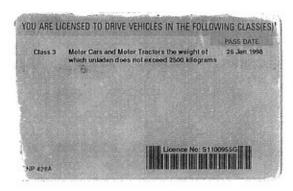
SINGAPORE 427472 ANSP - NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE









NRIC No: \$1100955G

Date: 02/12/1993 (R)

Accident Photo









Accident Photo



Accident Photo

