

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 | 10/07/2018 10:26 |
| Date Of Accident | 10/07/2018 07:00 |
| Exact Location Of Accident | NEWTON CIRCUS |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SLS5999T |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|----------------------|
| Name Of Registered Owner | MAN JUN HOE |
| NRIC No | S7131295Z |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98438545 |
| Alternative Phone No | Office-98438545 |

Vehicle Particulars

| | |
|--------------|---------------|
| Manufacturer | MERCEDES-BENZ |
| Model | E200 |

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? | 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 | 1700043213 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | MAN JUN HOE |
| NRIC No | S7131295Z |
| Date Of Birth | 05/09/1971 |
| Occupation | INDOOR |
| Date Of Driving Pass | 21/07/1993 |
| Driving Experience | 24 YEARS AND 11 MONTHS |

| | |
|---|---------------------------|
| Gender | MALE |
| Mobile Number | (LOCAL) +65-98438545 |
| Fax Number | |
| Contact Number | OFFICE-98438545 |
| EMail Address | NOEMAIL |
| Address | 941 BUKIT TIMAH RD #06-46 |
| Postcode | 589658 |
| 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 - ROUNDABOUT |
| Weather Conditions | RAINING |
| Road Surface | WET |

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) | 2 |
| Passenger 1 | Name: : UNKNOWN Gender: : Female |

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

I WAS MOVING ALONG NEWTON RD TWDS THE NEWTON CIRCUS. THE TRAFFIC LIGHT WAS ON GREEN AND I PROCEEDED TO APPROACH INTO THE CIRCUS. SUDDENLY, I SAW CAR B (SHD9515G) MOVING TWDS MY DIRECTION AND WE COLLIDED. ON REVIEWING MY CAR VIDEO CAMERA, IT WAS EVIDENT THAT THE CAR B HAS BEATEN THE TRAFFIC LIGHT WHICH IS RED THEN. A POINT THE NOTE IS THAT THE TRAFFIC LIGHT HAS BEEN GREEN FOR QUITE SOMETIME (2-3 SECONDS) WHICH MEANS THAT THE RED TAXI HAS IGNORED THE RED LIGHTS WHEN THE ACCIDENT HAPPENED, A WITNESS DRIVER STOPPED BY AND TOLD ME THAT THE CAR B HAS BEATEN THE RED TRAFFIC LIGHTS.

Attachment(s)

| | |
|---|---------------|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Remarks/ Reasons: | REFER CSE YIK |
| Was there any audio recorded? | NO |

Details of Witness 1

| | |
|------|-----|
| Name | KEN |
|------|-----|

Phone Number98389056

Email Address

| DETAILS OF OTHER VEHICLE PROPERTY 1 | |
|-------------------------------------|----------------|
| Vehicle Registration Number | SHD9515G |
| Vehicle Make/Model/Colour | TRANS CAB TAXI |
| Details Of Properties | |
| Vehicle Category | TAXI |
| 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

10/7/18

9:35 am.

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name:

NRIC/FIN No.:

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5169 Fax: 6872 1272
Email: chanhoe.yik@cyclecarriage.com.sg

SKETCH PLAN

Refer to attached.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was moving along Newton Rd towards the Newton Circus. When the traffic light was on green and I proceeded to approach into the Circus. Suddenly, I saw a car (red ^{taxi}) moving towards my direction, and we collided. On reviewing my car video camera, it was evident that the red ~~car~~ ^{taxi} has beaten the traffic light, which is red then. A point to note is that the traffic light has been green for quite sometime (2-3 seconds), which means that the red taxi has ignored the red lights. when the accident happened, ^{stopped by it}

DECLARATION

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)

[Signature]

Policyholder's Signature

Date & Time

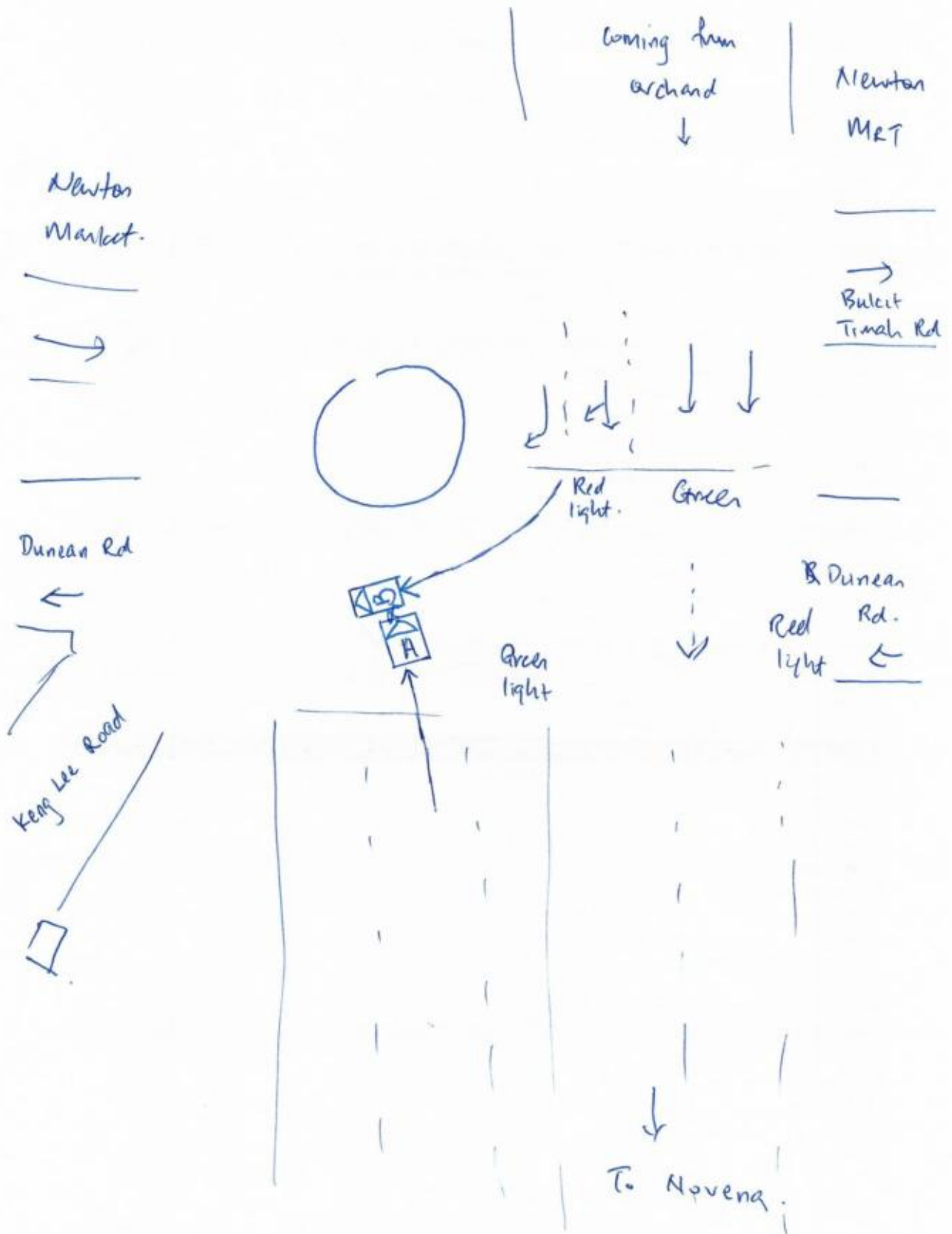
10 July 2018
0935 am.

Driver's Signature

(If driver is not the policyholder)

Date & Time

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
Tel: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe.yik@cyclecarriage.com.sg
Reporting Centre Personnel's
Name:
NRIC/FIN No.:



Sketch Plan #4



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : MAN JUN HOE
Period of Insurance : 28 Aug 2017 To 27 Aug 2018
Engine No. : 27492031005946
Chassis No. : WDD2130422A248523

Vehicle No. : SLS5999T
Policy No. : 1700043213
Endorsement No. :
Issued Date : 08 Sep 2017

ABOUT THE COVER

Make/Model : MERCEDES Benz E200 Sedan Avantgarde
Engine Capacity/Tonnage : 1,991.00 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 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 96 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

MAN JUN HOE - \$800 (Own Damage)

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

1. Eunice Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 67412335

2. Pandan Loop Service Center - Body Care & Repair (For accident repair & accident reporting) Add: 188 Pandan Loop Singapore 128378 67775386

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6538 6200. 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: MayBank

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, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0504380262

CYCLE & CARRIAGE - FRANCHISE

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

880235

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S7131295Z**
Name: **MAN JUN HOE**

Birth Date: **05 Sep 1971**
Issue Date: **24 May 2003**

1000507090D

FOR C&C USE ONLY

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

| | PASS DATE |
|---|--------------------|
| Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms | 21 Jul 1993 |

98438545

NP 428A

Licence No: **S7131295Z**

FOR C&C USE ONLY

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

