

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	27/02/2018 13:30
Date Of Accident	26/02/2018 21:00
Exact Location Of Accident	WOODLANDS AVE 2 / WOODLANDS AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC7807K
Insured/Policyholder	
Name Of Registered Owner	ONG WEI WEI
NRIC No	S7640529H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90661363
Alternative Phone No	Office-90661363

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	A180
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	2100467835-01000
Cover Note Number	

Driver

Name of Driver	ONG WEI WEI
NRIC No	S7640529H
Date Of Birth	27/12/1976
Occupation	INDOOR
Date Of Driving Pass	19/06/2012
Driving Experience	5 YEARS AND 8 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-90661363
Fax Number	
Contact Number	OFFICE-90661363
EMail Address	NOEMAIL
Address	BLK 886B WOODLANDS DRIVE 50 #08-507
Postcode	732886
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	COLLIDED INTO MOTORCYCLIST
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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20180226/2226

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBB1805D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE

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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1. Please report correctly the details of the accident to speed up the claims process.
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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. 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.
7. 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:
 - (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.



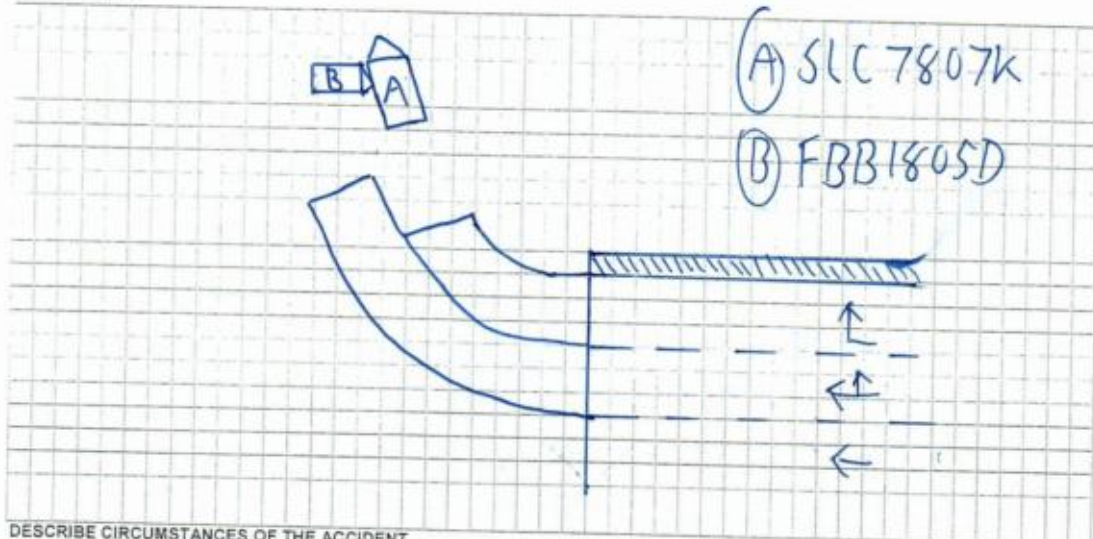
Policyholder's Signature
Date & Time

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

 27/02/18

Reporting Centre Personnel's
Name: Alan Quak
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref police report for detail.

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

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

Reporting Centre Personnel's
Name: Alan Quach
NRIC/FIN No.:

27/02/18



**SINGAPORE
POLICE FORCE**



T/20180226/2226

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20180226/2226

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/02/2018 23:19	Vide Report No.: J/20180226/0217	Station Diary No.:
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Informant's Particulars

Name of Informant: WANG WEI WEI			Address: APT BLK 886B WOODLANDS DRIVE 50 #08-507 SINGAPORE 732886		
ID Type / ID No.: NRIC NO / S7640529H			Contact No.: Home/Office: Mobile: 90661363		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 41	Date of Birth: 27/12/1976	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Primary school teacher			Driving Licence Information: Class: 3A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 26/02/2018 21:00	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 WOODLANDS AVENUE 2 WOODLANDS AVENUE 5				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBB1805D	Motorcycle	BAJAJ CHETAK	PULSAR180 M	Blue	Slightly Damaged	0
SLC7807K	Car	MERCEDES BENZ	A180 FL STYLE (R17 HLG)	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180226/2226

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20180226/2226

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLC7807K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100467835	26/05/2017	25/05/2018

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WANG WEI WEI		ID No. S7640529H
Related Vehicle	NIL		Contact No. 90661363
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3A Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

AT THE ABOVE MENTIONED DATE AND TIME

I WAS AT WOODLANDS AVENUE 2 MAKING A RIGHT TURN TO WOODLANDS AVENUE 5, THE TRAFFIC LIGHT THEN SHOWED A BLINKING GREEN ARROW, THEN I HEARD A HORN WHILE I WAS ALREADY AT THE MIDDLE OF THE JUNCTION, REALISING THAT IT WAS A MOTORCYCLE AND HE WAS RIDING AT A FAST SPEED, I STILL DID THE TURN AS EVEN IF I STOPPED THE MOTORCYCLE WILL STILL BANG INTO MY CAR. AFTER HE BANG INTO MY CAR, I CONTINUED MY TURN AND MOVED MY CAR TO WOODLANDS AVENUE 5 EXTREME LEFT LANE AS I DO NOT WANT TO OBSTRUCT TRAFFIC. WHEN I GOT OUT OF MY CAR, I SAW A FEW PASSERSBY HELPING OUT THE MOTORCYCLIST AND SHIFTING THE BIKE TO WOODLANDS AVENUE 5 AS WELL. THEY ARE ALSO THE ONES THAT CALLED FOR THE AMBULANCE. THE MOTORCYCLIST TOLD ME THAT HE HORN TO ALERT ME ALREADY, TO WHICH I TOLD HIM THAT I WAS ALREADY MAKING A TURN. WE DID NOT CONVERSE MUCH AS HE WAS IN PAIN.

AMBULANCE CAME DOWN TO THE SCENE AND CONVEYED HIM TO THE HOSPITAL. BEFORE THAT THE TRAFFIC POLICE CAME DOWN AND MANAGED TO TALK TO PARAMEDIC BEFORE THEY WENT OFF, THEN THEY CAME TO ME AND ASKED FOR MY PARTICULARS AND TOLD ME TO MEET IO PHILIP AT TPHQ.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20180226/2226

3 of 3

Report No. T/20180226/2226

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
TP /
TAN KIN WAH

[Signature]

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MA JUNXIANG
Contact No.: 65476251

Authentication Stamp
NP168

Signature Of Informant:

[Signature]

Date/Time:
26/02/2018 23:19

Classification Of Case:



SINGAPORE
POLICE FORCE

Signature: *[Signature]*

Sketch Plan #6



HOTLINE TEL: (65) 6419 3000
FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

M.X.1

MERCEDES-BENZ MOTOR INSURANCE		OWN DAMAGE EXCESS S\$800.00 (1)
CERTIFICATE NO. 2100467835-01000		WINDSCREEN EXCESS S\$100.00 (for policies with effect from 1st November 2002)
1) VEHICLE REGISTRATION NO.	SUM INSURED	Market Value
2) NAME OF INSURED	INSURING WITH COE/PARF	Yes
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	SLC7807K	
4) DATE OF EXPIRY OF INSURANCE	Ong Wei Wei (Wang Weiwei)	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE * SUBJECT TO AGE CONDITION : All Age Condition	26 May 2017	
a) The Insured.		
b) Any other person who is driving on the Insured's order or with his permission.		
This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions.		
A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the		
Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said		
Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.		
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.		
6) LIMITATION AS TO USE *		
Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
APPROVED REPORTING CENTRES / MERCEDES-BENZ AUTHORISED REPAIRERS		
1. Cycle & Carriage Pandan Loop Service Center - 188 Pandan Loop (Tel: 6777 8388)		
APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)		
2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. Ethoz - 30 Bukit Batok Cres (Tel: 66547777)		
4. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 5. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560)		
6. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110) 7. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892)		
8. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336) 9. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)		
LOSS OF USE 15 Days Replacement Car only for repairs at C & C - Refer to policy wordings for details		
NAMED DRIVER NA		
HIRE PURCHASE COMPANY / EMPLOYER'S LOAN MayBank		
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 24 Apr 2017

AIG Asia Pacific Insurance Pte. Ltd.

504380-242
CYCLE & CARRIAGE - SEEMHP
239 ALEXANDRA ROAD
SINGAPORE 159930

AUTHORISED REPRESENTATIVE

ORIGINAL

SSCNFY

Co. Reg. No. 20100941004

31/02/13

Accident Sketch Plan

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S7640529H**
Name:
ONG WEI WEI
(WANG WEIWEI)

Birth Date: **27 Dec 1976**
Issue Date: **19 Jun 2012**



 002079223H

FOR C&C USE ONLY

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

	EFFECTIVE DATE
Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg	19 Jun 2012

FOR C&C USE ONLY

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



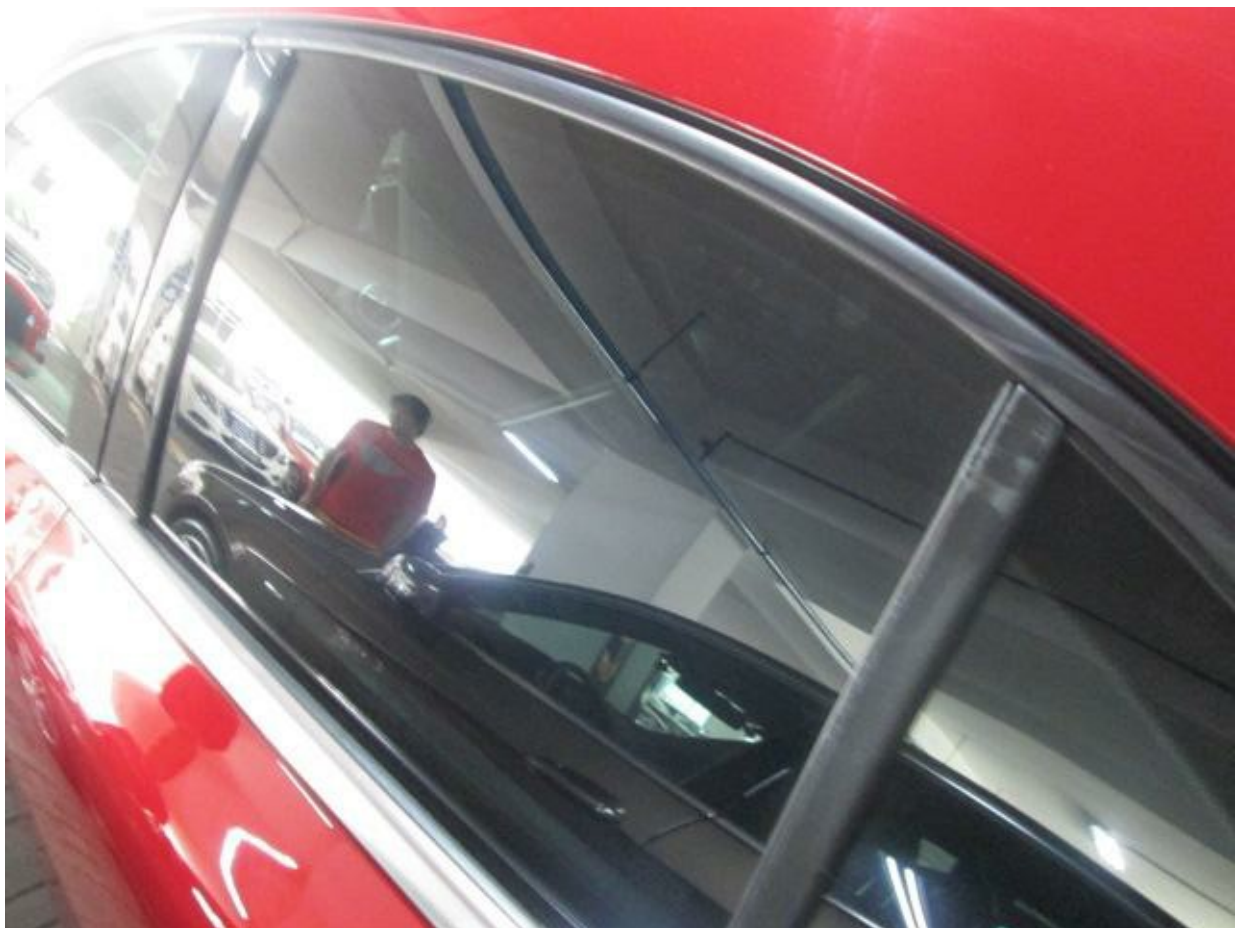
Accident Photo



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