

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 liability.
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	06/12/2018 16:40
Date Of Accident	12/07/2018 08:40
Exact Location Of Accident	BLK 33 AVENUE 3 VERTEX MSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFB3028U
Insured/Policyholder	
Name Of Registered Owner	CHUA MENG HUAT
NRIC No	S1632600C
Email Address	MH.CHUA@WIESON.COM.SG
Mobile Phone No	(LOCAL) +65-98456000
Alternative Phone No	Others-98456000

Vehicle Particulars

Manufacturer	VOLVO
Model	S90
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	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	2100498919-01
Cover Note Number	

Driver

Name of Driver	CHUA MENG HUAT
NRIC No	S1632600C
Date Of Birth	27/03/1964
Occupation	INDOOR
Date Of Driving Pass	20/07/1982
Driving Experience	35 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98456000
Fax Number	
Contact Number	OTHERS-98456000
E-Mail Address	MH.CHUA@WIESON.COM.SG
Address	215 BEDOK SOUTH AVE 1 #01-08 (S) 469338
Postcode	
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	NO COLLISION
Weather Conditions	UNKNOWN
Road Surface	UNKNOWN

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?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

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

DRIVER HAS NO IDEA ABOUT THIS INCIDENT. ALL DETAILS ARE UNKNOWN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Accident Sketch Plan

SKETCH PLAN

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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:

5 Dec 18
1643 hrs.

00000000000000000000

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder	: CHUA MENG HUAT	Vehicle No.	: SFB3028U
Period of Insurance	: 20 Jan 2018 To 19 Jan 2019	Policy No.	: 2100499919-01
Engine No.	: B4204T231818238	Endorsement No.	:
Chassis No.	: YV1PS10BDH1008491	Issued Date	: 19 Dec 2017

ABOUT THE COVER

Make/Model	: VOLVO S90 T5 Momentum	Sum Insured	: Market Value	First Year of Registration	: 2017
Engine Capacity/Tonnage	: 1,969.00 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 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 9 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 169) and Section 95 of the Road Transport Act, 1937 (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)

CHUA MENG HUAT - \$800 (Own Damage)

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

1 Wearnes Automotive Pte Ltd Add 249 Alexandra Road Singapore 159935 6430400 63769350

For other Approved Reporting Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6339 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: OCBC Bank 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. 169), Part IV of the Road Transport Act, 1937 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503485714

WEARNES AUTOMOTIVE - RC (V)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

55C/55

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Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC4/AIG18014938/Kpa3

04 DEC 2018

By Registered Mail

CHUA MENG HUAT
215 BEDOK SOUTH AVENUE 1
#01-08
SINGAPORE 469338

Dear Sir,

**ACCIDENT INVOLVING SFB 3028U(AIG) AND SKT 2434H ON 12/07/2018
(08:40HRS) ALONG/AT BLK 33 UBI AVE 3 VERTES MSCP**

We refer to the above subject matter. Your insurer AIG Asia Pacific Insurance Pte Ltd (AIG) has received a third party claim(s) against your motor insurance policy, and has appointed LKK Auto Consultants Pte Ltd to act on their behalf to handle this matter.

We highlight that this accident has not been reported to AIG.

Please note that you had been notified by our via mail by post from our office on 04 SEPT 2018.

Kindly proceed to lodge your accident report immediately, giving the version of the accident amongst other things related to the accident. The accident report can be lodged at any of AIG reporting centres. For the listing of AIG reporting centres, you may refer to your Certificate of Insurance or visit AIG Singapore's website.

To enable us to look into the matter immediately, please let us hear from you within fourteen (14) days from date of this letter (by 18/12/2018).

Please be reminded that in accordance with the terms and conditions under your policy, failure of compliance, our principal M/s AIG Asia Pacific Insurance Pte Ltd reserves the right to repudiate liability.

If you need further assistance or clarifications, please contact the undersigned.

Yours faithfully,

CHEW HSIAO TONG (*Ms*)
DID: 6742 3197
Fax: 6741 4108
Email: chewht@lkkauto.com

c.c Claims Manager
AIG Asia Pacific Insurance Pte. Ltd
(Motor Claims Dept)

driver's nric & license

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1632600C



Name

CHUA MENG HUAT

蔡 錦 發

Race

CHINESE

Date of birth

27-03-1964

Sex

M

Country of birth

SINGAPORE

S1632600C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1632600C

Name

CHUA MENG HUAT

Birth Date 27 Mar 1964

Issue Date 06 Apr 2009

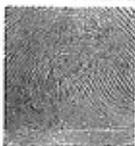


driver's nric & license

4391515



NRIC No. S1632600C



Date of issue
23-04-2009

Address
215 BEDOK SOUTH AVENUE 1
#01-08
SINGAPORE 469338

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

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 20 Jul 1982



License No: S1632600C

NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

