SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 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 inont to the ort at the

By the lodgement of this report to the insurers, you hereby conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	14/08/2018 16:32
Date Of Accident	14/08/2018 07:00
Exact Location Of Accident	JUNC OF BISHAN ST 22 AND BISHAN ST 24
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKS4531C
Insured/Policyholder	
Name Of Registered Owner	KOH LAY LENG
NRIC No	S7000681B
Email Address	LLKOH07@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97433039
Alternative Phone No	Others-96818481
Vehicle Particulars	
Manufacturer	MAZDA
Model	3 4-DOOR SEDAN 1.5L SP.6EAT
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	2100409360
Cover Note Number	
Driver	
Name of Driver	KOH KIM WAN
NRIC No	S0814681J
Date Of Birth	07/01/1940

INDOOR

11/09/1961

56 YEARS AND 11 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-96818481

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 308 SHUNFU ROAD #02-147

Postcode 570308 Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **PARENT**

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

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

2

Number of Passengers (Including Driver)

Passenger 1 : THEODORE BUKOH Name:

> Gender: : Male

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

PLEASE REFER TO ATTACHED.

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

SGJ313L Vehicle Registration Number Vehicle Make/Model/Colour **BMW**

Details Of Properties

PRIVATE CAR Vehicle Category

SAM Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

96369090

Sketch Plan

SKETCH PLAN

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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
- Any false reporting may be referred to the Police for investigation.
- 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)
 - (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: 14/8/18

Reporting Centre Personnel's Signature Name:

NRIC/FIN No :

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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14 Aug 2018, just before 7:00 am, I (KOH KAM WAV) was driving
vehicle 10. SKS4531 C dong Bishon St 22, on my way to
soud my grandson to his school of cotheric High. The on
stopped at the traffic light at the junction with Bichen \$ 24
and there were about \$ to I are infront on mine Due
to slight dictraction, my car inched very slight formed
and the just touched the car informt of mine I
noted that it was a dark colons (libely black) soloon
car. The other dones & I came down to inspect
the cars the other daiver and to me that it was
just I very mor "dimple" on his bumper and he world
send his car to the montehop to inspect from my visual
inspection, it was I may mor dingle" on the other
dower's cas and there was no other damage. As there
were morning traffic, we drove of My grandson then noted
down the velocity of as SCI3131
Subsequently the other doner coffeed avoned 9.22 on \$000
to informed me that the dange will cost asound \$50,000/-
and passol the less phone to his mechanic.
paret the 40 prom to the mechanic.

DECLARATION

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

Policyholder's Signature
Date & Time: 14/8/16

Driver's Signature (If driver is not the policyholder) Date & Time: 141/6/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S0814681J



KOH KIM WAN



CHINESE Owner/ 8m Sex 07-01-1940 M Country of Birth SINGAPORE





NICM S0814681J

Bood Group Oate of issue A+ 05-09-1991

APT BLK 308 SHUNFU ROAD #02-147 SINGAPORE 570308

SINGAPURE 570308
NRIC No: S0814681J Date: 26-12-2000 No: 3917300

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

PASS DATE

Class 2 Motorcycles exceeding 400 cc 10 Apr 1963
Class 3 Motor Cars and Motor Tracters the weight of which unladen does not exceed 2500 kilograms

NP 428A



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Koh Lay Leng

Period of Insurance

: 16 Apr 2018 To 15 Apr 2019

Engine No. Chassis No. : P520273024

: JM6BM42A8G0307402

Vehicle No.

: SKS4531C

Policy No.

: 2100409360-03

Endorsement No. Issued Date

: 12 Mar 2018

ABOUT THE COVER

Make/Model

: MAZDA 3 1.5 SKYACTIV

Engine Capacity/Tonnage: 1,496.00 CC Driver Restriction

: NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2015

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.

**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 "inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving expensions

Age Condition

: 35 years old and above

Limitation as to use* :

ply for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving test, racing, pace-making, reliability trial or releating, 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 Optional

* Limitations rendered inoperative by Section 8 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 - S0

Windscreen: \$100

Named Driver and Excess (where applicable)

Koh Lay Leng - \$600 (Own Damage)

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

is Eurokars Pte Lld Add; 5 Ubi Close, Singapore 408605 63958899

For other Approved Reporting CentrestAIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG twebsite 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

Li Santanani, K. mang Bogan, 2012a and making mount adjust 172 managanan

I/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, 1969 (Malaysia).

0503599190

ARF (AP) PTE LTD - MAZDA

7 MAXWELL ROAD #01-100 ANNEX 8 MND COMPLEX

SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

Different Standard Mean Land (feet July)





















