

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	24/08/2018 14:52
Date Of Accident	23/08/2018 16:40
Exact Location Of Accident	ECP EAST COAST PARK EXIT ON THE OVERHAED BRIDGE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG5265R
Insured/Policyholder	
Name Of Registered Owner	SEAH SIEW KHIM
NRIC No	S0197687G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92768189
Alternative Phone No	Office-90401891

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 CVT (A)
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	2100485368
Cover Note Number	

Driver

Name of Driver	QI YANLI
NRIC No	S8855842A
Date Of Birth	05/02/1988
Occupation	INDOOR
Date Of Driving Pass	08/06/2010
Driving Experience	8 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-90401891
Fax Number	
Contact Number	
EEmail Address	SUSANNA-QI@HOTMAIL.COM
Address	41 VICTORIA PARK GROVE
Postcode	266124
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - MOTHER-IN-LAW
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	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)	1

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 SKETCH PLAN.

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

Vehicle Registration Number	SGX2862G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ROZMIN BIN MISBAH
NRIC/Passport Number	S7419068E
Contact Number	91224684

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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.
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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

The sketch plan shows a road with two lanes. The left lane is labeled 'B' and the right lane is labeled 'A'. Arrows indicate traffic flow from left to right in both lanes.


Describe Circumstances of the Accident

I was parking on the side road, trying to cut into the main road towards East Coast park. It was on the over head bridge towards the ECP. Both the other car and my car were trying to cut into the main road. But the other car, which was in front of me didn't drive fast, ~~it was~~ I thought it was driving out but it stopped there suddenly. ~~Then~~ I was planned to drive out following the car, didn't expect that the other car was not going out, so I hit the back of the front car.


Declaration

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

Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Qi Yan Li
VEHICLE NUMBER : SLG5265R
DATE/TIME OF ACCIDENT : 23/08/18
PLACE OF ACCIDENT : ECP
THIRD PARTY VEHICLE (IF ANY) : S6X 2P62G

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED
DESTINATION BEFORE THE ACCIDENT?

41 Victoria Park Grove (266124)
East Coast park playground

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF
THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-
ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No drinking

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES
TO ALL VEHICLES INVOLVED?

Insured Hit TP.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL?
WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No injury

Qi Yan Li

Name:

I Affirmed The Above Information Is Given To My Best Knowledge.

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building 78 Shenton Way #07-16 Singapore 079120
Tel: 6419 3000

To whom it may concern

Date: 24/08/18

RE: AUTHORIZATION LETTER FOR SLG5265R

Dear Sir / Madam,

Referring to above mentioned Vehicle, I Seah Siew Kham (S0197687G) hereby authorized Madam Qi Yan Li (S8855842A) to send my vehicle SLG 5265R to lodge the accident report and repair.

Therefore, I authorized her to sign all the necessary documents on my behalf.

Thank you.

Yours Faithfully.





CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : **Seah Saw Khim**
Period of Insurance : **04 Oct 2017 To 03 Oct 2018**
Engine No. : **2ZR1036587**
Chassis No. : **JTDGG020W70J005636**

Vehicle No. : **SLG5265R**
Policy No. : **2100463368-01**
Endorsement No. :
Issued Date : **21 Sep 2017**

ABOUT THE COVER

Make/Model : **TOYOTA NEW WISH**
Engine Capacity/Tonnage : **1,798.00 CC**
Driver Restriction : **NA**
Sum Insured : **Market Value**
Off Peak Car : **No**
First Year of Registration : **2015**
Insuring with COE/PAFF : **Yes**

Person or Classes of Persons Entitled to Drive*

as the policyholder.
No other person who is driving on the policyholder's order or with his/her permission.
This policy will entitle the Policyholder or any authorized driver only & include events for optional age condition.
You have to pay an additional sum of \$3,000 as "Younger driver endorsement (Driver's class)" (TPUR-1) fee and if Your Authorized Driver (named in contract) is under the age of 25 within two years from 2 years' driving experience.

Age Condition : **All Age Condition**

Exclusion as to use*

Does not include, authorized and exclusive purposes not for the Policyholder's personal. This Policy does not cover use for hire or reward, driving for hire, driving while intoxicated, operating while under the influence of drugs, or other uses prohibited in the contract. This Policy is not valid for any purpose in connection with Motor Trade.

Limit of Use: 100000 - 100000 Optional

* Conditions excluded, excepted by Section 6 of the Motor Vehicle (Third Party Risk and Compensation) Act (Cap. 189) and Section 10 of the Road Transport Act, 1987 (Singapore), and not to be included under these headings.

EXCESS

Section 1
Fire - \$0 (Own Damage) - \$000 (Theft) - \$0 (Fixed Cover) - \$0

Section 2
Property Damage - \$0

Windscreen / ETC

Named Driver and Excess (where applicable)

Seah Saw Khim - \$800 (Own Damage)

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

Approved Reporting Centres: AIG Authorized Repairers (for claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorized Repairers. Within the first 2 years of the first registration of the vehicle in Singapore, You have the option of having the accident repairs carried out at the State Agent's workshop.
For other Authorized Reporting Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 8323 9070. Alternatively, You may refer to AIG website www.aig.com.sg to view AIG AG Mobile App. Simply search and download "AIG SG" from Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: **United Overseas Bank Limited**

We hereby certify that the policy is issued in accordance with the provisions of the Motor Vehicle (Third Party Risk and Compensation) Act (Cap. 189), Part 1 of the Road Transport Act, 1987 (Singapore) and Motor Vehicle (Third Party Risk) Rules, 1989 (Singapore).

2010210000

AIG ASIA PACIFIC INSURANCE P.L.
75 ROBINSON WAY #02-12 AG BUILDING
SINGAPORE 068126
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORIZED REPRESENTATIVE

30 Selegie Road, #01-01/02 (Singapore 118240) T: +65 6478 8022 F: +65 6478 1223 www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

Driver Nric And Driving Licence

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S8855842A**

Name: **QI YANLI**

Birth Date: **05 Feb 1988**

Issue Date: **31 Mar 2015**

002411906A

SG 50

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8855842A**

Name: **QI YANLI**

祁艳丽

Race: **CHINESE**

Date of birth: **05-02-1988**

Sex: **F**

Country/Place of birth: **CHINA**

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 06 Jun 2010

NP 428A



9328528

NRIC No. **S8855842A**

Nationality: **CHINESE**

Date of issue: **22-04-2014**

41 VICTORIA PARK GROVE
SINGAPORE 286124

NRIC No: **S8855842A** Date: **10/05/2018 (R)**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

