

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	05/09/2018 11:09
Date Of Accident	30/08/2018 11:55
Exact Location Of Accident	ALONG ROAD 1 UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX1023J
Insured/Policyholder	
Name Of Registered Owner	123 LEASING PTE LTD
Co Reg No	201801338W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-91068752

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL HYBRID 1.5X AUTO
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	999994697
Cover Note Number	

Driver

Name of Driver	TAN KOK THONG
NRIC No	S8241067H
Date Of Birth	29/11/1982
Occupation	OUTDOOR
Date Of Driving Pass	14/04/2005
Driving Experience	13 YEARS AND 4 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-91068752
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	APT BLK 230 HOUGANG AVENUE 1 #10-2016
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	YES
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)	3
Passenger 1	Name: : NIDUASA GINA MOLINA Gender: : Female
Passenger 2	Name: : DOAN KIM PHUANG Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BUKIT TIMAH N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE POLICE REPORT :T/20180830/2149

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	SLR4696D
Vehicle Make/Model/Colour	

Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJY6785D
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name NIDUASA GINA MOLINA
Approximate Age
Injuries Sustain

Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

DETAILS OF INJURED PERSON 2

Name TAN KOK THONG
Approximate Age
Injuries Sustain

Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

DETAILS OF INJURED PERSON 3

Name DOAN KIM PHUONG
Approximate Age
Injuries Sustain

Injured person in which vehicle?
Were seat belts worn?

Was this injured conveyed to hospital by
ambulance?

Address

Postcode

Sketch Plan

SKETCH PLAN

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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:

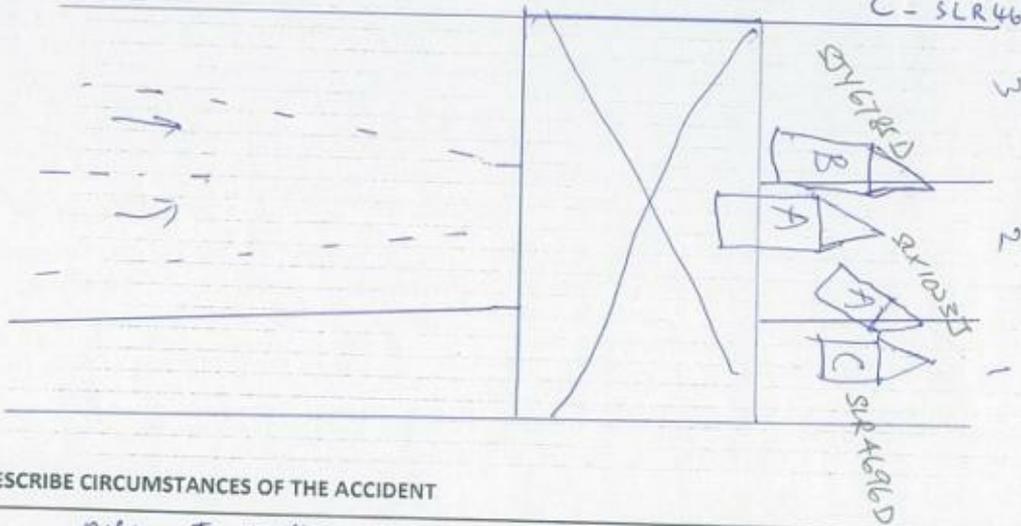
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN

H - SLX1023
B - SJY6785D
C - SLR4696D



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Refer To Police Report : T/20180830/2149-

[Empty lined area for describing the accident circumstances]

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:



[Handwritten signature of reporting center personnel]

INSURANCE



HOTLINE TEL: (65) 6419-2000
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, 1959 (MALAYSIA)

M.Z.405

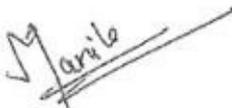
COMPREHENSIVE - COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SLX1023J	POLICY EXCESS	S\$1500.00 Section (I)
POLICY NO.	999994607	WINDSCREEN EXCESS	S\$100.00
1) VEHICLE REGISTRATION NO.		SUM INSURED	MARKET VALUE
2) NAME OF INSURED		INSURING WITH COE/PARF	Yes
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		SLX1023J	
4) DATE OF EXPIRY OF INSURANCE		123 LEASING PTE LTD	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*		15 March 2018	
		14 March 2019	
<p>Any person who is driving on the Insured's order or with their permission. S\$1,500.00 Section I Excess and S\$2,000.00 Section II Excess is applicable for driver who is <u>above</u> 22 years old and/or with minimum 2 years driving experience. S\$4,800.00 Section I Excess and S\$3,000.00 Section II Excess is applicable for drivers who is <u>below</u> 21 years old or with minimum 1 year driving experience. The policy does not cover drivers who are below 21 years old with less than 1 year driving experience.</p> <p>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.</p>			
6) LIMITATION AS TO USE*			
<p>1) Use for social, domestic, pleasure purposes and business purposes of insured 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p> <p>The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing, 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle, 3) Use for any purpose in connection with the Motor Trade.</p>			
LOSS OF USE		Not Included	
HIRE PURCHASE COMPANY		TECK WEI CREDIT PTE LTD	
<p>*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.</p>			

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 in Singapore 16 Mar 2018

AIG Asia Pacific Insurance Pte. Ltd.

501295-000
Insure Link
2 Kallang Avenue
808-16
CT Hub
Singapore 339407



 AUTHORISED REPRESENTATIVE

ORIGINAL

SSPDEC

DL& IC

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8241067H



Name
TAN KOK THONG
(CHEN GUODONG)
陈 国 栋

Race
CHINESE

Date of Birth 29-11-1982 Sex M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8241067H



TAN KOK THONG
(CHEN GUODONG)

Issued Date: 29 Nov 1982
Valid Until: 14 Apr 2005



001334617K



DL& IC

3727388



NRIC No: **S8241067H**



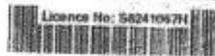
Date of issue
27-05-2005

APT BLK 230 HOUGANG AVENUE 1 #15-215
SINGAPORE 530230
NRIC No: S8241067H Date: 08/11/2016

YOU ARE PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING

CLASS	DESCRIPTION	VALIDITY
Class 2B	Motorcycle <= 250 CC	14 Apr 2005
Class 2	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver, and motor tractors/tractors <= 2500 kg	20 Jul 2006

S / No. 9000079210



NRIC No: S8241067H

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180830/2149

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

1 of 4
Report No. T/20180830/2149

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/08/2018 17:22	Vide Report No.:	Station Diary No.: 54
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Informant's Particulars

Name of Informant: TAN KOK THONG		Address: APT BLK 230 HOUGANG AVENUE 1 #10-216 SINGAPORE 530230	
ID Type / ID No.: NRIC NO / S8241067H		Contact No.: Home/Office: Mobile: 91068752	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 35	Date of Birth: 29/11/1982	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Grab Driver		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/08/2018 11:55	Type of Location: Straight Road
Location: Along Road 1 UPPER SERANGOON ROAD Upper Serangoon towards the City				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJY6785D	Car				Slightly Damaged	0
SLR4696D	Car				Slightly Damaged	0
SLX1023J	Car				Seriously Damaged	2

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180830/2149

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Report No. T/20180830/2149

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	NIDUASA GINA MOLINA	ID No.	G2995262R
Related Vehicle	SLX1023J (Car)	Contact No.	91007174
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	30/08/2018	Date Discharge	30/08/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight
Driver			
Name	TAN KOK THONG	ID No.	S8241067H
Related Vehicle	SLX1023J (Car)	Contact No.	91068752
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	30/08/2018	Date Discharge	30/08/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight
Passenger			
Name	DOAN KIM PHUONG	ID No.	G1426537L
Related Vehicle	SLX1023J (Car)	Contact No.	94526656
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	30/08/2018	Date Discharge	30/08/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On the 30/08/2018 at about 1155am to 12PM, I was travelling on the second lane of a three lane road along Upper Serangoon towards the City. My vehicle, SLX1023J, was travelling on the second lane, passing by Veeragoo Close, when another vehicle, SJY6785D, a silver color Toyota, collided onto me when changing lane from the third lane to the second lane.

I noticed that the vehicle did not signal right for the intention to filter to the center lane.

Due to the impact, my vehicle steered more to the right and cause me to collide onto another vehicle

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180830/2149

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

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Report No. T/20180830/2149

CONTINUATION OF REPORT

SLR4696D, a blue colour Toyota Prius. My vehicle left and right front side was damaged. All the drivers then exchanged particulars. I have 2 other passengers with me at the moment of time. After the accident, me and my passengers felt pain due to the accident. We went to see the doctor and was given 4 days of medical leave.

Therefore, I am lodging this report for assistance, record and insurance claim purposes.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180830/2149

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Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No. T/20180830/2149

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: E / Sr Staff Sgt MUHAMMAD AZRI-KHAIRUDDIN BIN AZAHAR	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/08/2018 17:22
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HUI Contact No.: 65476436	Classification Of Case: SN 170
Authentication Stamp NP168	 SIGNATURE

ACCIDENT PHOTO



ACCIDENT PHOTO



ACCIDENT PHOTO



ACCIDENT PHOTO



ACCIDENT PHOTO



ACCIDENT PHOTO

