

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 | 31/08/2018 10:02 |
| Date Of Accident | 30/08/2018 20:00 |
| Exact Location Of Accident | PAYA LEBAR FILTER LANE TO PIE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SGJ3019S |
| Insured/Policyholder | |
| Name Of Registered Owner | LIM CHYE POH |
| NRIC No | S1658709E |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-90040182 |
| Alternative Phone No | Office-90040182 |

Vehicle Particulars

| | |
|--|-----------------------|
| Manufacturer | TOYOTA |
| Model | COROLLA ALTIS-1.6 (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 | 2100436665 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | LIM CHYE POH |
| NRIC No | S1658709E |
| Date Of Birth | 26/01/1964 |
| Occupation | INDOOR |
| Date Of Driving Pass | 04/11/1992 |
| Driving Experience | 25 YEARS AND 9 MONTHS |

| | |
|---|---|
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90040182 |
| Fax Number | |
| Contact Number | OFFICE-90040182 |
| EMail Address | NOEMAIL |
| Address | BLK 413 COMMONWEALTH AVE WEST #04-3019 |
| Postcode | 120413 |
| 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 | 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? | |
| 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

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 | SKF5489D |
| 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)

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: 31/8/18

Driver's Signature

(If driver is not the policyholder)
Date & Time:

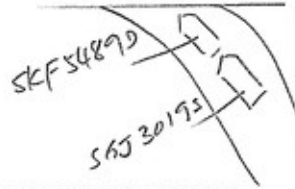
Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:



SKETCH PLAN

PIE




Paya Lebar Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

| | |
|--|-----------------------------------|
| LICENSE PLATE: S6J30195 | ACCIDENT DATE & TIME: 30-8-18 8Pm |
| CONTACT NUMBER: 90040182 | E-MAIL ADDRESS: |
| LOCATION: Paya Lebar filter lane to PIE | |
| <p>when I was driving along Paya Lebar Road filter lane to PIE, vehicle SKF5489D in front of me stop suddenly and I could not stop in time I hit the rear of SKF5489D</p> | |
| NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION | |
| Please state: | |
| <input checked="" type="checkbox"/> Claim Own Policy () Claim Third Party () Claim OD/TP at other workshop () Reporting Only | |

DECLARATION


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


 Policyholder's Signature
 Date & Time: 31/8/18

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


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


REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S1658709E**
 Name: **LIM CHYE POH**
 Birth Date: **26 Jan 1964**
 Issue Date: **23 Aug 2005**

0013531470

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1658709E


 Name: **LIM CHYE POH**
林 财 宝
 Race: **CHINESE**
 Date of birth: **26-01-1964** Sex: **M**
 Country of birth: **SINGAPORE**

516 SKW6102

HUI HUA CREDIT PTE LTD • TEL 6469 6611

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

| Class | Description | PASS DATE |
|---------|---|-------------|
| Class 3 | Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors / vehicles =< 2500 kg | 04 Nov 1992 |

NP 428A



376


 ARUC No: **S1658709E**
 Date of issue: **23-08-2005**

Address:
APT BLK 413 COMMONWEALTH AVENUE WEST
#04-3019
SINGAPORE 120413



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Lim Chye Poh
 Period of Insurance : 11 Nov 2017 To 10 Nov 2018
 Engine No. : 1ZRY237086
 Chassis No. : MR053REH104542609

Vehicle No. : SGJ3019S
 Policy No. : 2100436665-02
 Endorsement No. :
 Issued Date : 11 Oct 2017

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6 DUAL
 Engine Capacity/Tonnage : 1.598.00 CC Sum Insured : Market Value
 Driver Restriction : NA Off Peak Car : No First Year of Registration : 2015
 Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

as The Policyholder
 or Any other person who is driving on the Policyholder's behalf or with his/her permission.
 This Policy will indemnify the Policyholder or any authorized 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" if the 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, exhibition, motor sport, or any other use for which the vehicle is not designed or intended to be used.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 9 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 109) 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 - \$500 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Lim Chye Poh - \$500 (Own Damage)

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

Approved Reporting Centres/ Authorised Repairers (For claims related repairs)
 Any accident repairs to the vehicle must be carried out by one of our Approved Repairers. Within the first 3 years of the first registration of the vehicle in Singapore, you have the option of having the accident repairs carried out at the Sole Agents workshop.
 For other approved Reporting Centres/ Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6225 5200. 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: DBS 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. 109) Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

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AIG ASIA PACIFIC INSURANCE P.L.
 78 SHENTON WAY #07-15 AIG BUILDING
 SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Janile

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

78 Shenton Way #07-15 AIG Building 079120 | T: +65 6410 3000 | F: +65 6415 3723 | www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

24-HOUR AIG AUTO HOTLINE: +65 6338 6200

IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES

What can the 24-hour AIG Auto Emergency Hotline provide for you?

- Immediate assistance after an accident
- Emergency breakdown service
- Towing service (accident or non-accident related)
- Advice on Motor Claims procedures
- Medical Referral Assistance

If no one is injured in the accident:

- You are not required to make any police report
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s)
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident

If the accident involves injuries or damage to government property & vehicles, foreign registered vehicles or non-injury hit & run case:

- Report the accident to the police, providing full details of the circumstances of the accident
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s), if applicable
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident

What should I do in the event of an accident?

- Keep calm and move your car to a safe place
- Do not admit or discuss fault or blame with the other party(ies)
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident
- Submit With-Summons Court Spondonors from third party(ies) to AIG immediately

LOSS OF USE CAR REPLACEMENT BENEFIT

Applicable only if this benefit is included in your motor insurance. Please refer to your Policy Schedule for details. Policy terms and conditions apply. Please call our customer service hotline number (65) 6419-3000 for assistance.

The Certificate of Insurance (CI) should be produced without demand when collecting the Rental Car and the Rental Car Company reserves the right to verify the identity of the holder. The CI is the property of AIG and its use is subject to the terms and conditions contained in the Loss of Use Endorsement under the policy issued to the policyholder.

Steps to activate Loss of Use Car Replacement Benefit and Important Information

1. To activate your loss of use car replacement, please contact the Rental Car Company (listed below) after filing/reporting your accident claim.
2. Your rental car will be made available within 5 working hours of activation with the Rental Car Company
3. At the time of collection of the Rental Car, the original insurance policy and schedule issued by AIG, a copy of the Accident Report from the Authorised Workshop must be produced.
4. The number of days is based on the period your vehicle is in the repair workshop unless the number of days of loss of use entitlement is stated in the Policy
5. Rental cars are strictly for use in Singapore only.
6. Extension of rental beyond repair period approved by AIG surveyor will be chargeable by the Rental Car Company on per day basis.
7. Upgrade of Rental Car is available upon request subject to additional charges by the Rental Car Company.
8. The rental car will be delivered (within Singapore), and **MUST BE RETURNED BACK TO the Authorised Workshop** upon collection of your accident car.

Rental Car Company: **BKW Rent A Car Pte. Ltd.**

Activation Hotline: **67387777**

120 Lower Delta Road #02-15 Cendex Centre Singapore 169206

Operation Hours: **Monday to Friday: 9am to 6pm Saturday (Half Day): 9am to 1pm**

*The Rental Car Company's Terms & Conditions apply in a refundable security deposit, excess liability for the Rental Car, Collision Damage Waiver, etc.

IMPORTANT NOTICE

If you sell your motor vehicle, this Notice is **IMPORTANT** and **MUST** be complied with. Policyholders are hereby warned that under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 99), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

The Policyholder is further warned that on the sale of a motor vehicle, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.88).

This Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agrees to cover the new owner, they will issue a new Certificate of Insurance in the new owner's name. The premium chargeable may vary according to the new owner's profile.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

