### SINGAPORE ACCIDENT STATEMENT

## **IMPORTANT NOTICE**

Occupation

**Date Of Driving Pass** 

**Driving Experience** 

- 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 <u>truthful and accurate</u> 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 insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid

<ol> <li>By the loagement of this report to the insurers, you nereby conseaforesaid.</li> </ol>	3 · · · · · · · · · · · · · · · · · · ·
	ACCIDENT STATEMENT
Date Of Report	03/08/2018 08:59
Date Of Accident	02/08/2018 14:05
Exact Location Of Accident	ALONG LAVENDER ST.(CROSS JUNCTION) TO BALESTIER RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBG6604H
Insured/Policyholder	
Name Of Registered Owner	CHEE KONG ELECTRIC CO(PTE) LTD
Co Reg No	A195500145Z
Email Address	CHEEKONG1955@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	Office-90056374
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350-2.5 5AT 5DR EURO V (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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700057177
Cover Note Number	
Driver	
Name of Driver	LOW CHIN YONG, JARON
NRIC No	S9238210I
Date Of Birth	15/10/1992

**OUTDOOR** 

27/09/2011

6 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90056374

Fax Number

**Contact Number** 

EMail Address JARONLOW@HOTMAIL.COM

Address APT BLK 110D PUNGGOL FIELD

#10-606

Postcode 824110

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PAID DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

\_

Insurance Company of Driver's Own Vehicle

-

NO

NO

NO

### **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.

Number of Passengers (Including Driver) 1

### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

### Circumstances of Accident

### SEE ATTACHED SKETCH PLAN

## Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SLS653Z

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver LOH KELVIN
NRIC/Passport Number S7600183I
Contact Number 88627681

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

### SKETCH PLAN

#### 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
- 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
- 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
- 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.
- 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. TOLUTION INDUSTRIAL PTE. LTD

9 UBI ROAD 4

SINGAPORE 4088 X- 6846 7489

Policyholder's

Date & Time

Driver's Signature (If driver is not the polid

Date & Time:

porting Centre Personnel's Signature

RIC/FIN No.

DECLARATION

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

Policyholder Streature

Driver's Signature (If driver is not the policyholder) Date & Time: 19 UBI ROAD 4 SINGAPORE 408623 YEL: 6400 9660 FAX: 6846 7483

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

Name of Polloyholder : Chee Kong Electric Company, Private: Emiled.

Vehicle No.

: GBG6804H : 1700057177

Engine No.

Pariod of Insurance : 25 Sep 2017 To 24 Sep 2018

Policy No. Endorsement No.

: YD25426669A Chassis No. : JN1MC2E26Z0009334

Issued Date

: 18 Oct 2017

ABOUT THE COVER Make/Model

: NISSAN NV350 PANEL VAN

Engine Capacity Tonnage . 1.5 Tonnage

Sum insured . Markat Value

First Year of Registration . 2017

Oriver Restriction

· NA

Off Peak Car No.

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive":

is effective fact was a viving in the Porty regard may should be a leading to a final Purple. The introduction on the property of the standard may also be a second to the standard may be a

THE STATE OF THE S

Age Condition

: All Age Condition

Limitation as to use:

To full of the interpretable of the presence of the presence of the specific o

United by the service of the service of the figure service. The Party Resident Commensation, and the services of the services of the Australian Agents and the services of the Australian Agents and the services of the services of the services of the Australian Agents and the services of the services of the Australian Agents and the services of the services of the Australian Agents and the services of the services of the Australian Agents and the services of the services of the Australian Agents and the services of the services of the Australian Agents and the services of the services

EXCESS

Section 1 Fire - SG Dan Dankge - 3305 Firem - \$3 Micad Cham - \$3

Section 2 Process Declare - 50

Windspreen: 11-23

Named Driver and Excess ... here to the

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

Diting the trigles in Asia Production Plant displace of the Comments of Separate Programmes and Comments of Separate Programmes and Comments of Separate Programmes Comments of Separate Progr

For some Approved Recomming Control of A provided Resources organic contact our 25-mail solutions among on the 5-9746-5201. Approved by your surviver to A.G. avoid to control or 4.9. 3 may sent the outland A.G. 3 S.D. Pormi Turks or Groupe Pray.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

"Vice negety cares, that the policy as youth this Certificate of insurance relates as itsis for inacconducte with the provisions of the Notice Vehicles Philo Party Risks and Compensation. Act 'Cop. 1899, Part for all the Risks Transport Act. 1997 (Malayson, and Mater Menrick, Third Part, Plays, Risks, 1998) (Malayson).

0500610411

TAN CHONG CREDIT PTE LTD-TSH 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 ANSPINOTOR

Underwritten by AiG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

**ICDL** 

## \$92382101



LOW CHIN YONG, JARON

刘俊

CHINESE

15-10-1992 M

Country of sixth SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S 9 2 3 8 2 1 0 1

LOW CHIN YONG, JARON

8m Date: 15 Oct 1992 Issue Date: 27 Sep 2011

4118028



€ No. S9238210I



19-10-2007

APT BLK 110D PUNGGOL FIELD #10-606 SINGAPORE 824110

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

NP 428A































# MILEAGE













