## 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 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.	ion to the distining of the report at the control and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	17/09/2018 19:31
Date Of Accident	12/09/2018 11:30
Exact Location Of Accident	653 YISHUN AVE 4 HDB CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLR171C
Insured/Policyholder	
Name Of Registered Owner	YANG ZHIHONG
NRIC No	S2587978C
Email Address	IMHONGYUN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92315581
Alternative Phone No	OTHERS-92315581
Vehicle Particulars	
Manufacturer	SUBARU
Model	IMPREZA-2.0 5D (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

for repair to your vehicle?

If No. Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

**Insurance Company** 

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

**COMPREHENSIVE** Type Of Coverage

Fleet Policy

Policy Number 1700032889-01

Cover Note Number

Driver

Name of Driver WONG HONG YUN NRIC No S25879778C

Date Of Birth 23/10/1991 Occupation **INDOOR** Date Of Driving Pass 29/07/2011

**Driving Experience** 7 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-92315581

Fax Number

Contact Number OTHERS-92315581

**EMail Address** IMHONGYUN@GMAIL.COM Address BLK 111 COMMONWEALTH CRESCENT

#08-302

Postcode 140111

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

**General Information of the Accident** 

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 0

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

JURONG POLICE DIVISIONAL HQ ( 'J' DIVISION )

NO

YES

Police Station Address ROAD: NO. 2 JURONG WEST AVENUE 5, POSTCODE: 649482,

COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-7910000 - FAX NO: 68965649

Was notice of intended Prosecution given? NO

If Yes, against whom?

### **Circumstances of Accident**

REFER TO SKETCH PLAN AND POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Was there any audio recorded?





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20180917/7015

## REPORT OF A TRAFFIC ACCIDENT

Date/Time 17/09/201	Report M 8 22:09	ade:	Vide Report No.: J/20180913/7038	Station Diary No.:
Informani	's Particu	lars		
Name of I WONG H	nformant: ONG YUN		Address: APT BLK 111 COMMONWEA SINGAPORE 140111	LTH CRESCENT #08-302
ID Type / NRIC NO	ID No.: / S913893	5E	Contact No.: Home/Office:	Mobile: 92315581
Nationality SINGAPO	/: PRE CITIZE	EN .	Email: imhongyun@gmail.com	
Sex: Male	Age: 26	Date of Birth: 23/10/1991	Type of Informant: Vehicle Owner	
Race: Chinese			Language: English	Institution / School Name:
Occupation Pharmacis	n: st (dispens	ing)	Driving Licence Information: Class:	Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/09/2018 11:30	Type of Location: Car Park
Location: YISHUN AVE	NUE 4			
Weather: Sunny		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
	ion:			Anyone conveyed by

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJJ3607J	Car			Silver		0
SLF6400R	Car		MALOURO DE CONTRACTOR DE CONTR	Silver		0
SLR171C	Car	SUBARU	Impreza	Silver	Slightly Damaged	0

Details of Vehicle Insurance		
Vehicle No. Insurance Compan	ny Insurance N	o Effective Expiry Date



T/20180917/7015

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20180917/7015

#### **CONTINUATION OF REPORT**

Details of Vo	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLR171C	AIG ASIA PACIFIC INSURANCE PTE.	1700032889-01	28/07/2018	27/06/2019
	LTD.			

<b>Details of Perso</b>	n Involved					
Any Pedestrian II	nvolved: No					
No. of Pedestriar	ns Injured: NIL		Use of Peo	destriar	Cross	ing: NA
Vehicle Owner						
Name	WONG HONG YUN		-	ID No	•	S9138935E
Related Vehicle	NIL	-		Conta	ct No.	92315581
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disch	narge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

## Brief Details.

Hit and run accident. I parked my car SLR171C at my season parking at 653 Yishun Ave 4 car park and suffered a hit and run. I initially parked around 9am. When I returned to my car at around 8pm, I did not notice the damage immediately and drove home. I only realised the car dents/scratches the next morning before I was about to drive to work near 653 Yishun Ave 4. The car suspect is SJJ3607J as it was caught in my dash cam at around 1130am. There was another witness to this incident as there was a car that was following behind the suspect. The witness car is SLF6400R. If you require the video footage, I have it saved in my laptop.





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No: T/20180917/7015

**CONTINUATION OF REPORT** 

Sketch Plan		1.74		
Informant is not	able to prov	ide sk	etch	plan

NP168

te/Time: /09/2018 22:09
assification Of Case:
Ξ.

# Singapore Accident Statement

Singapore Accident States	
Accident Date & Time: 12/4/18 unsure of the	e 11.30
Accident Location: 653 John Ave 4 HDB	(as finit Make/Model: Subana Impreza
Vehicle Number: SLR MIC	Make/ivioder
Policyholder Name: Yong Thinong	Mobile: 923/5581
NRIC: 52587978C	Mobile. 425()
Email: immonggan@gmail.com	
Insurance Company: MG	Cover Note:
Policy Number: 14000 32889 - 01	Theft )
Policy Coverage: Comprehensive	rd Party( ) Third Party Title 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
State Action Taken. Claim 6 Why 5	
Driver Name: Word Hong Fun	Mobile: 0.23,5581
NRIC: Saizsazie	Driving Pass Date: 2011/Jul /29
Date Of Birth: 23/10/71	Occupation: Indoor( ) Outdoor( )
Gender: Male( ) Female( )	Occupani
Address: 111 commonweath cresion - 1 08-302	Yes( ) No(V)
Is driver an employee of the Insured's Company:	165( ) 2.00
If No, Relationship of the Driver with the Insured: Owner( ) Spouse( ) Friend( ) Relative	( ) Children( ) Sibling( )
	thers( )
Road Surface: Dry() Wet() O	thers( )
Was any foreign vehicle involved in this accident?	Yes( ) No()
Was any body injured in the Accident?	Yes( ) NO( )
Was there any video captured by Car Camera?	Yes() No()
Number of Passengers (Including Driver):	T. Description
Was the accident reported to the police?	Yes( ) No( ) Attach Police Report, if any
3 <sup>rd</sup> Party Name:	
Vehicle Number: 4 SJJ 3607 S	Make & Model:
NRIC:	Mobile:
Witness Details (if any): SLF 6400 R	
Other Details (if any):  Refer to poll(	ce report
The fact was profes	- 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

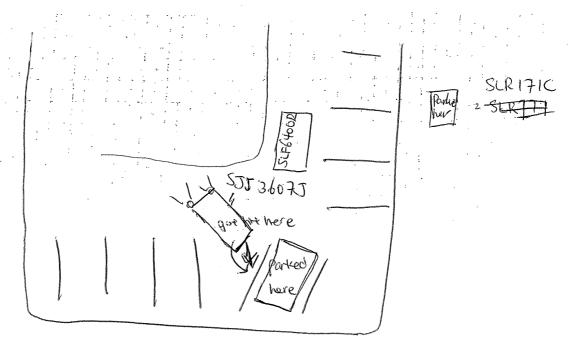
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts 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 companies.
- 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 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 :

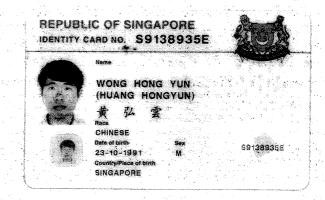
- (a) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 yers/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 invoive 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 yers/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 yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

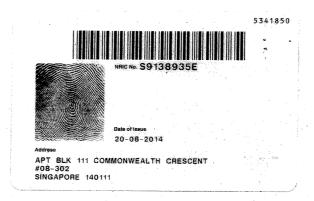
Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan



3 1	. 8 علمہ:۵۰	Can a without	0. 1	Amb P	Jana Danich	A lost Det	652	NW/EIF	A110 4	ard	CONO D
-	Part di httd nan a	mary i major	Vorkeo	Det Sen	a da done	O COLERO	01.3	realsed	the do	is onte	er who
	Tibels Che	and the co	ir the	(Cerye	400 (00)	26.00.30.00.	<u> </u>			<u> </u>	
· · · · · · · · · · · · · · · · · · ·											
			····								<del></del>
	· · · · · · · · · · · · · · · · · · ·										
						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			W		
		· · · · · · · · · · · · · · · · · · ·			<del></del>						
	· · · · · · · · · · · · · · · · · · ·	<del></del>		<del></del>	<del></del>		<del>,</del>				······································
	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·				······································					
				<del></del>							
				.·							
			<del></del>		······································				7.		
		······································									***************************************
			· · · · · · · · · · · · · · · · · · ·	·							
				<del> </del>	······································					******	
			<del>'</del>								
	**************************************	, · · · · · · · · · · · · · · · · · · ·			<del>,</del>						
	.,	· · · · · · · · · · · · · · · · · · ·			<del></del>				Andrew Andrews	***************************************	
	· · · · · · · · · · · · · · · · · · ·				····· ;····						***************************************
				<del></del>						· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·			<del></del>		J			······································	() · · · · · · · · · · · · · · · · · · ·	
<u> </u>			<del></del>								·
		······································	<del></del>								
<del>-</del>			<del></del>								
	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del>;</del>		——————————————————————————————————————	.,,,					· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·										· · · · · · · · · · · · · · · · · · ·
		/									
	<del></del>	***************************************		· i							
	· · · · · · · · · · · · · · · · · · ·		<del></del>								
	······································		<del> , i</del>	<del></del>							
		····	<del></del>		<del></del>					······································	······································
<del></del>				<del>,</del>							
······································										***************************************	
<del></del>	<del></del>					····					· · · · · · · · · · · · · · · · · · ·
<del></del>											
					······································		,		<del></del>	***************************************	
ation	oregoing particu	ulars are true in	every res	necf							
CA) (40 12) (40 1		mais are li de ifi	Λ						$\bigcap$		
			Just	1	5/9/18				1/2	$4 \wedge$	
			11 -21						1,70	1/	







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

Class 3 Motor Cars < 3000kg with =<7 passengers, exclusive 13 Sep 1997 of the driver; and other motor vehicles << 2500kg

NP 428A



3 1 7 3 9 0 4





15-07-2000

Date: 06-01-2005 No: 4960892

# REPUBLIC OF SINGAPORE





YANG ZHIHONG

杨志红

CHINESE

18-11-1967 F Courty of Steen



# **CERTIFICATE OF INSURANCE**

## SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Yang ZhiHong

Period of Insurance

: 28 Jul 2018 To 27 Jul 2019

Engine No.

: FB16Y685735

Chassis No.

: JF1GT3KC5HG006383

Vehicle No.

: SLR171C

Policy No. Endorsement Nó.

: 1700032889-01

Issued Date

: 29 Jun 2018

#### **ABOUT THE COVER**

Make/Model

: SUBARU Impreza 1.6 i-s

Engine Capacity/Tonnage: 1,600.00 CC Driver Restriction

Sum Insured : Market Value

- 12:16a - 77.5a

First Year of Registration : 2017

Off Peak Car : No

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.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised 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, reliability trial or speed-testing, 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

\* 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

## **EXCESS**

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Yang ZhiHong - \$800 (Own Damage)

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

1.Motor Image Enterprises Pte Ltd. Add: 19 Lorong 8 Toa Payoh Singapore 319255 64170100

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. 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: MayBank

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, 1959 (Malaysia).

0500619230

TAN CHONG CREDIT SUBARU-FLK 911 BUKIT TIMAH ROAD TAN CHÔNG MOTOR CENTRE SINGAPORE 589622 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building \$079120 | T:+65 6419 3000 | F:+65 6415 3723 | www.aig.com.sg













# **Driving License**









