

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	28/09/2018 10:19
Date Of Accident	27/09/2018 12:05
Exact Location Of Accident	KK HOSPITAL BASEMENT CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKX1325A
Insured/Policyholder	
Name Of Registered Owner	SOH CHIN TECK
NRIC No	S6923794J
Email Address	STEPSOH69@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96869238
Alternative Phone No	Others-96869238

Vehicle Particulars	
Manufacturer	SUBARU
Model	FORESTER 2.0I-L
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	2100440669-02
Cover Note Number	

Driver	
Name of Driver	SOH CHIN TECK
NRIC No	S6923794J
Date Of Birth	12/07/1969
Occupation	OUTDOOR
Date Of Driving Pass	22/07/1994
Driving Experience	24 YEARS AND 2 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96869238
Fax Number	
Contact Number	OTHERS-96869238
EEmail Address	STEPSOH69@GMAIL.COM
Address	BLK 258A COMPASSVALE ROAD #06-557
Postcode	541258
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?	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: : FLORENCE KANG Gender: : Female
Passenger 2	Name: : DAMIAN SOH Gender: : Male

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?	YES
Remarks/ Reasons:	FILE TOO LARGE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDB3288K
Vehicle Make/Model/Colour	AUDI
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	KOH NAN YANG
NRIC/Passport Number	S6942029Z
Contact Number	82283712
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan


SKETCH PLAN


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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: 28/9/18


Driver's Signature
(If driver is not the policyholder)
Date & Time: 28/9/18


Reporting Centre Personnel's Signature
Name: Jenny Lim
NRIC/FIN No.: S6927273H

Diagram illustrating a two-way merge sort process:

- Two boxes represent the initial segments: **SX1325A** and **SD83288K**.
- A double-headed arrow between the boxes is labeled **bumpers list**.
- A vertical line labeled **hump** separates the initial segments from the final merge stage.
- A vertical line on the far right is labeled **stop line**.
- A large arrow at the bottom points to the right, labeled **Direction**.

Refer to attachments -

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

Reporting Centre Personnel's Signature
Name: Jenny Lim
NRIC/FIN No.: S6927273H

Accident Report

Date & Time of accident: 27th Sep 18 @ about 12pm

Place of accident: KK Hospital Basement Carpark

My Car Registration number: SKX1325A

Claiming Party Car Registration number: SDB3288K

The incident happened at around 12pm when I was leaving the carpark driving my Subaru Forester at about 5 to 10 km/h. I was distracted by noises on the right that I did not realise the front car (SDB3288K) was stopping. I felt some pushed over in the split second. Consequently, my bumper touched his bumper. There was no injury at that point incident happened. Please see submitted video footage for further clarification.

We have assessed and realized his car bumper has a slight dent and my car number plate was slightly dent without significant damage. Attached with photos for verification.

We have exchanged our contacts and car license. I came to know him as Mr Koh.

I have suggested if we could have a private settlement and I am willing to pay for bumper fix. He could not make shift decision as he claimed that his main concern was about his previous injury. I could see stitches on his neck area. He claimed that he was more worried about the incident may affect his injury condition. My query to him whether he is fit to drive since he had claimed about his own injury earlier. Before we leave the car park, he told me to wait for his call on his decision later.

About 3.30 pm, I have received a call from him. He told me on the phone that he has went to his preferred workshop to assess his car and did mentioned the estimated of \$800 to \$1000 for the repair. Without further chance to negotiate, he mentioned that he would prefer the case to be handle by Insurance.



Driver's NRIC + Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S6923794J**
 Name: **SOH CHIN TECK**
 Birth Date: **12 Jul 1969**
 Issue Date: **09 Jul 2003**

000642721K

REPUBLIC OF SINGAPORE


 IDENTITY CARD NO. **S6923794J**
 Name: **SOH CHIN TECK**
 苏振德
 Race: **CHINESE**
 Date of Birth: **12-07-1969** Sex: **M**
 Country of Birth: **SINGAPORE**

YOU ARE PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms
 PASS DATE: **22 Jul 1994**

NP 428A

Licence No: S6923794J

1056511


 NRIC No: **S6923794J**

Blood Group: **B+** Date of issue: **19-06-1993**

APT BLK 258A COMPASSVALE ROAD #06-557
 SINGAPORE 541258
 NRIC No: **S6923794J** Date: **20-10-2001** No: **4160185**

Certificate of Insurance



Name of Policyholder : Soh Chin Teck
Period of Insurance : 27 Nov 2017 To 26 Nov 2018
Engine No. : FB20Y094084
Chassis No. : JF1S15KC5FG059989

Vehicle No. : SKX1325A
Policy No. : 2100440669-02
Endorsement No. :
Issued Date : 25 Oct 2017

Make/Model	: SUBARU FORESTER 2.0I-L
Engine Capacity/Tonnage	: 1,995.00 CC
Driver Restriction	: NA

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2015
Insuring with COE/PARF : Yes

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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above

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 Optional

* Limitations imposed inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 103) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Section 1
Fire - \$0 Own Damage - \$2600 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

Soh Chin Teck - \$2000 (Own Demand)

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

Approved Reporting Centres/ AIC Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorized Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having Pre-accident repairs carried out at the Sole Agent's workshop.

For other Approved Reporting Centres/AIG Authorised Repairs, please contact our 24-hour accident emergency hotline at +65 6358 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: HL Bank

WwI 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).

0502881000

TAN THIAM POH JOSEPH
BLK 127 TAMPINES STREET 11 #06-442
SINGAPORE 521127

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Manile
AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

Accident Photo



Accident Photo



Accident Photo



Chassis Number



TP Damaged Photo



TP Damaged Photo



TP Damaged Photo

