

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	25/09/2018 15:00
Date Of Accident	25/09/2018 08:25
Exact Location Of Accident	JUNCTION OF MARYMOUNT LANE & UPPER THOMSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB4443B
Insured/Policyholder	
Name Of Registered Owner	CHONG SEOW HACK
NRIC No	S0213484E
Email Address	CHRISTINACHONGSH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81110045
Alternative Phone No	OTHERS-81110045

Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER-2.0 I-L (SJ) (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	THIRD PARTY
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	2100460170-02
Cover Note Number	

Driver

Name of Driver	KWA SU AI
NRIC No	S8602852B
Date Of Birth	11/02/1986
Occupation	INDOOR
Date Of Driving Pass	23/04/2005
Driving Experience	13 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81110045
Fax Number	
Contact Number	OTHERS-81110045
Email Address	CHRISTINACHONGSH@GMAIL.COM

Address	98 HUA GUAN AVENUE
Postcode	589195
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	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?	NO
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 Sketch Plan

Attachment(s)

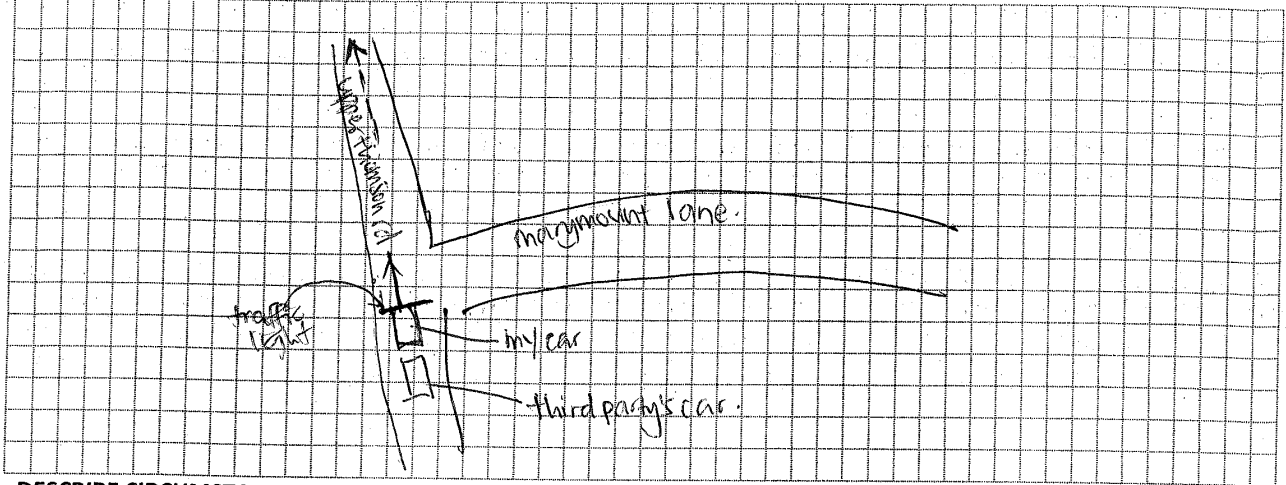
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

SINGAPORE ACCIDENT STATEMENT

AXA

Accident Date & Time: 25 Sep 2018 / 8-25 am		
Accident Location: Traffic light at junction of Marymount Lane and Upper Thomson Rd.		
Vehicle Number: SLB 4443B	Make/Model: Subaru Forester 2.0I-L	
Policy Holder Name: Chong Seow Hock		
NRIC/ROC: 0213484E	Mobile: 8111 0045	
Email: christina.chongsh@gmail.com		
Insurance Company: AIG		
Policy Number: 2100460170-02	Policy Period: 8 Apr 2018 - 7 Apr 2019	
Policy Coverage: Comprehensive (✓)	Third Party () Third Party Fire & Theft ()	
State Action Taken: Claim Own Policy () Claim Third Party (✓)		Reporting Only ()
Driver Name: KWA SU AI		
NRIC: S8602852B	Mobile: 81017772	
Date Of Birth: 11 / 02 / 1986	Driving Pass Date: 23 / 04 / 2005	
Gender: Male () Female (✓)	Occupation: Indoor (✓) Outdoor ()	
Address: 98 HUA GUAN AVE S (S89195)		
Is driver an employee of the insured's company: Yes () No (✓)		
If No, Relationship of the driver with the insured:		
Owner () Spouse () Friend () Relative () Children (✓) Sibling () Hirer ()		
Weather Conditions: Clear (✓) Raining () Others ()		
Road Surface: Dry (✓) Wet () Others ()		
Was any foreign vehicle involved in this accident? Yes () No (✓)		
Was anybody injured in the Accident? Yes () No (✓)		
Was there any video captured by Car Camera? Yes () No (✓)		
Number of Passenger (Including Driver): 0 1		
1)	2)	3) 4)
Was the accident reported to the police? Yes () No (✓) "attach Police Report, if any"		
3 rd Party Name: LI ZHONG CHENG		
Vehicle Number: SJC 8013B	Make & Model:	
NRIC: S 7782170H	Mobile No: 9150 0918	
Witness Details (if any): Nil		
NAME: Nil	NRIC: nil	Mobile No: nil
Other remark: if any		

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My
was stopping car at traffic light when it turned amber. Car was nearly at a stop when I heard the third party's car honking from behind for three-four seconds and hearing screeching, before ~~my~~ I felt my whole car jerk forward upon impact by the third party's car. My car was thrown forward past the stop line as a result.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.

- | | |
|-------------------------------------|----------------------------------|
| <input type="checkbox"/> | - Reporting Only |
| <input type="checkbox"/> | - Claim OD |
| <input checked="" type="checkbox"/> | - Claim TP |
| <input type="checkbox"/> | - Claim OD/ TP at other workshop |

DECLARATION

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

*RLi 25/9/18
11:14am*

Policyholder's signature
Date & Time

*RLi 25/9/18
11:14am*

Driver's Signature
(if driver not the policyholder)
Date & Time

[Signature]

Reporting Centre Personnel's Signature
Name: *Jeff Teh*
Nric/Fin No.

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:

25/9/18
11:14 am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

25/9/18
11:14 am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jeff Teh



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Chong Seow Hack
 Period of Insurance : 08 Apr 2018 To 07 Apr 2019
 Engine No. : FB20Y205351
 Chassis No. : JF1SJ5KC5GG067711

Vehicle No. : SLB4443B
 Policy No. : 2100460170-02
 Endorsement No. :
 Issued Date : 01 Mar 2018

ABOUT THE COVER

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 : 2016
 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 included under these headings.

EXCESS

Section 1

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

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Chong Seow Hack - \$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: OCBC Bank Ltd

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).

0500619200

TAN CHONG CREDIT SUBARU-WSE
 911 BUKIT TIMAH ROAD
 SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

Cally-VV Tsai

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8602852B**



Name
**KWA SU AI /
(KE SU'AI)**
柯素爱

Race
CHINESE

Date of birth
11-02-1986


Country/Place of birth
SINGAPORE

Sex
F

S8602852B



REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number **S8602852B**


Name
**KWA SU AI
(KE SU'AI)**

Birth Date **11 Feb 1986**


Issue Date **23 Apr 2005**

001336663H

5633707



NRIC No. **S8602852B**



Date of Issue
10-08-2016


Address
**98 HUA GUAN AVENUE
SINGAPORE 589195**

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

	PASS DATE
Class 3 Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors / vehicles \leq 2500 kg	23 Apr 2005

NP 428A

Licence No: **S8602852B**



Identification Card



Identification Card



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

IM 7 Regulation 6(5) and (5A)



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r 133)
Regulations

PERMIT

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re-entry / re-entries until
the travel document is
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her competent authority
ny law, or
ontroller of Immigration,
aving in an undesirable
not limited, to behaviour
onal or public interests,
peace, or is prejudicial
ic welfare)
is authorised to re-enter
sidence so long as this

Controller of Immigration,
Singapore.

document. No signature
does not establish the
(holder.)

Description of holder

UIN/NRIC No: **S7762170H** Sex: **MALE**
Name: **LI ZHONGCHENG**

Alias:

Date of Birth: **12/12/1977**
Place of Birth: **CHINA**

Passport/Travel Document

Type: **INTERNATIONAL PASSPORT**
Place of Issue: **SINGAPORE**
Number: **G35838552**
Issue Date: **22/10/2009**
Expiry Date: **21/10/2019**

Re-Entry Permit

Number: **REP/EN/080481/14**
Issue Date: **30/06/2014**
Valid Till: **30/06/2019**
Place of Issue: **SINGAPORE**



EP) is issued to you based on the information provided vide application
which you have truthfully declared to be so or for which you had consented for a proxy to

Accident Photo



Accident Photo



Accident Photo



Accident Photo



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