

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 09:56
Date Of Accident	28/09/2018 07:50
Exact Location Of Accident	SIXTH AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF8899X
Insured/Policyholder	
Name Of Registered Owner	CHIA KHONG SHOONG
NRIC No	S7161901Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96172237
Alternative Phone No	Office-96172237

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200
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	2100398206-03
Cover Note Number	

Driver

Name of Driver	HO THIM MING HEATHER
NRIC No	S7062286F
Date Of Birth	10/02/1970
Occupation	INDOOR
Date Of Driving Pass	01/06/1991
Driving Experience	27 YEARS AND 3 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96172236
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	90 NAMLY AVE
Postcode	267659
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	2
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)	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

I WANTED TO OVERTAKE THE STATIONARY BUS (CAR B) WHILE I WAS FILTERING OUT. ANOTHER BUS FROM THE OPPOSITE DIRECTION SPED UP, I THEN STEERED MY CAR TOWARDS THE LEFT BUT GRAZED INTO THE RIGHT REAR CORNER OF THE BUS.

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	SMB3029J
Vehicle Make/Model/Colour	TOWER TRANSIT BUS
Details Of Properties	
Vehicle Category	BUS
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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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


Driver's Signature

(If driver is not the policyholder)
Date & Time

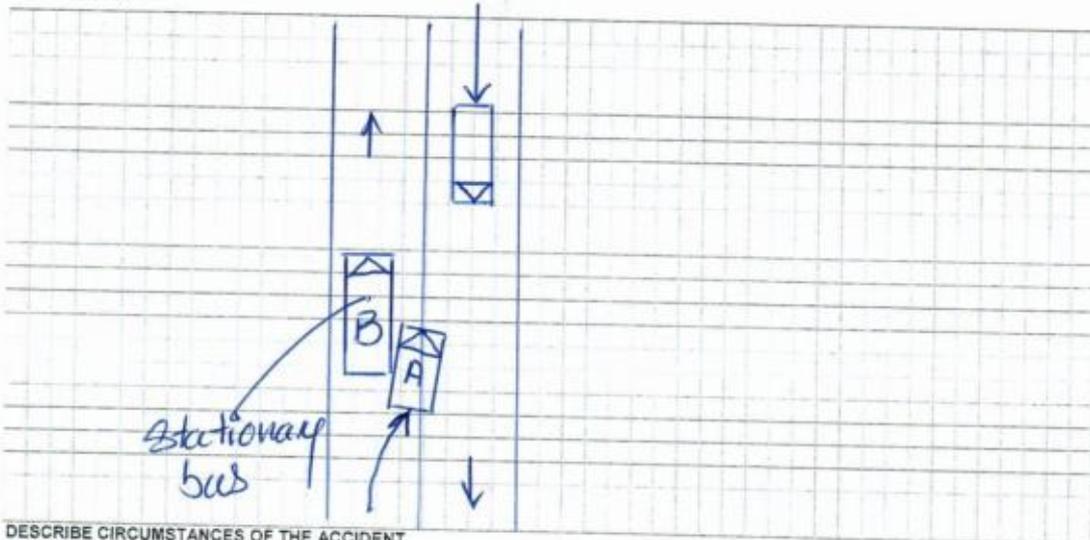
Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 0872 1272
Email: chanhoe.yik@cyclecarrriage.com.sg

Reporting Centre Personnel's

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I wanted to overtake the stationary bus (car B), while I was filtering out, another bus from the opposite direction sped up, I then steered my car towards the left but grazed into the right rear corner of the bus.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
Date & Time

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

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 MP: 9186 5109 Fax: 6872 1272
Email: yik@cyclecarriage.com.sg
Reporting Centre Personnel's
Name:
NRIC/FIN No.:

Att: Yip



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder	: Chia Khong Shooing	Vehicle No.	: SJF8899X
Period of Insurance	: 05 Jan 2018 To 04 Jan 2019	Policy No.	: 2100398208-03
Engine No.	: 27482090301535	Endorsement No.	:
Chassis No.	: WDD2120342B111151	Issued Date	: 28 Nov 2017

ABOUT THE COVER

Make/Model	: MERCEDES BENZ E200 2.0 CGI SEDAN		
Engine Capacity/Tonnage	: 1,991.00 CC	Sum Insured	: Market Value
Driver Restriction	: NA	Off Peak Car	: No
		First Year of Registration	: 2015
		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 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" ("YIOR") if You are or Your Authorized 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, retelling 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 2000cc

* 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)

Chia Khong Shooing - \$800 (Own Damage)

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

1 Euro Service Center (For accident reporting only) Add: 330 Ulu Road 2 Singapore 416200 6/412330
 2 Pandan Loop Service Center - Body Care & Repair (For accident repair & accident reporting) Add: 188 Pandan Loop Singapore 128370 87778068
 For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6203. 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

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, 1989 (Malaysia).

0500660348

CYCLE & CARRIAGE - VSTANG
 258 ALEXANDRA ROAD
 SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. J. Yip
 AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORIZED REPRESENTATIVE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7062286F



Name

HO THIM MING HEATHER

Race

CHINESE

Date of birth

10-02-1970

Country of birth

MALAYSIA

Sex

F

S7062286F

FOR C&C USE ONLY

8661067



NRIC No. S7062286F



Nationality

MALAYSIAN

Date of issue

15-10-2004

FOR C&C USE ONLY

90 NAMLY AVENUE
SINGAPORE 267659

NRIC No: S7062286F

Date: 24/11/2009

No: 6383344

Accident Photo



Accident Photo



Accident Photo



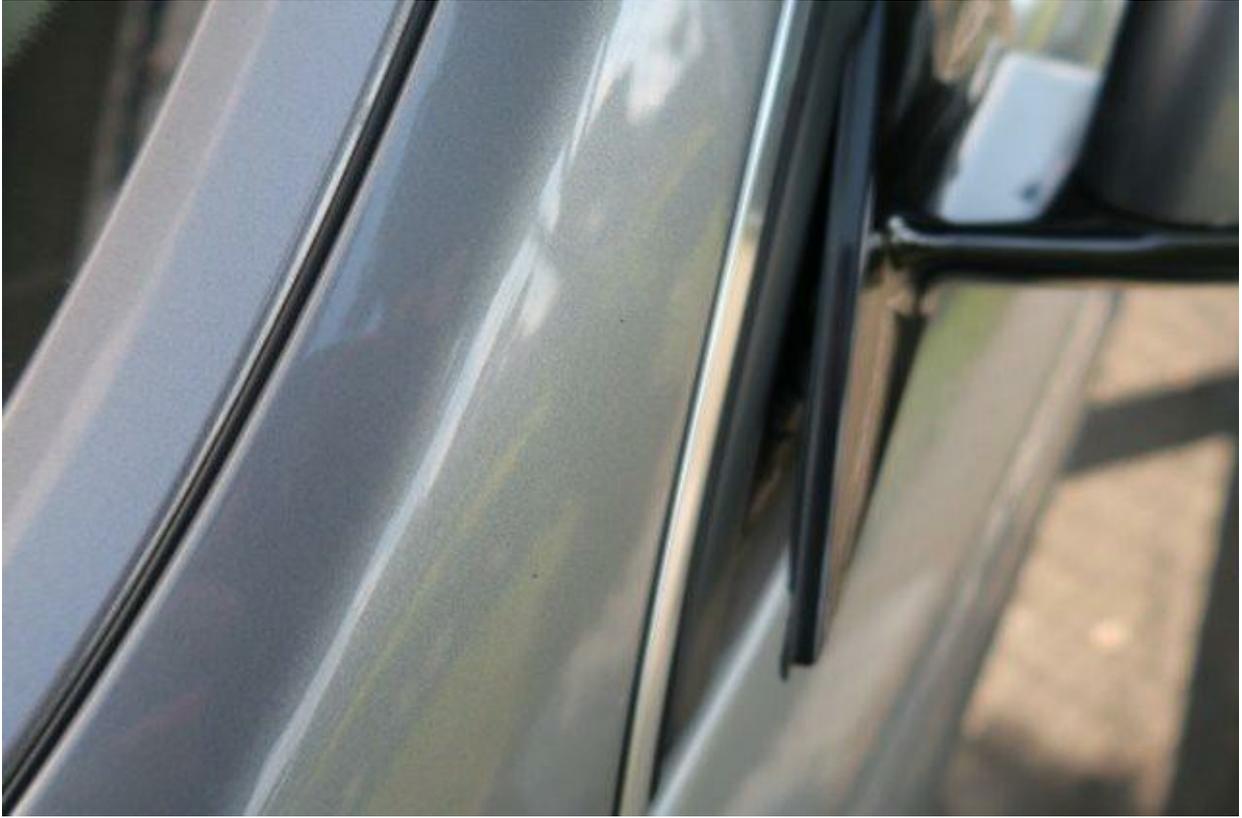
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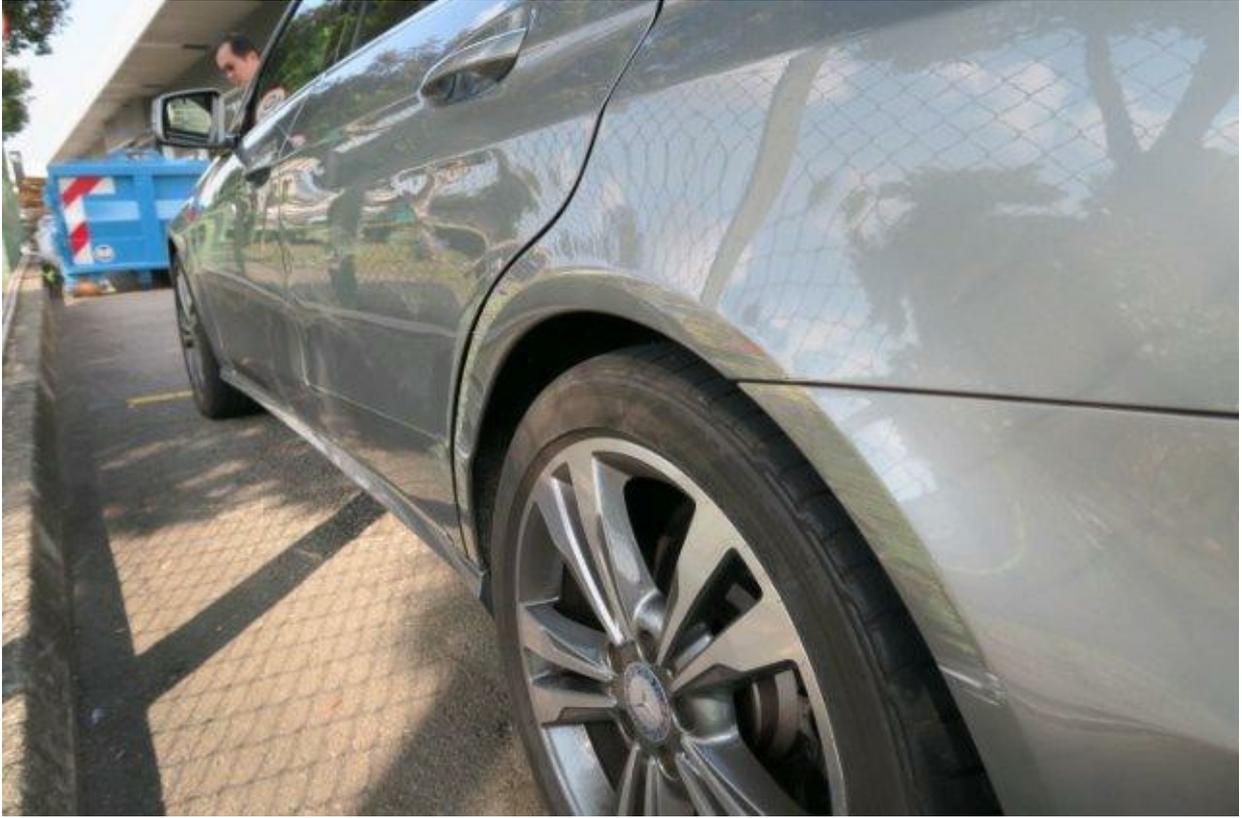
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