

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	01/10/2018 11:23
Date Of Accident	29/09/2018 14:15
Exact Location Of Accident	11 UNITY STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKK8044H
Insured/Policyholder	
Name Of Registered Owner	LIM HUIFANG JOANNE
NRIC No	S8220016I
Email Address	LIM_JO00@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97612787
Alternative Phone No	Others-97612787

Vehicle Particulars	
Manufacturer	LAND ROVER
Model	RANGE ROVER EVOQUE 2.0 AT ABS
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?	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	2100500009-01
Cover Note Number	

Driver	
Name of Driver	LIM HUIFANG JOANNE
NRIC No	S8220016I
Date Of Birth	22/06/1982
Occupation	INDOOR
Date Of Driving Pass	18/03/2009
Driving Experience	9 YEARS AND 6 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-97612787
Fax Number	
Contact Number	OTHERS-97612787
EMail Address	LIM_JO00@YAHOO.COM
Address	29 ANCHORVALE CRESCENT #04-40
Postcode	544658
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	SIDE SWIPE
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.	NO
Number of Passengers (Including Driver)	2
Passenger 1	Name: : JERMAINE LIM Gender: : Female

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

The incident happened on Saturday 29/9/2018 between 2.15pm - 2.17pm. My vehicle was parked stationary along 11 Unity Street. I wanted to move out of my parking lot. I checked for traffic and saw that all was clear and proceeded to reverse my vehicle to move out. When I began to move out, taxi no. SHB 9946X approached from behind at a very fast speed and collided into the front right side portion of my vehicle. No one suffered any injuries.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB9946X
Vehicle Make/Model/Colour	
Details Of Properties	TRANSCAB/RED
Vehicle Category	TAXI

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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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) 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.

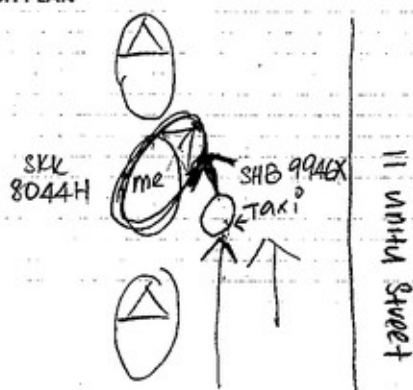

Policyholder's Signature

Date & Time: - 1 OCT 2018
11:22am

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


Reporting Centre Personnel's Signature
Name: Deborah Lai
NRIC/FIN No.: S7332811Z

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The incident happened on Saturday (29/9/2018) between 2.15pm - 2.17pm. My vehicle was parked stationary along 11 Unity Street. I wanted to move out of my parking lot. I checked for traffic and saw that all was clear and proceeded to reverse my vehicle to move out. When I began to move out, taxi no. SHB 9946X approached from behind at a very fast speed and collided into the front right side portion of my vehicle.

No one suffered any injuries.

DECLARATION

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

Policyholder's Signature

Date & Time: - 1 OCT 2018

11 22am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Deborah Lai
S7332811Z



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Lim Huifang Joanne
Period of Insurance : 01 Mar 2018 To 28 Feb 2019
Engine No. : 180513163402204PT
Chassis No. : SALVA2AG5DH807222

Vehicle No. : SKK8044H
Policy No. : 2100500009-01
Endorsement No. :
Issued Date : 01 Feb 2018

ABOUT THE COVER

Make/Model : LANDROVER RANGE ROVER EVOQUE (5DR/COUPE)
Engine Capacity/Tonnage : 1,999.00 CC Sum Insured : Market Value
Driver Restriction : NA Off Peak Car : No
First Year of Registration : 2013
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 Optional

* 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 - \$900 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Lim Huifang Joanne - \$900 (Own Damage), Lim Han Beng (Lin Han Ming) - \$900 (Own Damage)

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

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

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

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: TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

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).

0503982650

KHC HOLDINGS PTE. LTD. - CDC
389A BALESTIER ROAD
SINGAPORE 329796

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Mobile

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

Seah Kit Ng

IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES.

What can the 24-hour AIG Auto Emergency Hotline provide for you?

- Immediate assistance after an accident
- Emergency breakdown service
- Towing service (accident or non-accident related)
- Advice on Motor Claims procedures
- Medical Referral Assistance

If no one is injured in the accident:

- You are not required to make any police report.
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s).
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours of the next working day of the accident.

If the accident involves injuries or damage to government property & vehicles, foreign registered vehicles or non-injury hit & run case:

- Report the accident to the police, providing full details of the circumstances of the accident.
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s), if applicable.
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours of the next working day of the accident.

What should I do in the event of an accident?

- Keep calm and move your car to a safe place.
- Do not admit or discuss fault or blame with the other party(ies).
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours of the next working day of the accident.
- Submit Whistleblowing/Correspondences from third party(ies) to AIG immediately.

LOSS OF USE CAR REPLACEMENT BENEFIT

Applicable only if this benefit is included in your motor insurance. Please refer to your Policy Schedule for details. Policy terms and conditions apply. Please call our customer service hotline number **(65) 6419-3000** for assistance.

The Certificate of Insurance (CI) should be produced without demand when collecting the Rental Car and the Rental Car Company reserves the right to verify the identity of the holder. The CI is the property of AIG and its use is subject to the terms and conditions contained in the Loss of Use Endorsement under the policy issued to the policyholder.

Steps to activate Loss of Use Car Replacement Benefit and Important Information

1. To activate your loss of use car replacement, please contact the Rental Car Company (listed below) after filing/reporting your accident claim.
2. Your rental car will be made available within **5** working hours of activation with the Rental Car Company.
3. At the time of collection of the Rental Car, the **original** insurance policy and schedule issued by AIG, a copy of the Accident Report from the **Authorised Workshop** must be produced.
4. The number of days is based on the period your vehicle is in the repair workshop unless the number of days of loss of use entitlement is stated in the Policy.
5. Rental cars are strictly for use in Singapore only.
6. Extension of rental beyond repair period approved by AIG surveyor will be chargeable by the Rental Car Company on per day basis.
7. Upgrade of Rental Car is available upon request subject to additional charges by the Rental Car Company.
8. **The rental car will be delivered (within Singapore), and MUST BE RETURNED BACK TO the Authorised Workshop upon collection of your accident car.**

Rental Car Company: BKW Rent A Car Pte. Ltd.

Activation Hotline: 67387777

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208

Operation Hours: Monday to Friday: 9am to 6pm Saturday (Half Day): 9am to 1pm

*The Rental Car Company's Terms & Conditions apply (i.e., refundable security deposit, excess liability for the Rental Car, Collision Damage Waiver, etc).

IMPORTANT NOTICE

If you sell your motor vehicle, this Notice is **IMPORTANT** and **MUST** be complied with. Policyholders are hereby warned that under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.99), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

The Policyholder is further warned that on the sale of a motor vehicle, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.88).

This Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agrees to cover the new owner, they will issue a new Certificate of Insurance in the new owner's name. The premium chargeable may vary according to the new owner's profile.

1000707415/AC4

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S82200161**

Name: **LIM HUIFANG JOANNE**

Birth Date: **22 Jun 1962**

Issue Date: **18 Jul 2015**

SG 50

002452513F



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S82200161**

Name: **LIM HUIFANG JOANNE**

林 慧 芳

Race: **CHINESE**

Date of birth: **22-06-1962**

Country/Place of birth: **SINGAPORE**

Sex: **F**

5264212



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

EFFECTIVE DATE: **18 Mar 2009**

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

NP 428A

Licence No: **S82200161**

5264212

NRIC No: **S82200161**

Date of issue: **03-02-2014**

29 ANCHORVALE CRESCENT #04-40
SINGAPORE 544658

NRIC No: **S82200161**

Date: **07/08/2017**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Chassis Number

