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D.O.A: 21/10/18 16:30.	I-Motor W/C	(Within: OD 2hr	y: TP 4hrs)		
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Policy No: () Perio	od: ()	Cover Type: ()	-
Confirmed by : (Date:	Time:)	
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.
- Any false reporting may be referred to the Police for investigation.
- 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

第一次是一个工作的。	ACCIDENT STATEMENT		
Date Of Report	22/10/2018 09:44		
Date Of Accident	21/10/2018 16:30		
Exact Location Of Accident	BLK 631 BEDOK RESERVOIR OPEN CARPARK LOT 86		
Country/State of Lose	SINGAPOR		

Country/State of Loss	SINGAPORE	
STATES AND ASSOCIATION OF	DETAILS OF OWN VEHICLE	Mary Superprise SA
Vehicle Registration Number	SKS9362R	
Insured/Policyholder		
Name Of Registered Owner	TEO WEE CHEE THOMAS	
NRIC No	S0678104G	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-84218286	
Alternative Phone No	OFFICE-84218286	
Vehicle Particulars		
Manufacturer	NISSAN	
22.00		

Manufacturer	NISSAN
Model	NOTE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

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 2100412592-03

Cover Note Number

Driver

Name of Driver TEO WEE CHEE THOMAS

NRIC No S0678104G Date Of Birth 30/11/1949 Occupation INDOOR Date Of Driving Pass 12/10/1978

Driving Experience 40 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84218286

Fax Number

Contact Number OFFICE-84218286

EMail Address NOEMAIL Address

BLK 150 BEDOK RESERVOIR RD #09-1733

Postcode

470150

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

COLLIDED INTO PARKED VEHICLE

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)

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

WHILE MAKING A THREE POINT TURN, MY VEH LEFT REAR ACCIDENTALLY HIT ONTO A PARKED VEH (BEARING NO SKW8368K/GREY COLOR) LEFT FRONT PORTION. LOT NUMBER 86.

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

SKW8368K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Please	Refer	+.	State men t
		/	

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

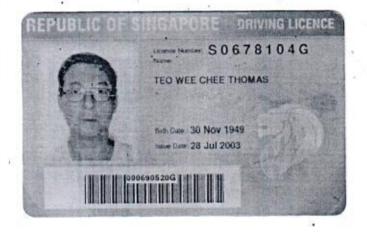
(If driver is not the policyholder)

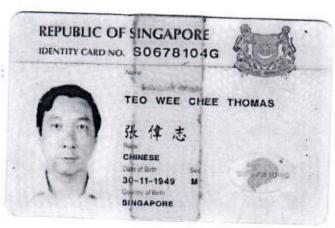
Date & Time:

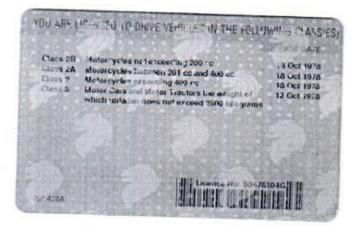
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:











CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Teo Wee Chee Thomas

Period of Insurance

: 15 May 2018 To 14 May 2019 : HR12080237B

Engine No. Chassis No.

: JN1TBAE12Z0981067

Vehicle No.

Issued Date

: SKS9362R : 2100412592-03

Policy No.

Endorsement No.

: 29 Mar 2018

ABOUT THE COVER

Make/Model

NISSAN NOTE 1.2 (SUPERCHARGED/NON-SUPERCHARGED)

Engine Capacity/Tonnage : 1,198.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2015

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

y) The Matayhulder In Any other person with in this pay on the Probayhoster's order or with nection permission. This Probay will intervinify the Matayholder or any particulant driver only 4 hindrig means the specified age condition.

You have to play an additional sum of \$3,000 as "Young under Inexperienced Onver Excess" ("YIDR") if You are or Your Authorised Driver (named or unhamed) is under the age of 23 and/or has less than 2 years' dising expension.

Age Condition

All Age Condition

Limitation as to use*

Use only for social demostic and pleasure purposes and for the Policyholder's business. This Policy foes not cover use for him or reward, driving tallian, driv

Lass of Use 1580cc - 1600cc

Limitations rendered industrially Section 8 of the Motor Vehicles (Third-Party Risks and Companiation) Act (Cap. 180) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be

EXCESS

Fire - 50 Own Company - State: Dreft - St. Fland Cover - 50

Section 2

Windscreen . \$100

Named Driver and Excess (show applicable)

Teo Wee Crise Triomes - \$400 (Own Damage)

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

1 TO AuthOrivin Add. No.1. Swith Law Yang Rhold Singapore 629039 62622012

2 Applicants from the strong Art of the wheeld 3 Simplifies 4058.23 64/09/966 CTC Applicant Art of Serry Keel Roam Simplifies 159/97 37/38/511 87/38/512 87/38/513 4 Ten Champ Matter Selen, Add. 113 Years Timoth Roam Simplifies 58/96/3 64/59/96 46/94/53 63/57/53 63/57/53 63/57/53 63/57/53 63/57/53

For other Automore Reporting Centhys, Ath Authorisest Replanes, please contect our 24-your account envergency notine of *65 6338 6209. Alternatively, you may refer to AIG website www.aug.com.ag to AIG 5G Metale Ace. Simily bearch and novelend. AIG 5G from Turies of Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE 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, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0500610376

TAN CHONG CREDIT PTE LTD-OPH

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE \$89622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE CAP-VV THE