





## 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 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.
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 31/10/2018 10:47  
 Date Of Accident 30/10/2018 17:50  
 Exact Location Of Accident PIE TOWARDS TUAS LAMPOST 778  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SLS8743U  
**Insured/Policyholder**  
 Name Of Registered Owner LIM JIT MENG  
 NRIC No S1360866J  
 Email Address JITMENG88@GMAIL.COM  
 Mobile Phone No (LOCAL) +65-82681290  
 Alternative Phone No OTHERS-82681290

### Vehicle Particulars

Manufacturer SUBARU  
 Model FORESTER-2.0 I-L CVT AWD SR (A)  
 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 1700058977-01  
 Cover Note Number

### Driver

Name of Driver LIM JIT MENG  
 NRIC No S1360866J  
 Date Of Birth 30/01/1959  
 Occupation INDOOR  
 Date Of Driving Pass 05/09/1981  
 Driving Experience 37 YEARS AND 1 MONTH  
 Gender MALE  
 Mobile Number (LOCAL) +65-82681290  
 Fax Number  
 Contact Number OTHERS-82681290  
 EMail Address JITMENG88@GMAIL.COM

Address	BLK 143 MEI LING STREET #09-155
Postcode	140143
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	DRIZZLING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	AHR3024 (MOTORCYCLE)
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181030/2157

#### 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	AHR3024
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MUHAMMAD HILMI BIN HASAN
NRIC/Passport Number	
Contact Number	60182810668
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

Passenger 1

2

NAME: : NAIM BIN MOHD RAMIL

GENDER: : MALE



## SKETCH PLAN

### IMPORTANT NOTICE

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5. **Any false reporting may be referred to the Police for investigation.**
6. 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.
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: 31 Oct 18  
1055h

Driver's Signature

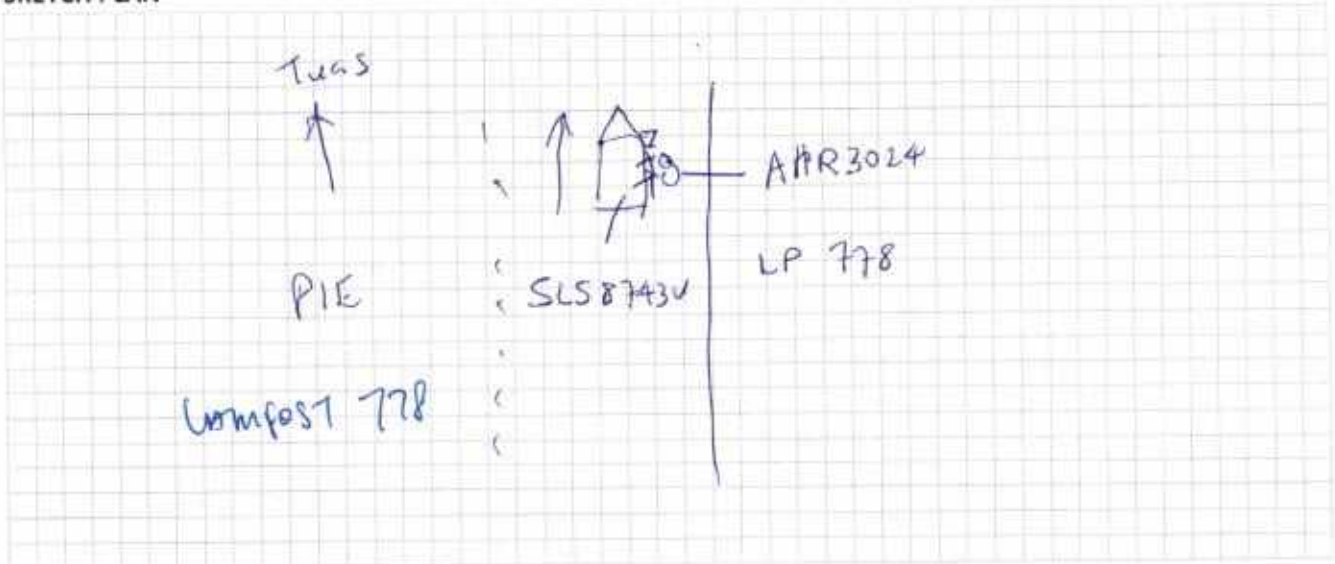
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT  
7/2018 1030/2157

## DECLARATION

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

Policyholder's Signature  
Date & Time: 310418  
1055h

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

Reporting Centre Personnel's Signature  
Name: 3/10/2018  
NRIC/FIN No.: Keshu Nathan





# SINGAPORE POLICE FORCE



T/20181030/2157

1 of 4

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181030/2157

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/10/2018 20:25			Vide Report No.: E/20181030/0151		Station Diary No.:	
<b>Informant's Particulars</b>						
Name of Informant: LIM JIT MENG			Address: APT BLK 143 MEI LING STREET #09-155 SINGAPORE 140143			
ID Type / ID No.: NRIC NO / S1360866J			Contact No.: Home/Office:		Mobile: 82681290	
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Male	Age: 59	Date of Birth: 30/01/1959	Type of Informant: Driver			
Race: Chinese			Language:		Institution / School Name:	
Occupation: ENGINEER			Driving Licence Information: Class:		Date of Expiry:	

## General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/10/2018 17:50	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY TOWARDS TUAS LAMPOST 778				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
AHR3024	Motorcycle					1
SLS8743U	Car	SUBARU	FORESTER 2.0I-L CVT AWD SR	Grey		0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181030/2157

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLS8743U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1700058977-01	10/10/2018	09/10/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Pillion				
Name	NAIM BIN MOHD RAMIL	ID No.	NIL	
Related Vehicle	AHR3024 (Motorcycle)	Contact No.	60182810668	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
Rider				
Name	MUHAMMAD HILMI BIN HASAN	ID No.	NIL	
Related Vehicle	AHR3024 (Motorcycle)	Contact No.	60182810668	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
Driver				
Name	LIM JIT MENG	ID No.	S1360866J	
Related Vehicle	SLS8743U (Car)	Contact No.	82681290	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	





**SINGAPORE  
POLICE FORCE**



T/20181030/2157

3 of 4

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181030/2157

**CONTINUATION OF REPORT**

**Brief Details.**

ON STATED DATE, TIME AND LOCATION,  
I WAS ON THE 2ND LANE, MADE A CHECK ON MY RIGHT AND SAW THERE WAS NO INCOMING  
VEHICLE SO I MADE A LANE CHANGE TO THE 1ST LANE. WHILE I WAS ON THE 1ST LANE, I SAW  
A MOTOCYCLIST FROM MY REAR MIRROR TRAVELLING AT A HIGH SPEED AND THEN  
SUDDENLY THE SAID VEHICLE COLLIDED ONTO MY DRIVER DOOR AND MY RIGHT SIDE  
MIRROR BEFORE FALLING TO THE GROUND. I THEN WENT OUT FROM MY VEHICLE AND  
RENDERED AID TO THE SAID RIDER. FEW MOMENTS LATER, AETOS OFFICERS CAME BEFORE  
THE TRAFFIC POLICE ARRIVED.

## ACCIDENT STATEMENT

ACCIDENT DATE: (30 / 10 / 2018) (DD/MM/YYYY). TIME: (1750) (HH:MM)

LOCATION: PIE Lamp Post 778 towards Tras

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLS 8743 4  
b) INSURANCE COMPANY: AIG  
c) POLICY NUMBER: 1700058977-01  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Subaru Forester 2.0i-L  
f) TYPE: (SAEON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) Suv  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

### 2. INSURED / POLICY HOLDER

- A) NAME: LIM JIT MENG (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S1360866J CONTACT: 82681290  
c) ADDRESS: 143, MEI LING STREET #09-155  
S (140143)

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: LIM JIT MENG (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S1360866J CONTACT: 82681290  
c) ADDRESS: 143, MEI LING STREET #09-155  
S (140143)

\*d) DATE OF BIRTH: (30 / 01 / 1959) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING PASS 1981

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Traffic Police Div HQ

10006 Ave 3

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: AHR3024 MODEL: MOTORCYCLE  
b) DRIVER'S NAME: MUHAMMAD HILMI BIN HASAN  
c) NRIC/FIN/PASSPORT: 4 06300323 CONTACT: 760182810668

### 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: Work Permit MODEL:   
e) DRIVER'S NAME:   
f) NRIC/FIN/PASSPORT:  CONTACT:

Email = jitmeng88@gmail.com  
VIDEO



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1360866J



Name

LIM JIT MENG

林日明

Race

CHINESE

Date of Birth

30-01-1959

Sex

M

Country of Birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1360866J

Name

LIM JIT MENG

Birth Date 30 Jan 1959

Issue Date 17 Jul 2003



0855366

NRIC No. S1360866J



Blood Group

A+

Date of issue

26-03-1993

APT BLK 143 MEI LING STREET #09-155  
SINGAPORE 140143

NRIC No. S1360866J

Date: 27/12/2007

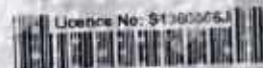
No: 5939821

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

PASS D

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

05 Sep 1993



Licence No: S1360866J

NP 128A

## SUBARU AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Lim Jit Meng  
**Period of Insurance** : 10 Oct 2018 To 09 Oct 2019  
**Engine No.** : FB20YB23033  
**Chassis No.** : JF1SJ5KC5JG099233

**Vehicle No.** : SLS8743U  
**Policy No.** : 1700058977-01  
**Endorsement No.** :  
**Issued Date** : 03 Sep 2018

### ABOUT THE COVER

**Make/Model** : SUBARU Forester 2.0i-L  
**Engine Capacity/Tonnage** : 1,995.00 CC  
**Driver Restriction** : NA  
**Person or Classes of Persons Entitled to Drive\*** :  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2017  
**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 "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 9 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)

Lim Jit Meng

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

\* Motor Image Enterprises Pte Ltd Add: 19 Lorong 8 Toa Payoh Singapore 310255 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](http://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, 1959 (Malaysia).

0500619229

TAN CHONG CREDIT SUBARU-LH  
911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**  
AUTHORISED REPRESENTATIVE

SSCPKJ



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MNA418141181 Vehicle Registration No: SLS 87434  
Name (as shown in NRIC) : Lim Jit Meng NRIC/FIN/Passport No : S1360866 J  
(\*Vehicle Driver/ Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 82681290  
Email Address : \_\_\_\_\_  
Date of Accident : \_\_\_\_\_ Time of Accident : 17:50  
Place of Accident : Pik Roadside Tuas CAMPOST 778  
Insurance Company : ALL

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

EMAIL ADDRESS To Jitmeng88@gmail.com.

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

[Signature]  
Reporting Centre Personnel's Signature  
Name: Koh Lin Hui  
NRIC/FIN No.: \_\_\_\_\_  
Date: 31/10/2018