## SINGAPORE ACCIDENT STATEMENT

## **IMPORTANT NOTICE**

Occupation

**Date Of Driving Pass** 

**Driving Experience** 

- 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 <u>truthful and accurate</u> 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.
- 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

aforesaid.	A COLDENIA CTATEMENT	
	ACCIDENT STATEMENT	
Date Of Report	12/11/2018 13:51	
Date Of Accident	10/11/2018 08:45	
Exact Location Of Accident	MSCP DECK 4B BLK 289H BUKIT BATOK ST 25	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLH2548P	
Insured/Policyholder		
Name Of Registered Owner	HONG SOOK FERN	
NRIC No	S7616542D	
Email Address	BCARDISHUF@HOTMAIL.COM	
Mobile Phone No	(LOCAL) +65-96884779	
Alternative Phone No	Others-96884779	
Vehicle Particulars		
Manufacturer	LAND ROVER	
Model	RANGE ROVER EVOQUE	
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	2100488389-02	
Cover Note Number		
Driver		
Name of Driver	HONG SOOK FERN	
NRIC No	S7616542D	
Date Of Birth	27/05/1976	

**INDOOR** 

26/11/2003

14 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96884779

Fax Number

Contact Number OTHERS-96884779

EMail Address BCARDISHUF@HOTMAIL.COM

Address BLK 1A CANTONMENT ROAD

#07-05

Postcode 085101
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 2
Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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 JURONG POLICE DIVISIONAL HQ ('J' DIVISION)

Police Station Address ROAD: NO. 2 JURONG WEST AVENUE 5, POSTCODE: 649482, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-7910000 - **FAX NO**: 68965649

Was notice of intended Prosecution given?

If Yes, against whom?

NO

#### **Circumstances of Accident**

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: J/20181112/7001.

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 SLW4661C

Vehicle Make/Model/Colour HYUNDAI

**Details Of Properties** 

Vehicle Category Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

#### Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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.
- 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)
  - 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:

12 MOV 2018

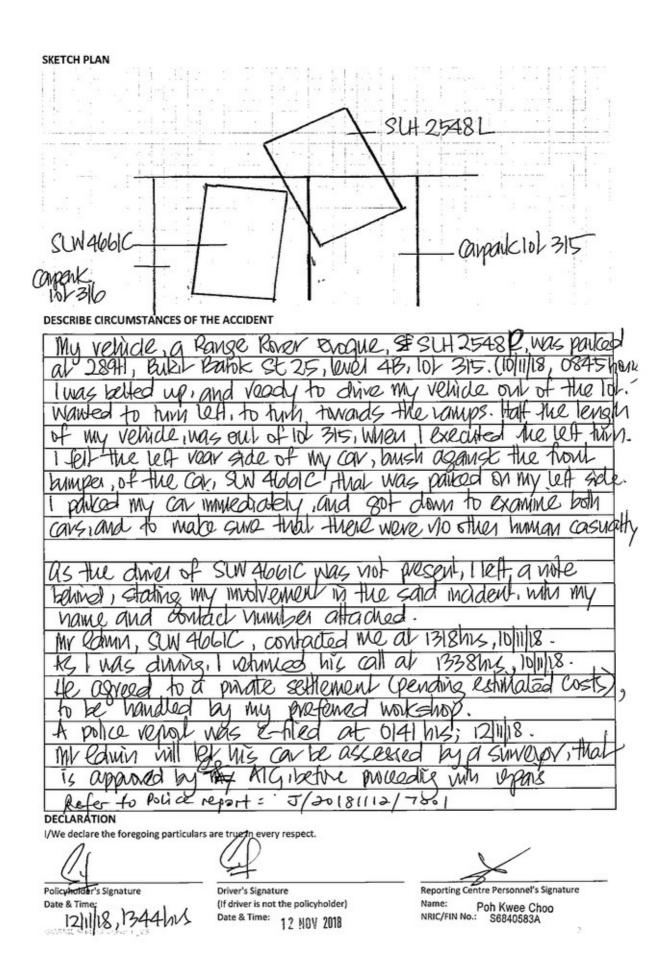
Driver's Signature

(If driver is not the policyholder)
Date & Time: 12 MOV 2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No. Poh Kwee Choo S6840583A







Report No. J/20181112/7001

## POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No:1800-7910000

Date/Time Report Made	Vide Report No.			Station Diary No.
12/11/2018 01:41				
Name Of Informant	Address			
HONG SOOK FERN	APT BLK 1A CANTONMENT ROAD #07-05 SINGAPORI			
	085101			
ID Type / ID No.	Contact No.			
NRIC NO / S7616542D	Home/Office: Mobile:			
	96884779			
Nationality	Email Address			
SINGAPORE CITIZEN	bacardishuf@hotmail.com			
Occupation	Sex	Age	Date of Birth	Race
Health care	Female	42	27/05/1976	Chinese
Institution/School Name	Language English			
Date/Time Of Incident	Location Of Incident			
10/11/2018 08:40 - 10/11/2018 13:20	289H BUKIT BATOK STREET 25 MULTI STOREY CAR			
	PARK SINGAPORE 657289			

## Brief details.

My vehicle, a Range Rover Evoque, was parked at Blk 289H, Bukit Batok Street 25, Level 4B, lot 315.

I was belted up, and ready to drive my vehicle out of the lot, and turn left, to head towards the ramps. Half the length of my vehicle, was out of lot 315, when I executed a left turn.

I felt the left rear side of my car brush against the front bumper, of the car, SLW 4661C, that parked on my left side.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this		
Not applicable	report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 12/11/2018 01:41		
Officer In-Charge Of Case:	Classification Of Case:		

Authentication Stamp





2 of 2

POLICE REPORT (NP299)

#### CONTINUATION OF REPORT

Report No. J/20181112/7001

I parked my car immediately, and got down to examine both cars, and to make sure that there were no other human casualty.

As the driver of SLW 4661C, was not present, I left a note behind, stating my involvement in the said accident, my name and my contact number.

I did not intend to leave the said incident scene, without claiming responsibility.

Mr Edwin, of SLW 4661C, contacted me at 1318hours. However, as I was driving at that juncture, I did not pick up his call.

After reaching my destination and parking my car, I rang Mr Edwin, at 1338hours.

He agreed to a private settlement of the repairs, to be handled by my preferred workshop.

My mechanic and his team, were sent to the Blk 289H, Level 4B to assess the damage. They assisted in pushing back the bumper, for Mr Edwin's interim use over the weekend.

Mr Edwin texted me subsequently, that he will send SLW 4661C to my preferred workshop, Car Laboratories, S(658064) on Tues, 13/11/18.

We agreed to keep in contact, with regards to the repair and claims.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 12/11/2018 01:41		
Officer In-Charge Of Case:	Classification Of Case:		
Authentication Stamp			



## CERTIFICATE OF INSURANCE

### WEARNES AUTO PROTECTOR (LAND ROVER) PRIVATE VEHICLE

Name of Policyholder : HONG SOOK FERN

 
 Period of Insurance
 : 27 Oct 2018 To 26 Oct 2019

 Engine No.
 : 015047170010204PT
 Chassis No. : SALVA2AG2GH083476

Policy No.

: SLH2548P : 2100488389-02

Endorsement No.

Issued Date

: 15 Oct 2018

#### ABOUT THE COVER

: LANDROVER Range Rover Evoque HSE Dynamic

Engine Capacity/Tonnage: 1,999.00 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 "inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition

: 40 years old and above

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 fullion, 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 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, 1967 (Malaysia), are not to be included under these headings.

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)

HONG SOOK FERN - \$900 (Own Damage)

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

1. Wearnes Automotive Pte Ltd Add: 45 Leng Kee Road Singapore 159103 63789333

For other: Approved Reporting Centres/AVG Authorised Repairers, please contact our 24-hour accident emergency holline at +65 6338 6200. Alternatively, you may refer to AVG website www.aig.com.sg or AVG SQ Mobile App. Simply search and download "AVG SQ" from Tunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

IWNe 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).

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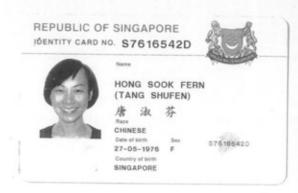
WEARNES AUTOMOTIVE - CWC (JLR)

45 LENG KEE ROAD

SINGAPORE 159103

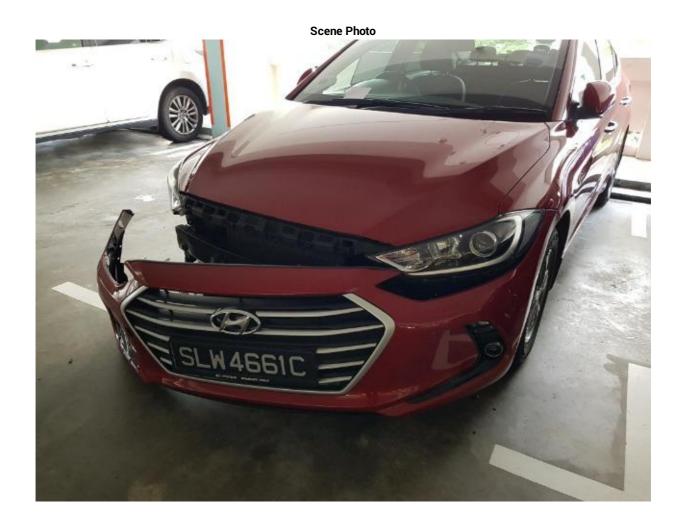
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.









# Scene Photo



Scene Photo



# Scene Photo







## **Accident Photo**





# **CHASSIS NUMBER**

