SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. 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.
- 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 conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	12/12/2018 09:08
Date Of Accident	11/12/2018 04:50
Exact Location Of Accident	TRAFFIC JUNCTION ALONG TELOK BLANGAH ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKR1662H
Insured/Policyholder	
Name Of Registered Owner	NG SUAY MENG (HUANG XIMING)
NRIC No	S7105156J
Email Address	ANDREW8NG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97512087
Alternative Phone No	Office-NOPHONE
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	PERSONAL / LEISURE
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	2100399483-03
Cover Note Number	
Driver	
Name of Driver	NG SUAY MENG (HUANG XIMING)
NRIC No	S7105156J
Date Of Birth	18/02/1971

INDOOR

20/01/1994

24 YEARS AND 10 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-97512087

Fax Number

Contact Number OFFICE-NOPHONE

EMail Address ANDREW8NG@HOTMAIL.COM

51 UPPER SERANGOON VIEW #03-02 Address

Postcode 534020 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 **CHAIN COLLISION Weather Conditions DRIZZLING**

Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

YES Was any other material or property damaged?

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

PLEASE REFER TO THE ATTACHED DOCUMENTS AND PICTURES

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 SLZ8272A Vehicle Make/Model/Colour **BMW**

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver SARPAL AANCHAL

NRIC/Passport Number G5979235R Contact Number 87986534

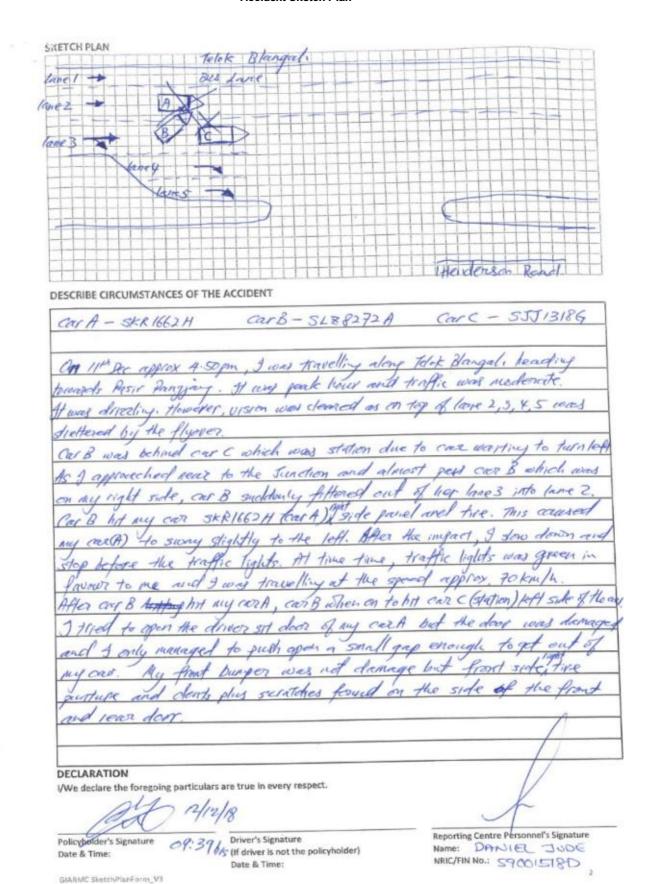
Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan



SKETCH PLAN

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- 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) 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)

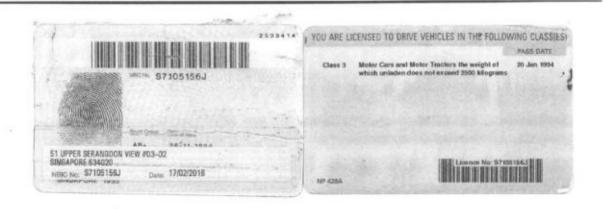
Date & Time:

Reporting Centre Personnel's Signature

Name: DANIEL JUDE

NRIC/FIN No.: S9001518D







CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ng Suay Meng (Huang Ximing)
Period of Insurance : 21 Jan 2018 To 20 Jan 2019
Engine No. : FB201521916
Chassis No. : JF1SJ5KC5EG039721

: SKR1662H Vehicle No. : 2100399483-03 Policy No.

Endorsement No.

: 20 Dec 2017 Issued Date

ABOUT THE COVER

Make/Model SUBARU FORESTER 2.0I-L

First Year of Registration : 2015 Engine Capacity/Tonnage : 1,995.00 CC Sum Insured | Market Value Insuring with COE/PARF : Yes Off Peak Car : No Driver Restriction : NA

Person or Classes of Persons Entitled to Drive* :

a) The Pulkcyholder by Any other person who is showing on the Policyholder's order or with tis/her premission; This Pulkcy all midwendy the Policyholder or any authorised driver only if he time excess the specified age condition.

YALL have to pay an additional sure of \$1,000 as. "Inexperienced Driver Excess" ("LOR") if You are or Your Authorised Driver present or underset, has less than 2 years' desing experience.

: 40 years old and above Age Condition

Limitation as to use* :

Use only for excell domestic and planetum purposes and for the Policyholder's business. The Policy tipes not cover see for fine or review, driving button, driving best, racing, pace-moving, reliability that or speed-basing, the carriage of pinols inform than samples in connection with any bade or business or use for any purpose a connection with Moor Trade.

Loss of Use 1500cc - 1600cc

Unistations randered inopositive by Section 8 of the Motor Vehicles (Third-Perly Risks and Compensation) Act (Cap. 186) and Section 65 of the Road Transport Act. 1967 (Malaysis), are not to be reclaimed under these histories.

EXCESS

Section 1
Firs - SD Own Damage - 5800 Theft - SD Flood Cover - SD

Section 2 Property Damage - 50

Windscreen : \$100

Named Driver and Excess (where application)

Ng Suay Meng (Huang Ximing) - \$800 (Own Damage)

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

1.Motor Image Enterprises Pro Ltd. Adv. 19 Larong 8 Tas Payon Singapore 319055-54170100

For sither: Approved Reporting Centres/ASS Authorized Research, please contact our 24-hour adoption emergency fulling at +95-5335 5300. Alternatively, you may refer to AIQ witten www.alg.som.ag or AIQ 505 Months App. Simply search and deveload "AIG 505 from Turket or Glooply Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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TAN CHONG CREDIT - SUBARU PA 911 BUKIT TIMAH ROAD SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.







