MPA119000748-01 / Premium Automobiles Pte Ltd - UBI ENTRY DATE & TIME: 02/01/2019 18:18 SUBMITTED BY: Jeffrey Tan Eng Su

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 05/01/2019 10:35

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 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.

ACCIDENT STATEMENT

Date Of Report 02/01/2019 18:18 Date Of Accident 22/12/2018 13:10

Exact Location Of Accident CAR PARK AT APT BLK 313 SHUNFU ROAD # 08-295

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

SLZ1749M Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner NG ING-YONG BRIAN (HUANG YINGRONG BRIAN)

NRIC No S7729521F

Email Address BRIAN.NG.INGYONG@GMAIL.COM

Mobile Phone No (LOCAL) +65-91278078

Alternative Phone No Office-97123649

Vehicle Particulars

AUDI Manufacturer

Model A4 SEDAN 2.0 TFSI

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 1800042831

Cover Note Number

Driver

Name of Driver NG ING-YONG BRIAN (HUANG YINGRONG BRIAN)

NRIC No S7729521F Date Of Birth 10/10/1977 Occupation **INDOOR Date Of Driving Pass** 25/10/1995

Driving Experience 23 YEARS AND 1 MONTH

MALE Gender

Mobile Number (LOCAL) +65-91278078

Fax Number

Contact Number OFFICE-97123649

EMail Address BRIAN.NG.INGYONG@GMAIL.COM

Address 313 SHUNFU ROAD #08-295

Postcode 570313

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions **CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

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

NO

Number of Passengers (Including Driver) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION OF ORIGIN: TANGLIN VISION HQ 21 KAMPONG JAVA POLICE STATION NAME [OTHER]

ROAD SINGAPORE 228892

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO THE SKETCH PLAN AND POLICE REPORT: E/20181223/7021

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 **SLX6622Y**

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

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 IMPORTANT NOTICE 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. 3. Information provided must be as trushful and accurate as possible. Any withit 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 Bablity on the part of the insurance 5. Any false reporting may be referred to the Police for investigation. The report will be forwarded by the injuriers 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 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 mode 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 ehocie(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) (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claim [H] investigating the accident and/or my claims; (iii) carrying out and/or dealing with my instructions or responding to any enqueles by me. (by) 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 enurer(s) who have mured 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 lincluding 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, ventigation and management in present and all future claim [e] the information so epilicated under [d] above may be shared / disclo (i) to all insurers anylyor any other third purties that assist in evaluating, investigating, controlling or managing fraud, regulators, low enforcement and government agencies as reasonably required for the purposes stated, or (ii) for complying with requirements under any regulations, laws or court orders. Driver's Signature Name with kitch the fary (If driver is not the policyholder) Date & Time CRANTIFIA

E-FILE 1/10/2019

Sketch Plan #2

