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 <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

	ACCIDENT STATEMENT
Date Of Report	16/01/2019 13:41
Date Of Accident	16/01/2019 09:25
Exact Location Of Accident	KPE TWDS PIE TUAS (1KM EXIT TO PIE TUAS ON LANE 2)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SKA4404G
Insured/Policyholder	
Name Of Registered Owner	SHEK CHEE SENG
NRIC No	S1553235A
Email Address	SHEKCHEESENG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90023443
Alternative Phone No	Others-90023443
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	COROLLA ALTIS 1.6 AUTO
Exact Purpose for which vehicle was being used at ime of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
f No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Гуре Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100249418-07
Cover Note Number	
Driver	
Name of Driver	SHEK CHEE SENG
NRIC No	S1553235A
Date Of Birth	24/08/1962

INDOOR

26/07/1983

35 YEARS AND 5 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-90023443

Fax Number

Contact Number OTHERS-90023443

EMail Address SHEKCHEESENG@HOTMAIL.COM

Address 143 DUCHESS AVENUE

Postcode 269167 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 **COLLISION - HEAD TO REAR**

Weather Conditions CLEAR Road Surface DRY

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?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

1 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 1 DUKE ROAD, POSTCODE: 268914, COUNTRY: SINGAPORE

TEL NO: 1800-4629999 - FAX NO: 64628933 **Police Station Contact**

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

Please refer to Police Report No. T/20190116/2012.

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 SMG7446K Vehicle Make/Model/Colour **BMW**

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)

NEOH WEE LEE S7864613F 82223585

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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- 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.
- 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
- 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 aforesald.
- 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)
 - (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
- 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.
- 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.
- 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: 16 JAN 2019

1-35 pm

Driver's Signature

(If driver is not the policyholder)

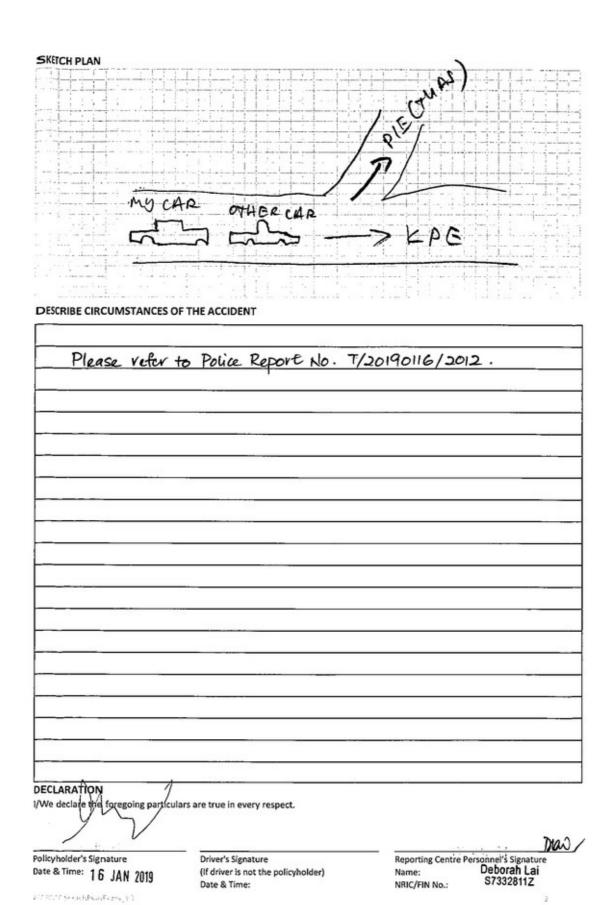
Date & Time:

Reporting Centre Personnel's Signature Deborah Lai Name:

S7332811Z

Die ,

NRIC/FIN No .:







Police Station Of Origin: Bukit Timah N.P.C 1 Duke's Road SINGAPORE 268914 Tel No: 1800-4629999

1 of 3 Report No. T/20190116/2012

PP FDO DT	OE V	TDAEEIC	ACCIDENT

	Date/Time Report Made: 16/01/2019 10:10		Vide Report No.:	Station Diary No.: 36		
■ niorman	it's Partic	ulars	C WITHOUT THE WAS NOTICED	A SECOND CONTRACTOR OF THE SECOND CO.		
Name of	Informant:		Address:			
SHEK CH	HEE SENG	;	143 DUCHESS AVENUE	SINGAPORE 269167		
ID Type	ID No.: 0 / S15532	35A	Contact No.: Home/Office:	Mobile: 90023443		
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Male	Age: 56	Date of Birth: 24/08/1962	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Retiree		Driving Licence Informati Class: 3	on: Date of Expiry:			

General Infor	mation of the Accide	ent	THE PROPERTY OF THE PARTY OF TH		
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 16/01/2019 09:25	Type of Location: Straight Road	
	AYA LEBAR EXPRES	SWAY	s on Lane 2		
Weather: Clear		Road Surface: Dry	R	Road Speed Limit: 80 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled		raffic Volume: leavy	
Type of Collision: Between Mcving Vehicles - Head To Rear			а	nyone conveyed by mbulance:	

Details of V	ehicle Involv	ed		Selfx Circle	4 15 36 1	NV: 00 14:
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKA4404G	Car	TOYOTA	COROLLA ALTIS	Silver	Slightly Damaged	0
SMG7446K	Car	BMW	5201	Black	Slightly Damaged	0

	ehicle Insurance	The White State of		建筑等等
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKA4404G	AIG ASIA PACIFIC INSURANCE PTE.	2100249418-07	28/02/2018	27/02/2019





T/20190116/2012

2 of 3 Report No. T/20190116/2012

Police Station Of Origin: Bukit Timah N.P.C 1 Duke's Road SINGAPORE 268914 Tel No: 1800-4629999

CONTINUATION OF REPORT

Any Pedestrian Involved: No No. of Pedestrians Injured: NIL			Use of Peo	lestrian	Cross	ing: NA
	AND THE REAL PROPERTY.					
Name	SHEK CHEE SENG			ID No.		S1553235A
Related Vehicle	SKA4404G (Car)		Contact No.		90023443	
Hospital/Clinic	NIL			Class Driving Licent Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment NIL D			Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	
		a material and the control of the co			1	
Name	NEOH WEE LEE			ID No		S7864613F
Related Vehicle	SMG7446K (Car)		Contact No.		82223585	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No of Dave gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On the 16/01/2019 at 0925hours, I was travelling along KPE towards PIE Tuas, 1km before the PIE Tuas exit when my vehicle (SKA4404G) collided with another vehicle (SMG7446K). The mentioned vehicle jammed break and as I wasn't able to stop in time, the front of my car knocked into the rear of the other car. We have exchanged particulars with each other.

I am lodging this report for record purposes and insurance claims.





Plice Station Of Origin:

| With Timah N.P.C

1 Duke's Road SINGAPORE 268914

3 of 3 Report No. T/20190116/2012

CONTINUATION OF REPORT

S Metch Plan

T elNo: 1800-4629999

Imformant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: E / Sgt 2 KIANG KOK SUAN	Signature Of Informanty
Signature Of Interpreter:	Date/Time:
Not applicable	16/01/2019 10:10
Officer In Charge Of Case:	Classification Of Case:
TP / GIA / SINGAPORE Staff Sgt WONG SIE DOLIGE FORCE	1 T
	' '1
Contact No.: 65476151	
Authentication Stamp	i
NP168 SI ATURE	
	,



CERTIFICATE OF INSURANCE

AUT €PLUS PRIVATE VEHICLE

Name of Policyholder : Shek Chee Seng Vehicle No. : SKA4404G : 2100249418-07 Period of Insurance : 28 Feb 2018 To 27 Feb 2019 Policy No.

: 1ZRX077383 Endorsement No. Engin€No.

: 22 Jan 2018 Chass is No. : MR053REE104113858 Issued Date

ABO UT THE COVER

: TOYOTA COROLLA ALTIS 1.6 DUAL Mak⊕Model

EngirneCapacity/Tonnage : 1,598.00 CC Sum Insured : Market Value First Year of Registration : 2011 Insuring with COE/PARF : Yes Off Peak Car : No Drive r Restriction : NA

Personor Classes of Persons Entitled to Drive*:

a) The Pribyholder b) Any offer person who is driving on the Policyholder's order or with his/her permission. This Polifywill indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have be 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 itr 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 Algoria Trade.

Loss of lise 1500cc - 1600cc Optional

* Umitatives 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, 1987 (Malaysia), are not to be included under these headings.

Section 1 Fire - SO Own Damage - S600 Theft - SO Flood Cover - S0

Section 2

Property Damage - SO

Windscreen: \$100

Named Driver and Excess (where applicable)

Shek Chee Seng - \$600 (Own Damage)

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

Approved Reporting Centros/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Appril's workshop.

For other Approved Reporting Centres/HG Authorised Repairers, please contact our 24-bour accident emergency hoffine at +85 6338 6200. Alternatively, You may refer to AIG website www.alg.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTenes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

If We hereity 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 5 the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0030210000

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AIG ASIA PACIFIC INSURANCE PL 78 SHENTON WAY #07-16 AIG BUILDING SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #07-16 AtG Building S079120 ; T:+65 6419 3000 | F:+65 6415 3723 | www.sig.com.sg



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1553235A



SHEK CHEE SENG





24-08-1962 Country/Place of birth SINGAPORE



5970925

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

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

26 Jul 1983

03-07-2018

143 DUCHESS AVENUE SINGAPORE 269167

NP 428A









Chassis Number

