SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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.

presaid.			
	ACCIDENT STATEMENT		
ate Of Report	09/02/2019 12:13		
ate Of Accident	08/02/2019 08:35		
xact Location Of Accident	ALEXANDRA ROAD TOWARDS PASIR PANJANG ROAD JUNCTION		
ountry/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
ehicle Registration Number	SJA8980Y		
sured/Policyholder			
ame Of Registered Owner	LIEW YAN MEN		
RIC No	S1295203A		
mail Address	NOEMAIL		
obile Phone No	(LOCAL) +65-97964439		
Iternative Phone No	OTHERS-97964439		
ehicle Particulars			
anufacturer	MAZDA		
odel	MAZDA 3		
xact Purpose for which vehicle was being used a	PRIVATE USE		
re you claiming under your own insurance policy r repair to your vehicle?	' NO		
No, Please state action to be taken	THIRD PARTY		
ehicle Category	PRIVATE CAR		
surance Company			
ame of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.		
ype Of Coverage	COMPREHENSIVE		
eet Policy	NO		
olicy Number	1700073937-01		
over Note Number			
river			
ame of Driver	LIEW YAN MEN		
RIC No	S1295203A		
ate Of Birth	02/08/1958		
ccupation	INDOOR		
ate Of Driving Pass	17/06/1997		
riving Experience	21 YEARS AND 7 MONTHS		
ender			
ender	MALE		

OTHERS-97964439

NOEMAIL

BLK 6 KIM TIAN ROAD Address

#08-98

Postcode 163006

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

2

NO

YES

NO

1

NO

NO

YES YES

NO

SH9674D

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 (including own vehicle)

involved in the accident

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)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN AND STATEMENT

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver YAP HOCK CHNEE

NRIC/Passport Number S1782452Z Contact Number 91852441

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 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)

Lunderstand, 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 invoive 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 to the purposes stated, or

> Name: NRIC/FIN No.:

(II) for complying with regulrements under any regulations, laws or court order

Policyholder's signatulie Date & Tline: Oriver's Signature (If driver is not the policyholder)

Care do Alembariano VI

Sketch Plan Pg. 2

SKETCH PLAN			
	3.1767	Somerna Sign	
DESCRIBE CIRCUMSTANCES OF 1			
my CAR (STA8)80	PAINSUI SAW (DI	AT TUNCTION OF	ALZXANDA
RODD AND PONJAN	G ROAD, THE TA	xi (341969ab) 7	urving of
SAME TIME, THE	AM TIH RAW IXE	I CAR (DRIVER S	SiDE) BACK
D608 ,			
\$			
		The state of the s	A half of the first distribution of the first of the second state
	And the second s		
м Тура у менендер мене			
		· · · · · · · · · · · · · · · · · · ·	**************************************
		0	
2021 A 21 A 22 (A A)			16,271
DECLARATION /We declare the foregoing particulars	are true in every respect.		1 2/1/20
1 DAY			1/10/13
olicyholder's signature Date & Time:	Oriver's Signature (If driver is not the policyholder)	Reporting femore Per Wine:	students the mature
Milliot Signeraland term, V3	Date & Time:	NRIC/FIN.NO.	1

GIABIAI Sigtenziant con, V3



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Pollcyholder : Liew Yan Men
Period of Insurance : 04 Oct 2018 To 03 Oct 2019
Engine No. : P520471099

Vehicle No. Policy No.

: SJA8980U

: JM6BN24A8J0181054

Endorsement No.

: 1700073937-01

Issued Date

: 19 Sep 2018

ABOUT THE COVER

Make/Model

Chassis No.

: MAZDA 3 1,5 SKYACTIV

Engine Capacity/Tonnage: 1,496.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2017 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

: 30 years old and above

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholdar'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 Optional

^a 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, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Named Driver and Excess (where applicable)

Liew Yan Men - \$600 (Own Damage)

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

1.Trans Eurokars Pte Ltd. Add: 5 Ubi Close, Singapore 408605 63959999

Pro 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.alg.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from ITurios or Google Play.

IMPORTANT NOTES

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

Www.neyeoply.com/yllnet/neppolicy.fownite/number of filloute of insurance rotates is is accordance, with the provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provisions of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Compensation) Act, (Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Cop. 180), Part IV of a provision of the Motor Yenides (Third:Party-Risks and Cop. 180), Part IV

ARE (AF) FIELTO MAZDA 7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX

SINGAPORE 069111

Underwritten by AIG Asia Racific Insurance Pto. Little

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

Sketch Plan Pg. 4







