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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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.	
	ACCIDENT STATEMENT
Date Of Report	03/04/2018 10:03
Date Of Accident	01/04/2018 11:30
Exact Location Of Accident	LIM CHU KANG RD CHINESE CEMETRY PUTIH 12
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKZ1735P
Insured/Policyholder	
Name Of Registered Owner	TAN JEE LOKE
NRIC No	S7108910Z
Email Address	FRANCIS_TJL@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96179208
Alternative Phone No	OFFICE-96179208
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	2100446548
Cover Note Number	
Driver	
Name of Driver	TAN JEE LOKE
NRIC No	S7108910Z
Date Of Birth	20/03/1971

 Name of Driver
 TAN JEE LOW

 NRIC No
 \$7108910Z

 Date Of Birth
 20/03/1971

 Occupation
 INDOOR

 Date Of Driving Pass
 04/05/1989

Driving Experience 28 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96179208

Fax Number

Contact Number OFFICE-96179208

EMail Address FRANCIS_TJL@YAHOO.COM

Address BLK 485 YIO CHU KANG RD #03-06

Postcode 78705

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
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

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.

Number of Passengers (Including Driver)

NO 0

Details of Police Action

Was the accident reported to the police?

YES

If Yes,Please state which Police Station

Police Station Name ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 51 ANG MO KIO AVE 9, POSTCODE: 569784, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-4849999 - **FAX NO**: 62181399

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER AS ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH SAM AT UBI SIDE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GZ1149P

Vehicle Make/Model/Colour MITSUBISHI

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Page 2 of 16

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 5. 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 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.
- 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' law yers/law firms; the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (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.

Impal adistan bu

(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policy solder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

Sketch Plan

Path

Describe Circumstances of the Accident	
On lot April at about 1/20 hrs, I purhed my car, a silve Toyota Wish bearing registration place no stezitas Palang Chinese Cenetry Path 12 (Lim ChinkagRoad) to vint a gran	(
Toxota Wish bear + registration date no styl 78 + Palone	
Chinese Comeday Porth 1+ (1 m Chy Lene Road) to yet a door	•
The state of the s	
rent grave at Path 5 and pulled my caralog the road. When I came back at 1230 hrs, lawcarered to front burn pur had a large dent with cretcher. Two s uneme when it happened and I had to vie	+-
and one of the to a land of the contract of th	- 1
sent grave or full s and pured my caralong the	card
road. Wen come back at 1230 hrs, lancovered to	10
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the in-car corners installed at poth the front as	I ma
The Course of Internation of Bolls. The Trout of	1-01
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at path 12, I reliced a Mittabishi white vanta	· PPT
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521149D grave pass my canand between the Vi	and
nit my front right	
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The van driver did not got down to even take a and seed of.	ad
creatings in had any of the it	
se maye to the van	
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I am certain the said van is the one one to the so	2410
I am certain the said van is the are due to the so	
Λ	
Declaration	
AND COMMON TOWNS AND THE REAL PROPERTY AND ADDRESS OF T	
IWe declare the foregoing particulars are true in every respect.	
211	
101	
Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting C	anten.
Policyfolder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting C	entre



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: Tan Jee Ldie
VEHICLE NUMBER	SKZ 1735P
DATE/TIME OF ACCIDENT	: 1 Apr 2018 / 1130 gm Linchy Kay Road Chnesse Cenetry RAM 12
PLACE OF ACCIDENT	:
THIRD PARTY VEHICLE (IF ANY)	: GZ 1149D
********	******************
	JOURNEY AND WHERE WAS THE INTENDED DENT? 12/22, to Chinese Cemetry Path 12,
DID YOU DRINK ANY ALCOHOLI THE ACCIDENT? IF YES, DID THE ANALYSER TEST ON YOU? IF YES	C DRINKS BEFORE YOU DRIVE ON THE DAY OF HE TRAFFIC POLICE CONDUCT ANY BREATHE- , WHAT IS THE RESULT?
WHAT IS THE TYPE OF COLLISION TO ALL VEHICLES INVOLVED? Another vehicle GZ SKZ 1735 P.	on and the extensiveness of the damages
WERE YOU OR YOUR PASSENG WERE YOU TAKEN TO THE TRAI	ER/S INJURED? IF INJURED, WHICH HOSPITAL? FFIC POLICE FOR INVESTIGATION?
Tan Jee Lohe Apr Name:	

AIG Asia Pacific Insurance Pte. Ltd. AIG Building 78 Shenton Way #07-16 Singapore 079120 Tel: 6419 3000

I Affirmed The Above Information Is Given To My Best Knowledge.





Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Report No. T/20180402/2013

1 of 3

Tel No: 1800-4849999

Date/Time Report Made: 02/04/2018 09:47			Vide Report No.:	Station Diary No. 21	
Inferma	nt's Partice	riare			
Name of TAN JEI	Informant: ELOKE		Address: 485 YIO CHU KANG ROAD #	03-06 SINGAPORE 787058	
ID Type / ID No.: NRIC NO / S7108910Z			Contact No.: Home/Office: Mobile: 9617 9208		
National	ity: ORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 47 20/03/1971			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: DEPUTY MANAGING DIRECTOR		NG DIRECTOR	Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 01/04/2018 11:30	Type of Location Straight Road	
Location: Along Road 1 LIM CHU KAI CHINESE CE	NG ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: To One Way		Traffic Control:		Traffic Volume: No Traffic	
Type of Collis Moving Vehic	iion: le Against - Parked Ve	hicle		Anyone conveyed by ambulance: No	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GZ1149D	Van	MITSUBISHI		White		0
SKZ1735P	Car	TOYOTA	WISH 1.8 CVT	Silver	Seriously Damaged	

Vehirle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKZ1735P	AIG ASIA PACIFIC INSURANCE PTE.	2100446548-02	12/01/2018	11/01/2019

Police Report



T/20180402/2013

Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 2 of 3 Report No. T/20180402/2013

Tel No: 1800-4849999

CONTINUATION OF REPORT

Any Pedestrian Ir No. of Pedestrian	Use of Pe	Use of Pedestrian Crossing: NA			
Driver		Selection of the second			
Name	Unknown Driver		ID No.		NIL
Related Vehicle	GZ1149D (Van)		Conta	ct No.	NIL
Hospital/Clinic	NIL			of g e & Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	charge	NIL	
	ted Medical Leave NIL	Degree o	f Injury	NIL	
Driver					Transport of the second
Name	TAN JEE LOKE		ID No.		S7108910Z
Related Vehicle	SKZ1735P (Car)		Contact No.		9617 9208
Hospital/Clinic	NIL			of g ce & / Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	Discharge NIL		
No. of Days gran	Degree o	Degree of Injury NIL			

Brief Details.

On 1st April 2018 at about 1120hrs, I parked my car, a silver Toyota Wish bearing registration plate number SKZ1735P along Chinese Cemetery Path 12 (Lim Chu Kang) to visit a grave. I came back at about 1130hrs to retrieve my car and proceeded to the next grave at Path 5 and parked my car along the said road. When I came back at about 1230hrs, I discovered the front right bumper had a huge dent with scratches. I was unsure when it happened and I had to view the in car camera installed at both the front and the rear.

After viewing. I discovered shortly after I left my car the first time at Path 12, I noticed a white Mitsubishi van bearing registration plate number GZ1149D drove pass my car and I believe the front left side of the van hit my front right bumper when he wanted to enter the space infront of my car causing a huge dent and scratches. I am not sure of the damages to the van. The van driver did not get down to even take a look and quickly sped off.

I am certain that it was the said van as the video footage captured the sound made upon impact and my car also shook.

This is the first time such incident happened.

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Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No: 1800-4849999 3 of 3 Report No. T/20180402/2013

CONTINUATION OF REPORT

Sketch Plan

Informant 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: F / Staff Sgt KARTINA BINTE ZUHRI	Signature Of Informant:			
Signature Of Interpreter: Not applicable	Date/Time: 02/04/2018 09:47			
Officer In Charge Of Case: TP / HRT /	Classification Of Case:			
Sr Staff Sgt ESTHER CHONG Contact No.: 65476368				
NP168	mature, V Cocce			



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Tan Jee Loke

Period of Insurance

: 12 Jan 2018 To 11 Jan 2019

Engine No.

: 2ZR1677571

Chassis No.

: JTDGG20W60J003313

Vehicle No.

: SKZ1735P

Policy No.

: 2100446548-02

Endorsement No. Issued Date

: 05 Jan 2018

ABOUT THE COVER

Make/Model

: TOYOTA NEW WISH

Engine Capacity/Tonnage: 1,798.00 CC

Surn Insured : Market Value

First Year of Registration : 2016

Driver Restriction

: NA

Off Peak Car : No

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 wit indemnify the Policyholder or any authorised driver arriy if heathe meets the specified age condition. You have to pay an additional sum of \$3,000 as "Young and/or hexperienced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or hax less than 2 years' criving experience.

Age Condition

: All Age Condition

Limitation as to use* :

Use only for social, decrease and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hise or reward, driving listion, driving lest, racing, pace-making, reliability tool or speed testing. The narrange of goods other than samples in connection with any trade or business or use for any purpose is connection with Motor Trade.

Less of Use 1500cc - 1600cc Optional

* Unitations rendered incomrative by Section 8 of the Motor Vehicles (Third-Party Risks and Componisation) 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 Theit - \$0 Flood Cover - \$0

Section 2 Property Damage - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Jee Loke - \$600 (Own Damage)

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

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

Any accident repairs to the Vehicle must be certified 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 Sete Agent's workshop.

For other Approved Reporting Centres/AIG Authorised Repairers, plante contact our 24-hour accident emergency hotize at +65 6338 6203. Alternatively, You may refer to AIG website www.sig.com.ag or AIG SG Mobile App. Simply selects and downlose "AIG SG" from it'unce or Google Play.

IMPORTANT NOTES

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

I/We 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., 109). Part fit of the Read Transport Act. 1997 (Vehicles) and Motor Vehicles (Third Party Risks) Nates. 1955 (Malaysia).

0030210000

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

SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

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