

## 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 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. 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	26/11/2018 17:03
Date Of Accident	23/11/2018 12:15
Exact Location Of Accident	AYE TO CITY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS561S
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### Insured/Policyholder

Name Of Registered Owner	LIM CHIN HENG
NRIC No	S1661786E
Email Address	ELC_LIMCH@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96783024
Alternative Phone No	Others-96783024

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle?	YES
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If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800019681
Cover Note Number	24/03/2018-23/03/2019

### Driver

Name of Driver	LIM CHIN HENG
NRIC No	S1661786E
Date Of Birth	10/01/1964
Occupation	INDOOR
Date Of Driving Pass	25/06/2005
Driving Experience	13 YEARS AND 4 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96783024
Fax Number	
Contact Number	OTHERS-96783024
EMail Address	ELC_LIMCH@YAHOO.COM
Address	316 JURONG EAST ST 32 #04-285
Postcode	600316
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	SIDE SWIPE
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?	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
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

REFER TO ATTACHED

#### 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	YP4657Z
Vehicle Make/Model/Colour	MITSUBISHI FUSO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZHANG NAN
NRIC/Passport Number	68107244U
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN


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#### 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:
  - (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
- (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 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:  
NRIC/FIN No.:

DATE: 14/07/2014, 11:11 AM

SKETCH PLAN

AYE towards City



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23rd Nov 2018 I was driving along AYE towards city. At about 1214hrs I was driving on the 2nd lane on AYE before exit 17 when I heard abnormal sound & on my left side of the car. Thereafter I saw a lorry by the left side of the car. We both stopped to check and I realised that I've brushed against the right side of the lorry. There were no injuries.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : LIM CHIN HENG  
 Period of Insurance : 24 Mar 2018 To 23 Mar 2019  
 Engine No. : 1ZR490232  
 Chassis No. : MR053REH104526976

Vehicle No. : SKS581S  
 Policy No. : 1800019681  
 Endorsement No. :  
 Issued Date : 01 Mar 2018

### ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.8 DUAL  
 Engine Capacity/Tonnage : 1,598.00 CC  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2015  
 Insuring with COE/PAF : Yes

#### Person or Classes of Persons Entitled to Drive\*

To the Policyholder  
 To any other person with driving on the Policyholder's motor or with his/her permission.  
 This Policy will not cover the Policyholder or any authorized driver only if he/she exceeds the specified age condition.  
 For new drivers, the maximum age limit is 23 years old as of the date of the accident. For experienced drivers, the maximum age limit is 65 years old as of the date of the accident.

Age Condition : All Age Condition

#### Limitation as to use\*

Not to be used for racing, stunts, and pleasure purposes and for the Policyholder's business. This Policy does not cover the use of the vehicle for racing, driving tuition, driving test, racing, stunt driving, pleasure driving, or any other use not intended by the manufacturer. The coverage of goods other than a vehicle in connection with any form of business or use for any purpose is not covered under Motor Trade.

Loss of Use (30000) : 100000 Optional

\* Conditions and exclusions apply to the Motor Vehicle Third Party Rules and Compensation Act (Cap. 169) and Section 95 of the Road Transport Act 1987 (Malaysia), and are not to be construed as a contract.

### EXCESS

Section 1  
 Fire - 50 (Own Damage) - 50 (Third Party) - 50 (Theft) - 50 (Vandalism) - 50

Section 2  
 Property Damage - 50

Whichever is higher : \$100

Named Driver and Excess (where applicable)

LIM CHIN HENG, LIM SWEE LIM, LIM TINA

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

Approved Reporting Centres of AIG Approved Repairers (for claims related repairs)  
 Any accident reports to the Vehicle must be reported by one of our Authorized Reporting Centres within the first 24 hours of the first registration of the Vehicle in Singapore. They have the option of having a 24-hour accident reporting service.  
 For claims related to property damage, Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6766 8000. Alternatively, You may contact AIG website www.aig.com.sg or AIG 24-hour hotline at +65 6766 8000. For more information, please contact our 24-hour accident emergency hotline at +65 6766 8000. Alternatively, You may contact AIG website www.aig.com.sg or AIG 24-hour hotline at +65 6766 8000.

### IMPORTANT NOTES

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

This policy is issued under the policy to which this Certificate of Insurance relates. It is issued in accordance with the provisions of the Motor Vehicle Third Party Rules and Compensation Act (Cap. 169), Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicle Third Party Rules (Cap. 169) (Malaysia).

0504611000

K-2 VENTURES INSURANCE AGENCY  
 6 BOON LAY WAY #06-12 TRADERHUB 21  
 SINGAPORE 600984

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORIZED REPRESENTATIVE

03/01/18

For more information, please contact our 24-hour accident emergency hotline at +65 6766 8000.

AIG Asia Pacific Insurance Pte. Ltd.

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S1661786E**

Name: **LIM CHIN HENG**

Birth Date: **10 Jan 1964**

Issue Date: **25 Jun 2005**

1001351307B

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1661786E**

Name: **LIM CHIN HENG**

種族 **CHINESE**

Date of Birth: **10-01-1964** Sex: **M**

Country of Birth: **SINGAPORE**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3A Motor cars without clutch pedals <= 3000kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles without clutch pedals <= 2500 kg

PASS DATE: **26 Jun 2005**

NP 426A

License No: **S1661786E**

1970761

S1661786E

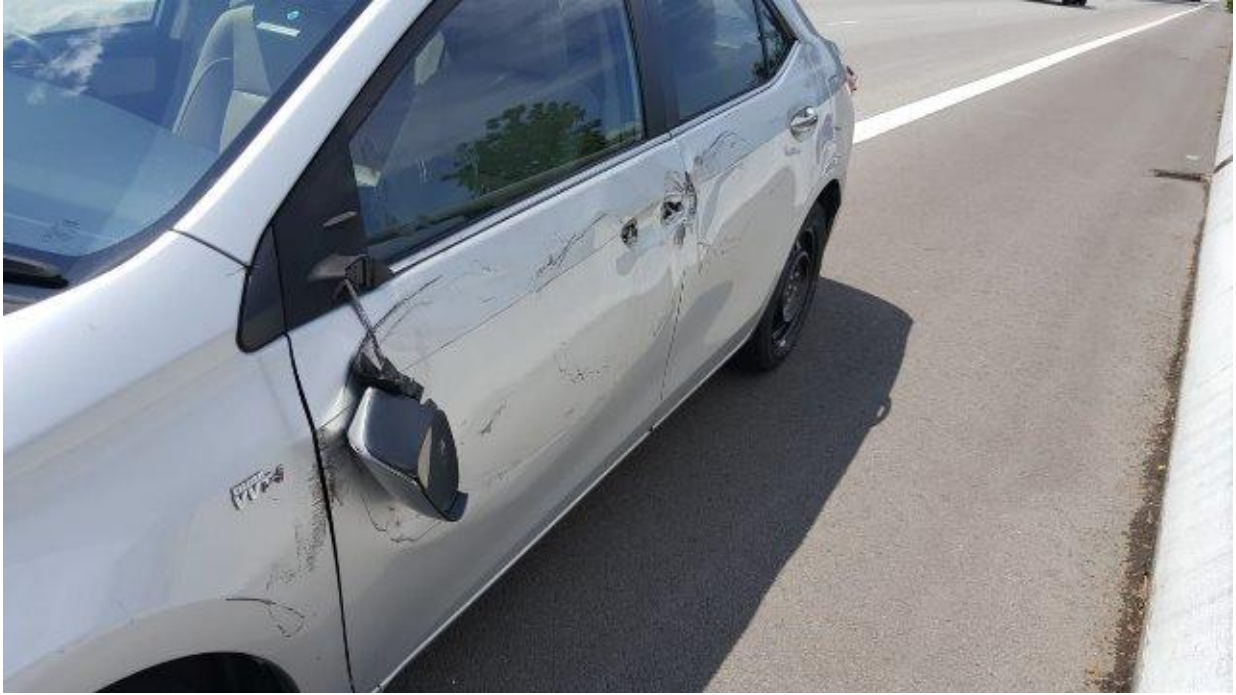
03-05-1994

APT BLK 313 J. RONG EAST STREET 30 304-13  
SINGAPORE 000000

NRIC No: **S1661786E** Date: **03-05-1994** Sex: **M**



Accident Photo





Accident Photo



Accident Photo



Accident Photo

