SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 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 ins ont to the ort at the

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	27/02/2019 17:20
Date Of Accident	27/02/2019 14:00
Exact Location Of Accident	WARNA ROAD OPEN CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL6699M
Insured/Policyholder	
Name Of Registered Owner	LIEW AH CHOY @ LIEW YOW CHOY
NRIC No	S2552265F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90126922
Alternative Phone No	Office-90126922
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA180
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
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	1800108602
Cover Note Number	
Driver	
Name of Driver	GAN AH LIAN
NRIC No	S1223311F
Date Of Birth	06/10/1943
Occupation	INDOOR

11/07/1979

39 YEARS AND 7 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-90126922

Fax Number

Contact Number

EMail Address NOEMAIL

Address 96 HOLLAND GROVE VIEW

Postcode 276253
Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own Vehicle

enicie

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

4

NO

NO

NO

1

NO

NO

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

dent

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

I APPROACHED THE EXIT GANTRY @ WARNA ROAD CARPARK. THE GANTRY DID NOT OPEN FOR QUITE SOME TIME. I THEN REVERSED THE CAR THINKING THAT WAS TOO CLOSE. IN THE PROCESS OF REVERSING, I HIT A CAR HYUNDAI (SFB7118S) AND KNOCKED DOWN 2 MOTOR-CYCLE (FOOD DELIVERY). NO ONE WAS INJURED. I THEN MOVED FORWARD AND SUDDENLY, THE CAR SURGED FORWARD. THE EXIT GANTRY WAS OPENED BY THEN. MY CAR CRASHED INTO THE REAR OF THE SHOP IN WARNA ROAD.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFB7118S

Vehicle Make/Model/Colour HYUNDAI ELANTRA

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number FBJ7544A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

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

- 1. 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.
- 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.
- 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 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)

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
- 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 Cole of International OTH RESE

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time 27.02.19 16:20PM Driver's Signature

(If driver is not the policyholder) Date & Time 27.02.19 16:20PM Reporting Centre Per

Name

NRIC/FIN No.:

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I then approaches the exit ganty a Warna Road carpail.

The ganty did not open for gute some time. I then

The ganty did not open for gute some time. In the

readses the can thinking that I was too close. In the

process of remarking, I hit a car Hyundai SFB 7118S and

process of remarking, I hit a car Hyundai SFB 7118S and

knocked down I motor-cycles (food debusy). No one was

knocked down I moves forward of suddenly, the

Injurio. I then moves forward of suddenly, the

surged forward. The exit ganty was opened by

car moves forward. The exit ganty was opened by

then. My cour crashed into the bollands of recon

them. My cour crashed into the bollands of recon

of the stop Original Sin in Warna Road.

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature Date & Time 27.02.19 16:20PM Driver's Signature

(If driver is not the policyholder) Date & Time 27.02.19 16:20PM Reporting Centre Pe

NRIC/FIN No.:



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Polloyholder ... LIEW AH CHOY @LIEW YOW CHOY

Period of Insurance : 26 Sep 2018 To 25 Sep 2019 Engine No. : 27091031595280

Engine No. 127091001070207087

Vehicle No. Policy No.

: SJL6699M : 1600108802

Endorsement No.

Issued Date : 01-Oct 2018

ABOUT THE COVER

Make/Model : MERCEDES Benz CLA180 Coupe

Engine Capacity/Tonnage : 1,595.00 CC Driver Restriction : NA

Sum Insured ; Market Value Off Peak Car : No

First Year of Registration : 2018

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Pullsylholder b) Any other parado who is driving on the Policyholder's order or with higher permission. This Policy will indensify the Policyholder or any sutherland other only if heishe ments has specified age or

You have to pay an additional sum of \$3,000 as "Young antior inexperienced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less the years' diving experience.

Ape Condition

: All Age Condition

Limitation as to use"

Use only for social, domestic and pleasure purposes and for the Policyholder's tusiness.
This Policy does not caver use for fals or several, affiling busine, diving test, recing, pade-making, reliability trial or applications or our late for any purpose in coancidation with shoot things.

Loss of Use 2000cc

* Limitations rendered inspersive by Section 6 of the Moter Vehiclas (Third-Party Risks and Compensation) Act (Cos. 189) and 3ection 65 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings

EXCESS

Section 1 Fire - 30 Own Damage - \$1300 Theft - \$0 Fined Cover - \$0

Named Driver and Excess (where applicable)

LIEW AH CHOY @LIEW YOW CHOY - \$1300 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS

1.Cycle & Carrage Eunte Service Center (For accident reporting only). Actr 530 Util Reed 3 Bitgspore 409850 420e1816 2.Cycle & Cerfage Pensen Losp Service Center - Body Cers & Repeir Add, 168 Pendan Losp Singspore 12878 62061616

For other Approved Reporting Centres/AIG Authorised Repairers, stease certisot our 24-hour accident emergency huntine at +45 \$338 \$350. Alternatively, you may refer to AIG website wow.elg.com.ag or AIG SG Middle App. Simply search and download "AIG SG" from ITUres or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Daimler Financial Services Africa & Asia Pacific Ltd

More having country that the parties in country the Controller of the Controller of the controller in insulation in accompanies will the professional of the Mission Designation of the Controller Country and Accompanies (

0604612203

CYCLE & CARRIAGE - ANTANG 250 ALEXANDRA ROAD **BINGAPORE 169930**

Underwritten by AIG Ania Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance Pte, Ltd.

28 Secretar Vary 962-18 / 6G Duillieu 5079330 ; T. -85 64 95 2700 Librar organin sc

AIG Asia Pacific meurance Pie. Ltd.

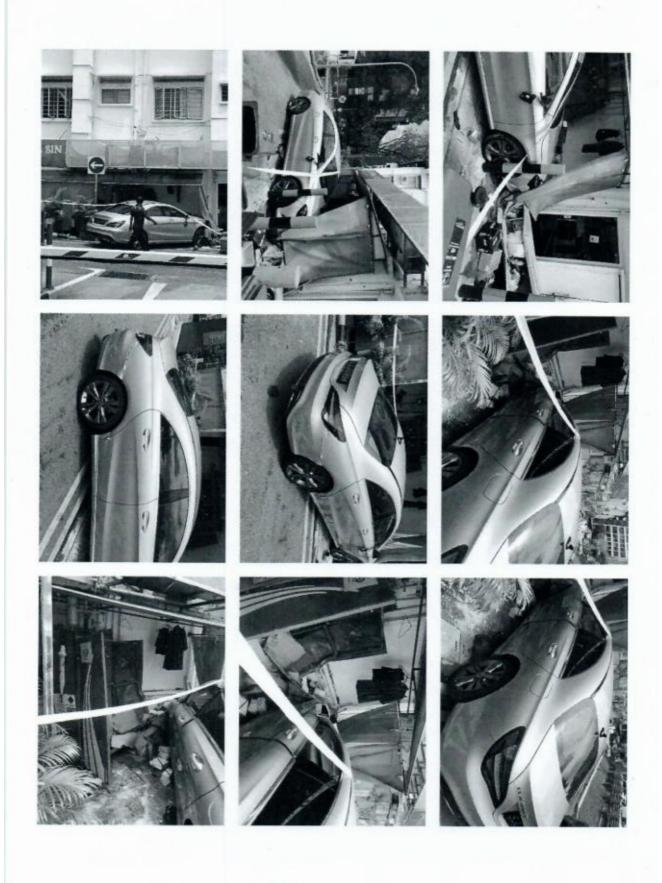


5940146

18-05-2018

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

PASS DATE



Common Statement

































































Accident Photo

























