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## 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 witholding of material facts may allow insurance companies to
- 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. 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

<b>新兴州外部</b> 州市经营营产品	ACCIDENT STATEMENT
Date Of Report	06/03/2019 16:03
Date Of Accident	06/03/2019 08:30
Exact Location Of Accident	
Country/State of Loss	AYE TOWARDS MCE AFTER CLEMENTI AVENUE 6 SINGAPORE
が	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKQ9777M
Insured/Policyholder	SOMEOFIEM
Name Of Registered Owner	TAN BEE ENG
NRIC No	\$1155779A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97233341
Alternative Phone No	OTHERS-97233341
Vehicle Particulars	- TILLIO-07 25354
Manufacturer	VOLVO
Model	S60 T5
Exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
No, Please state action to be taken	THIRD PARTY
ehicle Category	PRIVATE CAR
nsurance Company	As a property of the contract
lame of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
ype Of Coverage	COMPREHENSIVE
leet Policy	NO
olicy Number	2100391162-04
over Note Number	PER NOTE DISPLACED TO THE
Priver	
ame of Driver	TAN BEE ENG

TAN BEE ENG NRIC No S1155779A Date Of Birth 27/05/1956 Occupation INDOOR Date Of Driving Pass 26/07/1991 **Driving Experience** 27 YEARS AND 7 MONTHS

Gender

FEMALE

Mobile Number (LOCAL) +65-97233341 Fax Number

Contact Number OTHERS-97233341

EMail Address NOEMAIL Address

319 CHOA CHU KANG AVENUE 3

#07-19

Postcode

689863

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?

Number of vehicles (including own vehicle) involved in the accident

NO 2

NO

Was any body injured in the Accident?

NO

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.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: SEET SU LENG

GENDER:

: FEMALE

**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

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH OWNER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FM5685B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

Nature Of Damage No. Of Passenger (Including Driver)

### SKETCH PLAN

### IMPORTANT NOTICE

- 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.
- Information provided must be as truthful and accurate as possible. Any wilful misropresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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.
- 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 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:
  - 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 Personne's Signature

Name:

NRIC/FIN No.

SKETCH PLAN				(a) sko 9777m (b) fm 5685B
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT			
WHEN THE FRE	17 VEHICLS	T UM	Dillonari Abesi	G AYE TWOS MEE SHIT EUROZNEY
PRINCES TO COL	FIDED INSO	MY WEN	A F0110 p	SHIF EUDDENLY
CLARATION				
Ve declare the foregoing partic	culars are true in every	respect.		1.
icyholder's Signafure	Driver's Signatur (If driver is not t	May	Po A	oblig 2009 orting Centre-Persannel's Signature

# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 6		TIME: OF SORES	(hh:mm) 24 hrs Format
LOCATION AYE 7	DI TH MILE AFTER CO	Eminate Aura 8	(manini) 24 ms Formal
VEHICLE NUMBER	140 1777 m		
INSURED NAME THE			
NRIC/FIN SUSS 77		CONTACT:	97233391
MAKE VOLVO 560	75 PII MODEL	ABS DINIRBAG ON	MO
Are you claiming under	your own insurance policy for	r repair to your vehicle?	
) res, Il No, Pls Se	elect : ( ) Third Party (	) Reporting Only	
INSURANCE COMPAN		No.	
TYPE OF POLICY (	) COMPREHENSIVE (	) THIRD PARTY (	) TPFT
OLICY NUMBER:		1_11-1	
* 4 * ***			
NAME DRIVER:		0	) SAME AS INSURED
			, and the state of
RIC/FIN SUB5	7191	CONTACT:	9723 3341
DATE OF BIRTH: つイ・	05.1956	A TO	1 10 2 554
RIVING PASS DATE	26.01.1991		
CCUPATION: (	INDOOR ( ) OU'	l'DOOR	
SENDER: (	CONTROL OF THE CONTRO	MALE	
MAIL ADDRESS:		Late 1 (1) (1) (1) (1)	( ) NO EMAIL
DDRESS OF DRIVER:	319 Choa Chu tant	me 2 xxx1-10 (1)	589 883)
	nclude Driver:		287 805/
No, Relationship Of T	of the Insured's Company? ( he Driver With The Insure	) YES (/) NO	
Owner ( ) Spou	se ( ) Friend ( ) Relati	ve ( ) Children (	) Sibling ( ) Others
oes The Driver Own An	y Other Vehicle?: ( ) YES	S (. / ) NO	y stating y stations
Yes, Vehicle Registration	on Number Of Driver's Own	Vehicle:	//
surance Company Of Di	iver's Own Vehicle	-	
eather Conditions: (	Clear ( ) Raining	( ) Drizzling (	) Others
oad Surface : ( /	) Drv ( ) Wet	( ) Others	) collers
as Any Foreign Vehicl	e Involved In This Accident	0. /	NO
as Anybody Injured Ir	Contract Con	YES ( ) NO	1332
YES, Injured details :			
0/W/2012-20-ANII) 012-20-20-20-1			
onvey By Ambulance:	( ) YES ( √ ) NO		1912
as There Any Video Ca	apture By Car Camera? (	YES ( ) NO	WITH CHANGE
as There Accident Rep	orted To The Police? (		Attach Police Report
lice Report Number (if	any)	7.101110	Attach I blice Report
tails Of 3rd Party	Name / NRIC	No.of Paxs (incl	driver) Contact
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		( ) / Not Sur	e ( )

### REPUBLIC OF STREAM OR BERTHAMPE STISS779A





TAN BEE ENG

陈美英

CHINESE 27+05+1956 F

SINGAPORE

1100200



8 (40 m) 1 (40 m) 2 319 CHOA CHU KANG AYEDUL 3 187 - P.1 SANGAPORE 689863 BWG No: \$1155778A Data: 15/05/20

Date: 15/06/2012 test 7 0 5 0 5 3 5



AYOU ARE LICENSED TO LARVE VEHICLES IN THE FOLLOWING CLASSIES!

PASS DATE

Final Mater Cars and Mater Tracture the weight of which unbelon does not exceed \$500 kilograms.

26 Jul 1991

NP 428A

Liceaco No. 51155779A

## CERTIFICATE OF INSURANCE

# WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE Name of Policyholder : TAN BEE ENG Period of Insurance : 31 Oct 2018 To 30 Oct 2019 Engine No. : 84204T111095638

: YV1FS40CDF2341948

Vehicle No.

Issued Date

1 SKQ9777M 1 2100391162-04

Policy No. Endorsement No.

: 04 Oct 2018

## ABOUT THE COVER

Make/Model

: VOLVO S60 T5 DRIVE-E Engine Capacity/Tennage 1,969.00 CC

Driver Restriction NA

Sum Insured - Market Value

First Year of Registration : 2014

Off Peak Car No

Insuring with COE/PARF Yes

Person or Classes of Persons Emitted to Drive\*

a) The Protophiches b) Any other person into it drawing on the Pullsylathier's enter or with log-for person This Pullsy will exceededly the Pullsylathier or any authorised littles only 8 habits my

Type Describe play are additional more of \$1,000 are "compressioned Direct Colors (CDF) if they are in Yes

Age Condition 30 years old and above

Limitation as to use"

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\* Elementary rendered responsive by Dection & of the Mohr Volumes (that Party Rock and Compensation: Art (Cap. 180) and Section 65 of the Board Transport Art. 1867 (Moleywa), are not to 1 Technologies.

#### EXCESS

Bection 1 Free SD Dan Danage - \$500 Inch - St Flood Cover - 50

Property Demags - 50

Windscreen : \$100

Named Driver and Excess (where approximate)

TAN BEE ENG - \$800 (Dan Danaye)

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

array Authoristive Phillips Add. 248 Alexandra Road Sergapore 119935 68304866 83788700

For other Approved Reporting Continue/CO Authorised Reporters, phase contact our 24-hing academ emergency froming at +55 \$338 \$250. Absentively, you may refer to ACO website www.ings.com.ACO SCI Making App. Benging several rend discribing "ACO SCI" from Transport Recogniting.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

West benefity doubly that the policy by prince the Certificate of Innumbers residing to immediate and macrostonic with the provinces of the Motor Vehicles (That Party Roke and Congestication) Act (Cep. or Floor Transport Act, 1987 (Malaysia) and Motor Vehicles (That Party Roke) Party

503485752

EARNES AUTOMOTIVE - FAG (V)

LENG KEE ROAD NGAPORE 159103

idenwritten by AIG Asia Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance AUTHORISED REPRESENT

## > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

5779A

Vehicle Details

Vehicle No.:

SKQ9777M

Vehicle to be Exported:

No

Intended Deregistration Date:

31 Mar 2019

Vehicle Make:

VOLVO

Vehicle Model:

S60 T5 A/T ABS D/AIRBAG 2WD

Primary Colour:

Silver

Manufacturing Year:

2014

Engine No.:

B4204T111095638

Chassis No.:

YV1FS40CDF2341948

Maximum Power Output:

180.0 kW (241 bhp)

Open Market Value:

\$27,981.00

Original Registration Date:

31 Oct 2014

First Registration Date:

31 Oct 2014

Transfer Count:

0

Actual ARF Paid:

\$21,174.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

30 Oct 2024

PARF Rebate Amount:

\$15,880.00

Intended COE Rebate Details

COE Expiry Date:

30 Oct 2024

COE Category:

B - Car above 1600cc or 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$71,990.00

COE Rebate Amount:

\$40,175.00

Total Rebate Amount:

\$56,055,00

The information contained herein is correct as at 06 Mar 2019

OK