MCD519014721 / ComfortDelGro Engineering Pte Ltd - Braddell ENTRY DATE & TIME: 31/01/2019 12:47 SUBMITTED BY: Rohaini Binte Mustafa

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 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 31/01/2019 12:47

Date Of Accident 30/01/2019 19:35

Exact Location Of Accident TPE TOWARDS PIE EXIT 1

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLJ3671Z

Insured/Policyholder

Name Of Registered Owner ABEL TAY
NRIC No S6828856H

Email AddressABELTAY@ME.COMMobile Phone No(LOCAL) +65-93921680

Alternative Phone No Office-93921680

Vehicle Particulars

Manufacturer JAGUAR

Model XJ 3.0L DIESEL LWB PL A/T ABS D/AB HID

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 2100499148

Cover Note Number

Driver

Name of Driver ABEL TAY

NRIC No S6828856H

Date Of Birth 01/08/1968

Occupation INDOOR

Date Of Driving Pass 14/08/1986

Driving Experience 32 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93921680

Fax Number

Contact Number OFFICE-93921680
EMail Address ABELTAY@ME.COM
Address 319 LOYANG RISE

Postcode 507309

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 FIRE, EXPLOSION OR LIGHTNING

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?

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

Passenger 1 Name: : LIE SOK MUIH (93921680)

NO

Gender: : Female

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? NO

Was there any audio recorded?

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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)

I understand, acknowledge, agree and consent that:

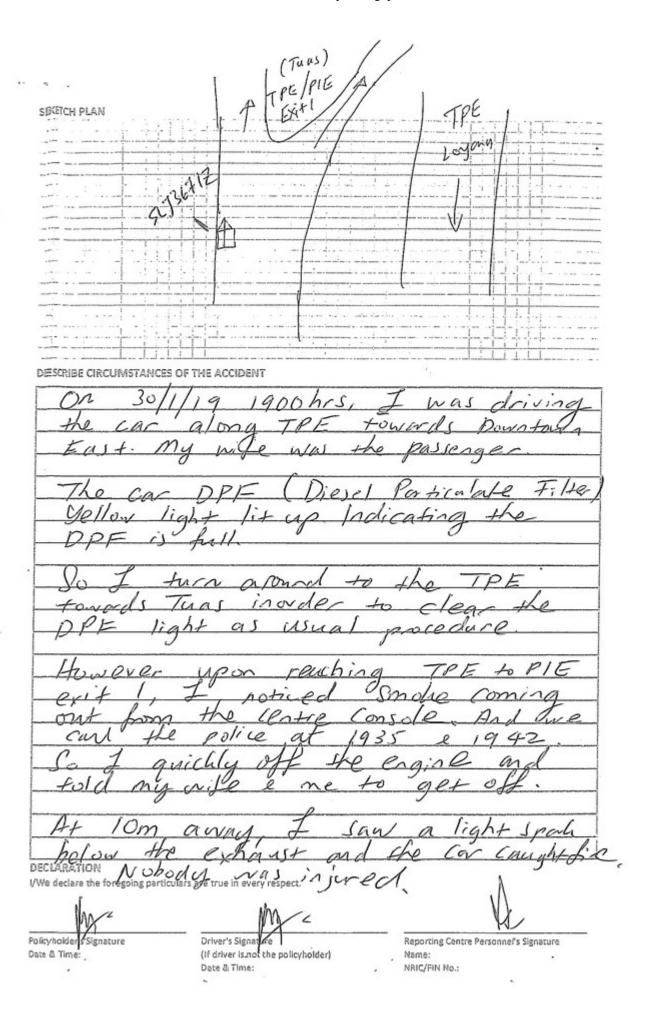
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
 - 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 Personnel's Signature Name:

NRIC/FIN No.:







Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 409014

Tel No: 1800-8486999

Report No. T/20190131/2016

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/01/2019 08:08			Vide Report No.:	Station Diary No.: 18		
Informa	nt's Partic	ulars				
Name of Informant: ABEL TAY			Address: 319 LOYANG RISE SINGAPORE 507309			
ID Type / ID No.: NRIC NO / S6828856H			Contact No.: Home/Office:	Mobile: 93921680		
National SINGAP	ity: ORE CITIZ	EN	Email:			
Sex: Age: Date of Birth: Male 50 01/08/1968			Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: Company director			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/01/2019 19:35	Type of Location Straight Road	
	XPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light	
Type of Collis	ion: T FIRE			Anyone conveyed by ambulance:	

Vehicle No.	Type -	Make	Model	Color	Condition	No of Passenger
SLJ3671Z	Car	JAGUAR	XJ 3.0L DIESEL LWB PL A/T ABS D/AB HID	Red	Caught Fire	1

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLJ3671Z	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100499148-01	27/03/2018	26/03/2019

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Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999 2 of 3 Report No. T/20190131/2016

CONTINUATION OF REPORT

Anu Dadastrian I	supliced Ale				HARMAT COMM	
Any Pedestrian II						
No. of Pedestrian	s Injured: NIL		Use of Pedestrian Crossing: NA			
Driver						
Name	ABEL TAY			ID No		S6828856H
Related Vehicle	SLJ3671Z (Car)			Contact No.		93921680
Hospital/Clinic NIL				Class Drivin Licend Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	7
	ted Medical Leave	NIL		Degree of Injury NIL		

Brief Details.

On 30/1/19 at about 1900hrs, I was driving my car bearing the registration plate number, SLJ3671Z along TPE towards downtown east exit. My wife was also in the same vehicle as me. The Yellow DPF light triggered and I then made a U-turn towards TPE (Tuas) as I wanted to get rid of the DPF light. When travelling along TPE to PIE exit 1, the car started giving off smoke at the center console. I then quickly move to the road shoulder, off the engine and my wife and I then came out of the car. We then keep distance of about 10m away from the car and that was when I saw that the under carriage of the said car, there was some spark coming of the exhaust pipe area. It was about 1935hrs at that point of time and I called for police assistance. At about 1942hrs, I called again for police assistance and immediately after I hung up, I saw that the cabin area of the car had already caught fire. Both my wife and I are not injured. Police and fire engine came to scene. I am lodging this for record purposes and for my insurance side.

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Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999

3 of 3 Report No. T/20190131/2016

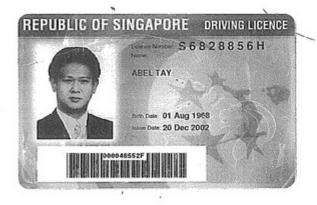
CONTINUATION OF REPORT

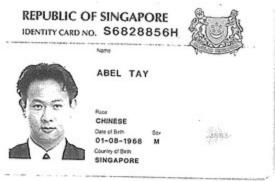
Sketch Plan

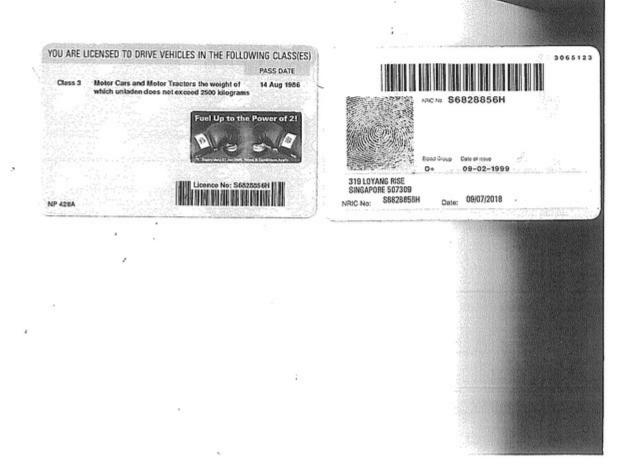
Informant is not able to provide sketch plan

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 Reco G / Sgt 2 ONG WEI XING	ording The Report:	Signature Of Informant:		
Signature Of Interpreter: Not applicable		Date/Time: 31/01/2019 08:08		
Officer In Charge Of Case TP / GIT / Sgt 2 LIM HONG LEE	э:	Classification Of Case:		
Contact No.: 65476438	Fig. & department	1.10 is 41.90 to 10.00 to		
Authentication Stamp NP168	Pauca Nill			
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CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : ABEL TAY

Period of Insurance : 27 Mar 2018 To 26 Mar 2019 Engine No. : 0480359306DT

Vehicle No. Policy No.

: SLJ3671Z : 2100499148-01

Endorsement No.

Chassis No.

: SAJAC2229ANV09855

ALCOUTTITLE DOVIES

Issued Date

: 12 Mar 2018

: JAGUAR XJ 3,0 DIESEL

Engine Capacity/Tonnage : 2,993.00 CC

Sum Insured : Market Value

First Year of Registration : 2010

Driver Restriction

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 higher permission. This Policy will indemnify the Policyholder or any authorised driver only if heishe 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 expending

Age Condition

: 40 years old and above

Limitation as to use" :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or revard, driving tuition, driving test, reany, pace-making, reliability trat or speed-testing, the camage of goods other tran earnst as in connection with any trade or business or use for any purpose in connection with Motor Trade

Loss of Use 1500cc - 1600cc Optional

* Limitabons rendered inoperative by Section 8 of the Molor Vehicles (Third-Porty Roko and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1997 (Molaysia), are not to be included under these headings

(5)(CESS

Section 1 Fire - S0 Own Damage - \$1400 Theft - S0 Flood Cover - S0

Section 2 Property Damage - \$0

Windscrean: \$100

Named Driver and Excess (where applicable)

ABEL TAY - \$1400 (Own Damage)

ADDROVIED REPORTING CHATTESIAUTHORISHED REFAIRERS (FOR CLAIMS RHEATHED REFAIRS)

Approved Reporting Centrest ARG Authorised Repairers (For claims relates repairs)

Any academt expans to the Vahids must be carried 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 Scie Agent's workshop

For other Approved Reporting CentrestAND Authorised Repairers, please contact our 24-thour accident emergency holline at +55 5338 5200. Alternatively, You may refer to AVG website www.aig.com.sg. or AIG SG Xiobile App. Simply search and download "AIG SG" from ITunes or Google Play.

SELLON LIVERSION

Hire Purchase Company/Employer's Loan: NA

ItWe 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 Russ and Compensation) Act (Cap. 1891, Part IV of the Road Transport Act. 1907 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504335000

A STARZ PTE LTD

33 UBI AVE 3 #01-45 VERTEX

SINGAPORE 408868

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

76 Securative, 1975 CAST Banking Sec (AP) To 1976 (A) SEE (1975) CAST (1975) C

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Accident Photo

















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