

12/13/2019

ASS. REC. BY:

REF:

C1/A1619004979/De

Special Instruction:

SURVIVOR:

ASSIGNMENT (Office)

From (Person):

Priscilla Sim

of

AIG

Date/Time:

25/2/2019

Estimated Cost:

Bill to:

OD+TP+WS+TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SLT3671Z

Insured:

at Workshop m/s

Tel:

of

Policy No:

Claim No:

247335570A86

Sum Insured:

Excess:

Make of Veh.

(Client's Record)

D.O.A

30/1/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time

Action/Instruction (

)

Estimate

SLT3671Z-X

Bryan Ang (LKKAUTO)

From: Sim, Priscilla-LK <Priscilla-LK.Sim@aig.com>
Sent: Monday, 25 February 2019 11:20 AM
To: SUR; Bryan Ang (LKKAUTO)
Subject: OD / 24733557095G / SLJ 3671Z
Attachments: E-FILE.pdf

Hi Bryan

Kindly accept new assignment for fire investigation.

Seems this is the 2nd car of same / make / model that caught fire.

Boo!-
S

Priscilla Sim LK
Senior Complex Claims Examiner
Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1755
priscilla-lk.sim@aig.com | www.aig.sg



IMPORTANT NOTICE:

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MC0510014721 / ComfortDelGro Engineering Pte Ltd - Braddell
ENTRY DATE & TIME: 31/01/2019 12:47
SUBMITTED BY: Rohani 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 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 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 *19103pna e 1445w*
Insured/Policyholder
Name Of Registered Owner ABEL TAY *bought 2 yrs ago. Main driver*
NRIC No S6828856H *so far no mechanical issue*
Email Address ABELTAY@ME.COM *or electrical issue.*
Mobile Phone No (LOCAL) +65-93921680 *on the way home,*
Alternative Phone No Office-93921680 *83815919. Saw DPF light came*
Vehicle Particulars *on. Decided to*
Manufacturer JAGUAR
Model XJ 3.0L DIESEL LWB PL AT ABS D/AB HID
Exact Purpose for which vehicle was being used at time of accident *make u-turn and take TPE to*
Are you claiming under your own insurance policy for repair to your vehicle? YES *clear the clog. When approx*
If No, Please state action to be taken *abt 2 mths once. Now clear,*
Vehicle Category PRIVATE CAR *liquid gone, he saw smoke*
Insurance Company *coming out from*
Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage COMPREHENSIVE *back, stopped along the side,*
Fleet Policy NO
Policy Number 2100499148 *aligned and saw flame at DPF*
Cover Note Number *area. Walked away and called SCDF.*
Driver *Wife seated on passenger seat just*
Name of Driver ABEL TAY *when I sat under the seat.*
NRIC No S6828856H
Date Of Birth 01/08/1968
Occupation INDOOR *Took photo and last driving as*
Date Of Driving Pass 14/08/1986 *abt 1 or 2 yrs before JTA.*
Driving Experience 32 YEARS AND 5 MONTHS
Gender MALE *Recalled later abt recall for software*
issue on seat belt. but never sent
fire occurred.

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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	Name: : LIE SOK MUIH (93921680) 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

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?	NO

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to reassess 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 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:

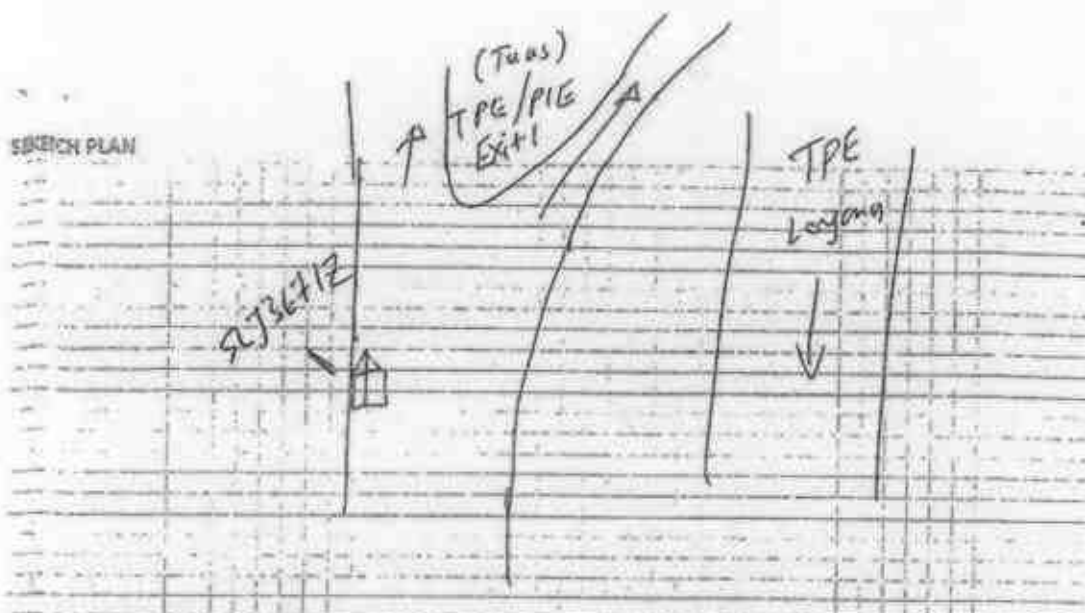
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer [collectively the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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/1/19 1900hrs, I was driving the car along TPE towards Downtown East. My wife was the passenger.

The car DPF (Diesel Particulate Filter) Yellow light lit up indicating the DPF is full.

So I turn around to the TPE towards Tuas in order to clear the DPF light as usual procedure.

However upon reaching TPE to PIE exit 1, I noticed smoke coming out from the centre console. And I called the police at 1935 & 1942. So I quickly off the engine and told my wife & me to get off.

At 10m away, I saw a light spark below the exhaust and the car caught fire. Nobody was injured.

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/IN No.:



**SINGAPORE
POLICE FORCE**



T/20190131/2016

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486989

1 of 3

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	
Informant's Particulars					
Name of Informant: ABEL TAY			Address: 319 LOYANG RISE SINGAPORE 507309		
ID Type / ID No.: NRIC NO / S6828856H			Contact No.: Home/Office: Mobile: 93921680		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 50	Date of Birth: 01/08/1968	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Company director			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
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
Location: Along Road 1 TAMPINES EXPRESSWAY TPE TOWARDS PIE AT EXIT 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: CAR CAUGHT FIRE				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
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 Vehicle 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



**SINGAPORE
POLICE FORCE**



T/20190131/2016

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

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ABEL TAY	ID No.	S8828856H
Related Vehicle	SLJ3671Z (Car)	Contact No.	93921680
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted 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.



SINGAPORE
POLICE FORCE



T/20190131/2016

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 Recording The Report:

G /
Sgt 2 ONG WEI XING

Signature Of Informant:

Signature Of Interpreter:
Not applicableDate/Time:
31/01/2019 08:08

Officer In Charge Of Case:

TP / GIT /
Sgt 2 LIM HONG LEE
Contact No.: 65476438

Classification Of Case:

Authentication Stamp
NP158