

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	25/03/2019 12:03
Date Of Accident	25/03/2019 08:05
Exact Location Of Accident	SLE TOWARDS WOODLANDS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC4191Y
Insured/Policyholder	
Name Of Registered Owner	ONG CHAI YUN (WANG CAIYUN)
NRIC No	S7309948Z
Email Address	CYONG1703@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97344155
Alternative Phone No	Others-97344155

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA AERAS 2.4
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	1800053107
Cover Note Number	

Driver

Name of Driver	ONG CHAI YUN (WANG CAIYUN)
NRIC No	S7309948Z
Date Of Birth	17/03/1973
Occupation	INDOOR
Date Of Driving Pass	05/03/1999
Driving Experience	20 YEARS AND 0 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-97344155
Fax Number	
Contact Number	OTHERS-97344155
E-Mail Address	CYONG1703@YAHOO.COM.SG
Address	BLK 298B COMPASSVALE STREET #12-168
Postcode	542298
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	CHAIN COLLISION
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	3
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)	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

PLEASE REFER TO SKETCH PLAN.

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	SKQ3787Z
Vehicle Make/Model/Colour	AUDI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SREEDAVAN
NRIC/Passport Number	

Contact Number874526414

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration NumberSLB7199L

Vehicle Make/Model/ColourMERCEDES BENZ

Details Of Properties

Vehicle CategoryPRIVATE CAR

Name of DriverNICHOLAS

NRIC/Passport Number

Contact Number97353574

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:

25 MAR 2019

(8:03hrs)

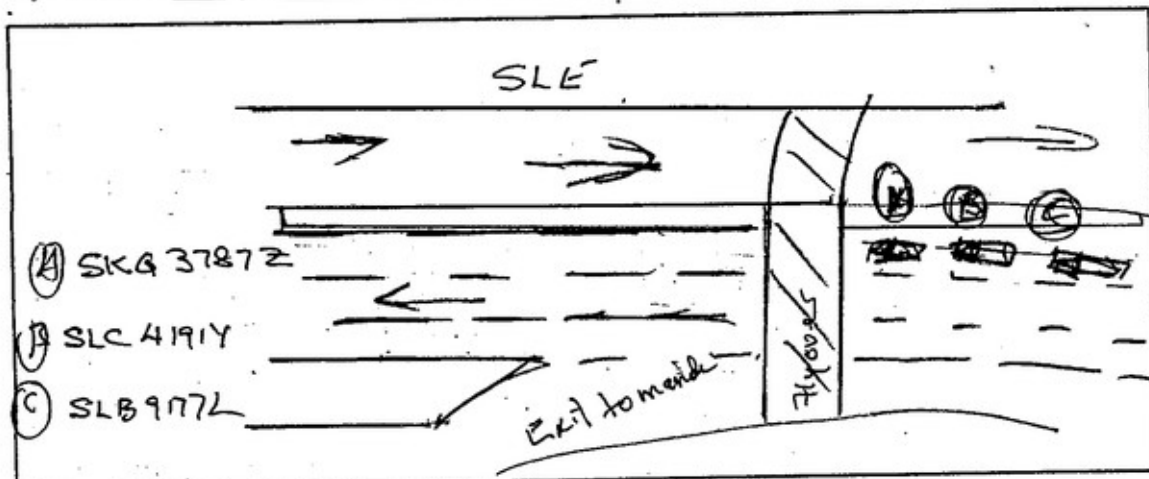
Driver's Signature
(If driver is not the policyholder)
Date & Time:

(8:03hrs)

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: Poh Kwee Choo
S6346583A

SKETCH PLAN

Date: 25/3/2019 Time: 8.05 am Location: SLE toward Woodland
 My Vehicle A: SKA 3787Z Vehicle B: SLC 4191Y Vehicle C/Others: SLB 7199L



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On dated 25/3/19 @ 8.05 hrs I was travelling along SLE toward Woodland & on the extreme right lane traffic was heavy. The front vehicle No. SKA 3787Z apply his emergency brake, due to traffic jam in front.

I follow suit suddenly I hear a bang sound from behind it was vehicle No. SLB 7199L collided onto my vehicle and it move forwards and hit the front vehicle.

() Claim OD / TP at Ah Lim Motor (X) Claim OD / TP at other workshop () Reporting Only

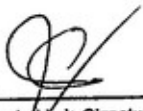
Remarks : Please forward a copy of my efile accident report to


My workshop : Auto Soon Pte Ltd
 Email Address : auto soon 176@gmail.com
 & Myself :
 Email Address : cyong1703@yahoo.com.sg

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

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


 Policyholder's Signature
 Date & Time: 25 MAR 2019


 Driver's Signature (If driver is not the policyholder)
 Date & Time: 25 MAR 2019


 Witnessed by Reporting Centre
 Personnel: S6040583A

QARV: SketchPlanForm_V3

CERTIFICATE OF INSURANCE



CERTIFICATE OF INSURANCE

AUTOVALUE PRIVATE VEHICLE

Name of Policyholder : Ong Chai Yui
 Period of Insurance : 13 May 2018 To 12 May 2019
 Engine No. : 2A24A16618
 Chassis No. : ACR500194214

Vehicle No. : SLC4191Y
 Policy No. : 1800053107
 Endorsement No. :
 Issued Date : 10 May 2018

ABOUT THE COVER

Make/Model : TOYOTA ESTIMA AERAS 2.4 [Sedan]
 Engine Capacity/Tonnage : 2,362.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2016
 Insuring with COE/PAF : 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 his/her permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

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 reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 188) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Ong Chai Yui

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

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

We 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 Risks and Compensation) Act (Cap. 188), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503955000

KOONG KUM HON MARVIN
 52 STRATHMORE AVENUE #20-233
 SINGAPORE 141052

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Marvin

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

78 Shortland Way #07-16 AIG Building 2075 170 | T: +65 6415 3300 | F: +65 6415 3723 | www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7309948Z



Name
ONG CHAI YUIN
(WANG CAIYUN)
王彩云
Race
CHINESE
Date of Birth
17-03-1973
Country of Birth
SINGAPORE

Sex
F

3347942



NRIC No: S7309948Z



Blood Group
-
Date of issue
27-03-2003

APT BLK 298B COMPASSVALE STREET #12-168
SINGAPORE 542298
NRIC No: S7309948Z Date: 24-10-2004 No: 5021689

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
Name
ONG CHAI YUIN (WANG CAIYUN)
Birth Date
17 Mar 1973
Issue Date
17 Feb 2003

900202272H

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

VALID DATE
05 Mar 1999

NP 428A

Licence No: S7309948Z

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

