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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	25/03/2019 10:23
Date Of Accident	22/03/2019 15:30
Exact Location Of Accident	FORT ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK261A
Insured/Policyholder	
Name Of Registered Owner	TAN TECK NGUAN MICHAEL
NRIC No	S1217289C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81137325
Alternative Phone No	OTHERS-81137325
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180
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?	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	2100495400-02
Cover Note Number	
Driver	

Driver

Name of Driver LAURA TAN SI RU

 NRIC No
 \$9022862E

 Date Of Birth
 12/06/1990

 Occupation
 INDOOR

 Date Of Driving Pass
 22/10/2010

Driving Experience 8 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-81137325

Fax Number

Contact Number

EMail Address LAURATAN.SR@GMAIL.COM

BLK 205 ANG MO KIO AVENUE 1 #07-1089 Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **CHILDREN**

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 ON 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

2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

YES Was any other material or property damaged?

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

NO

NO

Number of Passengers (Including Driver)

1

Details of Police Action

NO

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 SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1 SFT8550A

Vehicle Registration Number Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver LOH PENG KEONG (LUO BINQIANG)

NRIC/Passport Number S6945572G Contact Number 98534533

Address Postcode

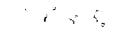
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 11

SKETCH PLAN



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 as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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: 2 5 MAR 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time: 2 5 MAR 2019

Reporting Centre Personnel's Signature

Name: Jenny Lim NRIC/FIN No.: S6927273H

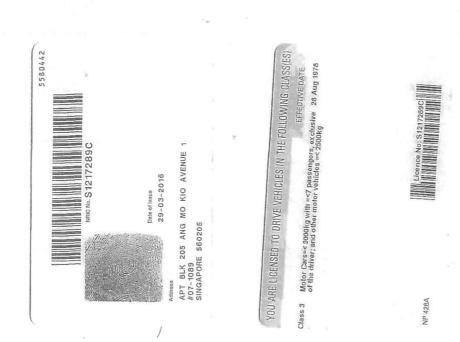
Sketch Plan Pg. 2

SKETCH PLAN		_			
					A)SKKILLIA
			hean vehid opposi tumi	le on te side ing right	BSF 184504
	Cal behind		В		
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT	Golden - Corring front)	Fort	Poad -
On 23/3/2019 at an Forf Road looking to traffic junction, I second car in line, lif up, the car in followed suit, with that there we how which also began vehicle number SFT direction did not subsequently hit me alighted to take pl	paused to want behind a gold front of me property of me property vehicles right tungstop at the justice on the front	it for the radioced vector of the many control of my	car. who with the cooling to road idst of continued we hide.	atrow. on the right the same in the same of ano of both dri	I was the right turn arrown and I was seen opposing direction the car the opposing g forward and vers immediately
Nobody Was Injuned I was in full control					
DECLARATION I/We declare the foregoing particul	ars are true in every resp	ect.			
Policybeider's Signature Date & Time: 2 5 MAR 2019	Driver's Signature (If driver is not the po	olicyholder) 2 5 MAR 2019	Nam		Personnel's Signature Jenny Lim S6927273H

Jenny Lim 86927273H

GJARMC SketchPlanForm_V3

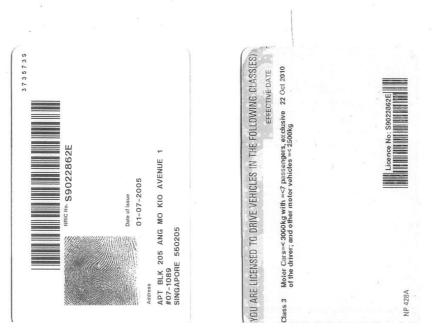
Owner's NRIC + Driving Licence Pg. 1

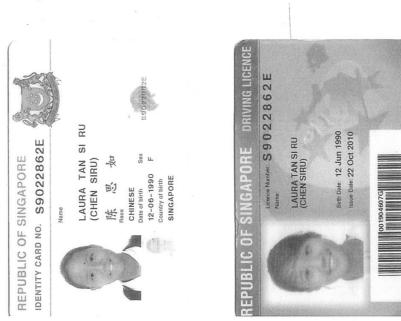






Driver's NRIC + Driving Licence Pg. 1







CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

lame of Policyholder : Tan Teck Nguan Michael : 05 Jan 2019 To 04 Jan 2020 eriod of Insurance

: 27491030738445 ingine No. : WDD2050402R221021

Chassis No.

: SKK261A Vehicle No. : 2100495400-02 Policy No.

Endorsement No.

: 13 Dec 2018 Issued Date

ABOUT THE COVER : MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE Make/Model

First Year of Registration : 2017 Sum Insured : Market Value Insuring with COE/PARF : Yes Engine Capacity/Tonnage : 1,595.00 CC Off Peak Car : No : NA

Driver Restriction 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.
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 23 and/or has less than 2

and to the connection with any trade or business or use for any purpose in connection with Motor Trade. Age Condition

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compansation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Teck Nguan Michael - \$800 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle 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 to the Vehicle 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 Sola Agent's workshop.

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 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 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 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 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 other AIG SIG Mobile App. Simply search and download "AIG SIG" from Trunes or Google Play.

IMPORTANT NOTES

I/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. 189), Part IV or the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504217000

JLA INSURANCE AGENCY PTE LTD 80 ANSON ROAD #11-01 FUJI XEROX TOWERS SINGAPORE 079907

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

Accident Photo



Accident Photo

Accident Photo



Chassis Number

