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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number Contact Number

EMail Address

Gender

- 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

	ACCIDENT STATEMENT
Date Of Report	01/04/2019 17:22
Date Of Accident	19/03/2019 08:15
Exact Location Of Accident	UPPER SERANGOON ROAD OUTSIDE BETHEL PRESCHOOL
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLN6072L
Insured/Policyholder	
Name Of Registered Owner	LAM TUNG YING (LIN DONGYING)
NRIC No	S7715588J
Email Address	ELKAN.LAM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91289422
Alternative Phone No	OTHERS-91289422
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ATTRAGE 1.2 CVT
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	REPORTING ONLY
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	2100507967-01
Cover Note Number	
Driver	
Name of Driver	LAM TUNG YING (LIN DONGYING)
NRIC No	S7715588J
Date Of Birth	11/06/1977
Occupation	OUTDOOR
Date Of Driving Pass	16/10/2007

11 YEARS AND 5 MONTHS

(LOCAL) +65-91289422

ELKAN.LAM@GMAIL.COM

OTHERS-91289422

MALE

9 LEW LIAN VALE Address

#03-29 537020

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

SIDE SWIPE Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Postcode

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

NO

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

PLS REFER TO THE ATTACHED 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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKQ8233Y

Vehicle Make/Model/Colour

AUDI A4

Details Of Properties Vehicle Category

PRIVATE CAR

Name of Driver

BRYAN

NRIC/Passport Number

Contact Number

98211445

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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
- 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
- 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
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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)
 - (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
- (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

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No :



PCV Accident Report (For Reporting only)



Braddell Sir	ompleted B	Sg. Kadut y Driver Who Is I	Pandan Involved in The Ac	Loyang	Ubi
Date & Time of Accident	W-0.	Mar 2019		Time:	0815 65
Date & Time of Reporting	Date: 19	Mar 2019	1619 has	Time:	1619 hvs
Place of Accident	Upper	Sevangoon	Road, outsie	he Beth	el Preschool
Vehicle Reg. No. :	0.0	6072L	Make / Model :	MASU	bishi Attrage
Purpose of Use at Time of A	ccident : Goods	transportation / private	usage / others:		U
Name : Lau	TUNG 1	1009	NRIC / FIN No.	57	7155885
Address : 9 LEN	1 LIAN	VALE # 0	3-29	700	
Postcode: 537c	20		Date Of Birth :	11	Jun 1977
Home :		_	Handphone :		1289422
Email:	1000 600	natt.com	Gende	-	ale / Female
Occupation : Management	-		al / Education / Others		
Type of Claims : Third Party			al / Education Cinera		Liennas Bass Date :
Driver Status : (Owner / Non-o	COMPANY TO SERVICE STREET	ving Experience :	12	Licence Pass Date :
		ADDRESS OF THE PARTY OF THE PAR			
Relationship with Owner: Vehicle Towed In?	Yes / No	Owner's NF My Insurance Compar	RIC / Company Reg. No :	lig	
Police Reported ?	Yes / N6)	Police Report Referen	ice No. ;		
Company's Vehicle ?	Yes (No	Insurance Policy No:			
Do you have witness ?	res / No	Type of Policy: Compr	rehensive) Third Party Fin	e & Theft / Th	ird Party Only
(If Yes, Witness Name & Co	ontact No :	Chiang S	eat Ching	8	96826045
Weather Condition	; Cle	ar / Cloudy / Light Rains	s / Heavy Rains		
Road Condition	: (6 ₀)	COLORS CONTRACTOR CONTRACTOR CONTRACTOR	nyone injuried in the accide	ent?	Yes / (No)
Other vehicle or property da	amage ? Yes	/ (No) Was N	otice of Intended Prosecut	tion given ?	Yes / No
Describe How Accident Hay	ppened : Please	use SKETCH PLAN fo	or accident description & s	ketch of accid	ent scene
Third Party's Details (U					
Vehicle Make / Model :	I Andi	A4	Vehicle Reg. No	: 51	KQ 8233 Y
			NRIC No.		
Name of Driver	In MI A			190	
Name of Driver :	Bryo		Constitution and the second		78211445
Name of Driver : Insurance Company : Driver's Declaration :			Handphone given in this report are		1

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7715588J



Name

LAM TUNG YING (LIN DONGYING)

林 Hace

CHINESE Date of birth 11-06-1977

Country of birth
SINGAPORE

Sex

G77,1558%_



3789200

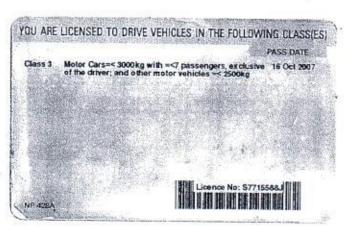


NAIC No. S7715599

20-08-2005

EW LIAN VALE #03-29 VGAPORE 537020 IC No: S7715588J

Date: 27/11/2018





CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder Period of Insurance

: Lam Tung Ying (Lin DongYing) : 11 May 2018 To 10 May 2019

Engine No.

: 3A92UDT1860

Chassis No.

: MMBSTA13AHH004596

Vehicle No.

: SLN6072L

Policy No.

2100507967-01

Endorsement No.

Issued Date

: 26 Mar 2018

ABOUT THE COVER

Driver Restriction

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage : 1,193.00 CC

Sum Insured : Market Value

First Year of Registration : 2017

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 his/her permission.

: NA

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 years' driving experience

Off Peak Car : No

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-tosting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 3 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) 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)

Lam Tung Ying (Lin DongYing) - \$600 (Own Damage)

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

1. Cycle & Carriage Customer Service Centres (For windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688

2 Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

3 Cycle & Carriage Body & Paint Centre. Add: 209 Pandan Gardens Singapore 609339 65684501

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: DBS BANK LTD

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 of 5 the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500722050

C&C FULCO-CORPORATE 22 UBI ROAD 4 FULCO BUILDING SINGAPORE 408617 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE