

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	27/03/2019 16:48
Date Of Accident	27/03/2019 13:45
Exact Location Of Accident	SLIP ROAD OF PAYA LEBAR ROAD TO SIMS AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCA61H
Insured/Policyholder	
Name Of Registered Owner	LEE YAM POH
NRIC No	S2091585D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96616161
Alternative Phone No	Others-96616161

Vehicle Particulars

Manufacturer	VOLVO
Model	XC60
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?	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	1800021134
Cover Note Number	

Driver

Name of Driver	LIEW NG MOI
NRIC No	S1852486D
Date Of Birth	05/04/1954
Occupation	INDOOR
Date Of Driving Pass	15/08/1988
Driving Experience	30 YEARS AND 7 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96616161
Fax Number	
Contact Number	
EMail Address	KANYARATN61@GMAIL.COM
Address	61 CHUN TIN ROAD
Postcode	599637
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB2080X
Vehicle Make/Model/Colour	NISSAN CABSTAR
Details Of Properties	C/O HUA HENG ELECTRICAL SERVICE
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	GOVINDASAMY BALASUBRAMANIAN
NRIC/Passport Number	F7741825M
Contact Number	

Address	9 PARK VILLAS TERRACE
Postcode	53058652E
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan


SKETCH PLAN


IMPORTANT NOTICE


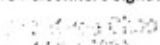

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. 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:

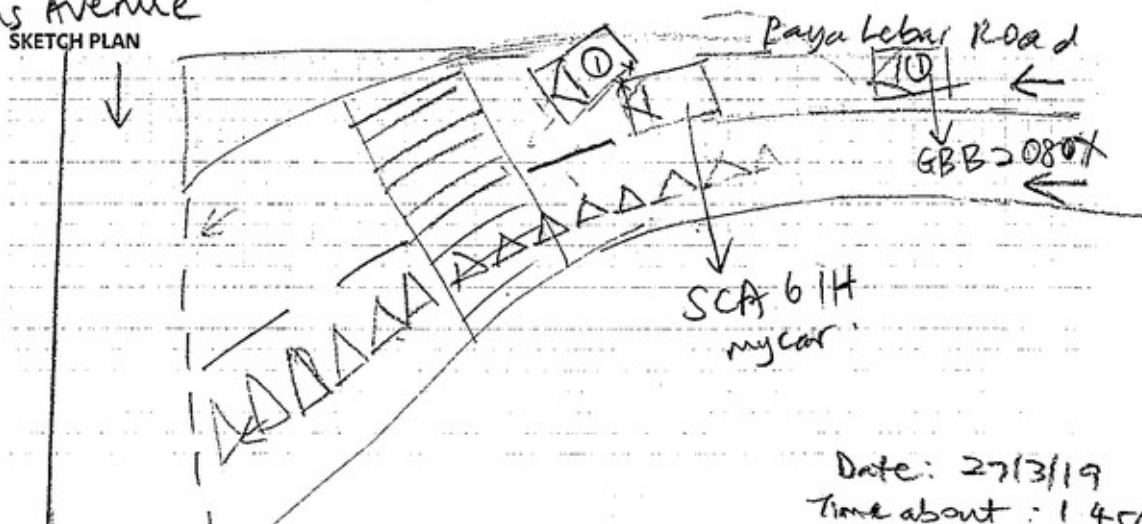
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 7 MAR 2019


Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.: 

Sims Avenue
SKETCH PLAN

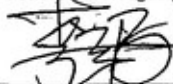


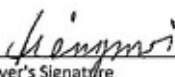
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


The incident happened on 27/3/2019 about 1.45pm.
I was driving along Paya Lebar Road into the slip Road while turning left, the left lane was under construction so I filtered into the right lane and already on the lane. I saw the vehicle GBB 2080X cut into my lane and I stopped to let the vehicle GBB 2080X go. But the vehicle GBB 2080X drove in high speed and collided onto my vehicle front right portion side which caused my front right portion side dented and damage.
The other vehicle GBB 2080X on the left backside no damage.
No one 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: 27 MAR 2019


Reporting Centre Personnel's Signature
Name: Pdt Wong Choo
NRIC/FIN No: S601005A

CERTIFICATE OF INSURANCE



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Lee Yam Poh (Insured-Not-Driving)
 Period of Insurance : 28 Feb 2018 To 31 Aug 2019
 Engine No. : B4204T111290405
 Chassis No. : YV1DZ40LDG2799468

Vehicle No. : SCA61H
 Policy No. : 1800021134
 Endorsement No. :
 Issued Date : 28 Feb 2018

ABOUT THE COVER

Make/Model : VOLVO XC60 T5 DRIVE E

Engine Capacity/Tonnage : 1,969.00 CC

Sum Insured : Market Value

First Year of Registration : 2015

Driver Restriction : NA

Off Peak Car : No

Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

Any person other than the Policyholder who is using the Policyholder's car with further permission. This Policy is not valid for any other driver other than the Policyholder only if he/she meets the specified age condition.

*You have to pay an additional sum of \$500 as "Young Driver Insurance Driver Excess" ("YDRE") if you are or your Authorized Driver (named or unnamed) is under the age of 25 and/or has less than 2 years of driving experience.

Age Condition : All Age Condition

Limitation as to use*

This policy is for private use and pleasure purposes only for the Policyholder's business.

This Policy is not valid for hire or reward, driving for hire, racing, speed-making, stalling, trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or for any purpose inconsistent with Motor Traffic.

Loss of Use : 1500hrs - 1000hrs Optional

*Limitation required as per Section 2 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 109) and Section 54 of the Road Transport Act, 1997 (Malaysia) are not to be included under these conditions.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen - \$100

Named Driver and Excess (where applicable)

1st/2nd/3rd/4th - \$500 (Own Damage)

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

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. 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 State Agents' workshop.

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6738 9200. Alternatively, You may refer to AIG website www.aig.com.sg or AIG 50 Mobile App. Simply search and download "AIG 50" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

We hereby certify that this Certificate of Insurance is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 109), Part IV of the Road Transport Act, 1997 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia).

0115020000

CHEN WAI KWANG, ANDREW
 BLK 15 UPPER BOON KENG ROAD #09-1055
 SINGAPORE 380015

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

78, Shenton Way #07-16 AIG Building 3070120 | T: +65 6419 3020 | F: +65 6415 3723 | www.aig.com.sg

AIG Asia Pacific Insurance Pte. Ltd.

OWNER'S NRIC

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2091585D





Name
LEE YAM POH
李炎坡

Race
CHINESE

Date of birth
01-01-1945

Sex
M

Country of birth
INDONESIA



4600488



NRIC No. S2091585D



Date of issue
25-06-2010

Address
61 CHUN TIN ROAD
SINGAPORE 599637



DRIVER'S NRIC + DRIVING LICENCE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1852486D



Name

LIEW NG MOI

廖五妹

Race
CHINESE

Date of Birth 05-04-1954 Sex F

Country of Birth
MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1852486D
Name

LIEW NG MOI

Birth Date: 05 Apr 1954

Issue Date: 10 Nov 2003



3049653

NRIC No. S1852486D



Blood Group Date of issue
O+ 23-10-1998

Address
61 CHUN TIN ROAD
SINGAPORE 599637

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 15 Aug 1988



NP 428A

Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



THIRD PARTY - DRIVER'S DRIVING LICENCE

