Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 28/05/2019 09:31

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

- 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

	ACCIDENT STATEMENT
Date Of Report	28/05/2019 09:26
Date Of Accident	28/03/2019 17:00
Exact Location Of Accident	OLD AIRPORT CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SDP6039T
Insured/Policyholder	
Name Of Registered Owner	CHIA AH CHER
NRIC No	S0087175C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97543818
Alternative Phone No	Office-97543818
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E250
Exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
/ehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800054402-01
Cover Note Number	
Driver	
Name of Driver	CHIA AH CHER
NRIC No	S0087175C
Date Of Birth	12/12/1951
Occupation	INDOOR
Date Of Driving Pass	28/05/1992

26 YEARS AND 10 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-97543818

Fax Number

Contact Number OFFICE-97543818

EMail Address NOEMAIL

Address 25 MUGLISTON ROAD

Postcode 437714 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 **COLLIDED INTO PARKED VEHICLE**

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?

NO

1

Was any other material or property damaged? YES I have been approached by unknown person(s) NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name ROCHOR NEIGHBOURHOOD POLICE CENTRE

ROAD: 11 KAMPONG KAPOR ROAD, POSTCODE: 208678, COUNTRY: **Police Station Address**

SINGAPORE

Police Station Contact TEL NO: 1800-2949999 - FAX NO: 63918583

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT NO: T/20190416/2083. ROCHOR NPC.

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

SLG713Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category Name of Driver

PRIVATE CAR

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor

(Please contact your insurance company for any further details)

Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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 ladgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 (ii) investigating the accident and/or my claims;
- (iii) carry ing out and/or dealing with my instructions or responding to any enquiries by me;
- (b) 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.
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Driver's Signature (# driver is not the policyholder) / Date

Witnessed By Reporting C Personnel

INDE

Sketch Plan



4544



Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No. 1800-2949999

1 of 3 Report No. T/20190416/2083

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/04/2019 13:34			Vide Report No.:	Station Diary No.		
Inform	ant's Partic	ulars		79		
Name of Informant: CHIA AH CHER ID Type / ID No.: NRIC NO / S0087175C Nationality: SINGAPORE CITIZEN			Address:			
			76 DESKER ROAD SINGAPORE 209599 Contact No.;			
			Home/Office: Email:	Office: Mobile: 97543818		
Sex: Male	Sex: Age: Date of Birth		Type of Informant:			
Race: Chinese		1	Language:	Institution / School Name:		
Occupati SELF EM	on: IPLOYED		Driving Licence Information: Class: 3	Date of Expiry:		

Type of	Non-Injury Others	Drink	Date/Time of		Type of Location
Accident: Others		Drive: No	Accident:		
OLD AIRPOR Carpark					
Weather:		Road Surface		-	
Weather: Clear		Road Surface: Dry		Ros	ed Speed Limit:
Weather: Clear Traffic Flow: One Way				Traf	fic Volume:
Weather: Clear Traffic Flow: One Way Type of Collision	n: Against - Parked Ve	Traffic Control: Not Controlled		Traf Ligh	fic Volume:

a No	Type	Make	The second	-	A STATE OF THE STA	WHITE STORY
SDP80391	Car		Model	Color	Condition	No of Passenger
	S. Cal	MERCEDES BENZ	E 250CGI	Grey	No Damage	1

Vehicle No.	Insurance Company			THE RESERVE	
SDP6039T A	AIG ASIA PACIFIC INCURANCE	Insurance No	Effective	Evels D.	
		1800054402	14/05/2018	Expiry Dat 11/05/2019	





Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999

2 of 3 Report No. T/20190416/2083

CONTINUATION OF REPORT

Brief Details.

On 28/03/2019 at about 1700hrs, I was at Old Airport road carpark finding a parking lot. When sound one lot and reverse my vehicle to go in the lot. I suddenly felt that my vehicle was not moving, when I have and check my rear side. I noticed that I slightly hit onto a vehicle which was beside the said empty pasking lot.

During then, I went down to make a check and no damages was observed from both my vehicle and the other vehicle. I then make a move as I was in a rush. I did not leave any note of my particulars behind.

I wish to state that no Traffic police or ambulance were at scene. No one was injured. I can't remember the vehicle plate number as well.

I received a letter (Reference no: TP/IP/23715/2019) from traffic police in regards to this incident and as such, lodging this report.





Police Station Of Origin; Rock. I N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999

3 of 3 Report No. T/20190416/2083

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

instruction of the control of the co

Stonature Of Officer Recording The Report:	Signature Of Informant:
Sg! 2 DOVVSON TAN SOO HAO	Elvia
Signature Of Interpreter:	
Not applicable	Date/Time:
	16/04/2019 13:34
Officer In Charge Of Case:	
IP/GIA/	Classification Of Case:
Staff Sgt WONG SIEU LUI	
Contact No.: 65476151	
uthentication Stamp	
168	
0	



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE Name of Policyholder : Chia Ah Cher Period of Insurance : 12 May 2019 To 11 May 2020 Engine No. : 27186030024933 : WDD2120472A152723

: WDD2120472A152723

Vehicle No. Policy No.

: SDP6039T : 1800054402-01

Endorsement No. Issued Date

: 29 Apr 2019

ABOUT THE COVER

Make/Model

: MERCEDES BENZ E250 CGI BE

Engine Capacity/Tonnage : 1,796.00 CC Driver Restriction

Sum Insured : Market Value

Person or Classes of Persons Entitled to Drive*:

: NA

Off Peak Car : No

First Year of Registration : 2010 Insuring with COE/PARF : Yes

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with his/her parasistion. This Policy will indemely the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional aum of \$3,000 as "inexperienced Driver Excess" (1DR*) If You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition

: 30 years old and above

Limitation as to use* :

Lennisseuror alse to come ... Use only to scool, demonstrating and pleasure purposes and for the Policyfloider's business.
This Policy does not over use far here or reward, diving fusion, driving lest, recing, pece-making, reliebility stall or speed-lessing, the carriage of goods other than samples in connection with Motor Trade.

Loss of Use 2000co

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

EXCESS

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

Windscreen: \$100

Named Driver and Excess (where applicable)

Chia Ah Cher - \$800 (Own Damage)

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

1.Cycle & Carriage Euros Service Center (For accident reporting only). Acd: 330 Util Road 3 Singapore 403050 62001616
 2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair. Add: 168 Pandan Loop Singapore 126376 82001618

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

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

I/We nevely early that the policy to which the Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Perty Risks and Compensation) Act (Cep. 186), Part IV or the Rose Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Perty Risks) Rolles, 1969 (Melaysia).

0500660050

CYCLE & CARRIAGE - CORPORATE 239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

78 Sharing Way 207-19 AIG Building 8070120 | T-65, 6419 3000 | www.wig.ag

AIG Asia Pacific Insurance Pie. Litt

Accident Photo









Driving License



Accident Photo

