

## 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             | 05/04/2019 10:01 |
| Date Of Accident           | 04/04/2019 13:45 |
| Exact Location Of Accident | PUNGGOL CENTRAL  |
| Country/State of Loss      | SINGAPORE        |

| DETAILS OF OWN VEHICLE      |                        |
|-----------------------------|------------------------|
| Vehicle Registration Number | SMC5516B               |
| <b>Insured/Policyholder</b> |                        |
| Name Of Registered Owner    | TAN LEE BOON           |
| NRIC No                     | S7300612J              |
| Email Address               | KEYASEVEN@YAHOO.COM.SG |
| Mobile Phone No             | (LOCAL) +65-94519391   |
| Alternative Phone No        | Office-NOPHONE         |

|                                                                              |                                 |
|------------------------------------------------------------------------------|---------------------------------|
| <b>Vehicle Particulars</b>                                                   |                                 |
| Manufacturer                                                                 | SUBARU                          |
| Model                                                                        | FORESTER-2.0 I-L CVT AWD SR (A) |
| Exact Purpose for which vehicle was being used at time of accident           | PERSONAL/LEISURE                |
| 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                     |

|                           |                                      |
|---------------------------|--------------------------------------|
| <b>Insurance Company</b>  |                                      |
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                        |
| Fleet Policy              | NO                                   |
| Policy Number             | 1800080503                           |
| Cover Note Number         |                                      |

|                      |                       |
|----------------------|-----------------------|
| <b>Driver</b>        |                       |
| Name of Driver       | TAN LEE BOON          |
| NRIC No              | S7300612J             |
| Date Of Birth        | 01/01/1973            |
| Occupation           | INDOOR                |
| Date Of Driving Pass | 16/12/2002            |
| Driving Experience   | 16 YEARS AND 3 MONTHS |

|                                                     |                           |
|-----------------------------------------------------|---------------------------|
| Gender                                              | MALE                      |
| Mobile Number                                       | (LOCAL) +65-94519391      |
| Fax Number                                          |                           |
| Contact Number                                      | OFFICE-NOPHONE            |
| EEmail Address                                      | KEYASEVEN@YAHOO.COM.SG    |
| Address                                             | 86 PUNGGOL CENTRAL #08-15 |
| Postcode                                            | 828720                    |
| 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   | COLLISION - HEAD TO REAR |
| 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                                            |
| 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)                                                     | 3                                             |
| Passenger 1                                                                                 | Name: : TAN YU HENG IAN<br>Gender: : Male     |
| Passenger 2                                                                                 | Name: : TAN XI XUAN KAYLA<br>Gender: : Female |

#### 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 ATTACHED

#### Attachment(s)

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

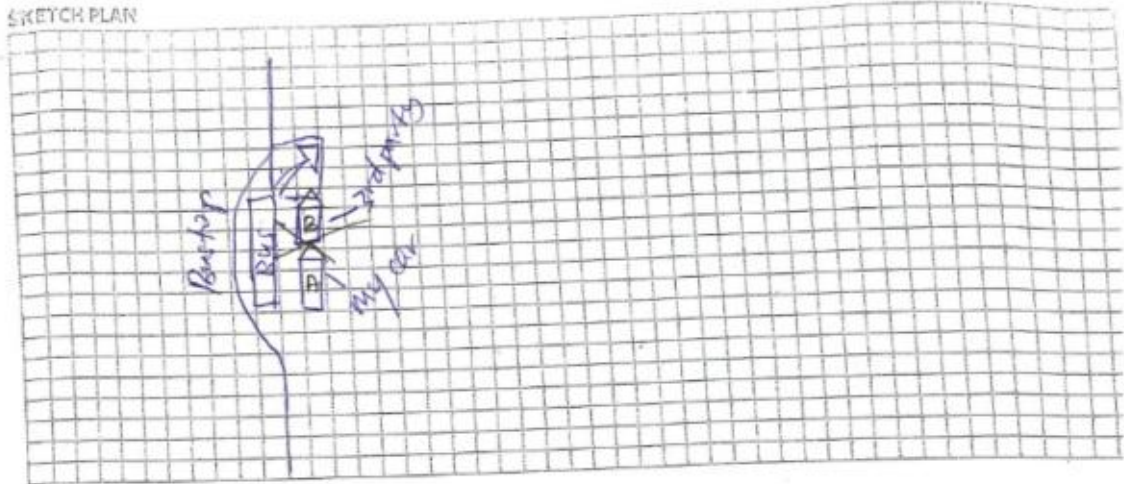
#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |                       |
|-----------------------------|-----------------------|
| Vehicle Registration Number | SJT2963J              |
| Vehicle Make/Model/Colour   | KIA CERATO FORTE BLUE |
| Details Of Properties       | REAR SIDE             |

|                                     |                       |
|-------------------------------------|-----------------------|
| Vehicle Category                    | PRIVATE CAR           |
| Name of Driver                      | VINCENT LAM WAI SHING |
| NRIC/Passport Number                | S8370744E             |
| Contact Number                      | 92394349              |
| Address                             |                       |
| Postcode                            |                       |
| Insurance Company Name              |                       |
| Nature Of Damage                    |                       |
| No. Of Passenger (Including Driver) |                       |

# Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

3rd party car abt to give way to bus coming out of the bus stop. A 3 hit him from the back

VEH A : SMC5516B

VEH B : SJT2963J

## DECLARATION

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

Policyholder's Signature

Date & Time: 4/4/19 2:55pm

GIA&MC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: DANIEL JUDE

NRIC/FIN No.: S9001518D

Common Statement

## 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 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: 4/4/19 1:58pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: DANIEL JUDE

NRIC/PIN No.: S9001518D

WRC No. S7300612J

Hand Group: B+ Date of Issue: 07-12-1994

Address: 88 PUNGGOL CENTRAL #08-15 SINGAPORE 628720

WRC No. S7300612J Date: 19/10/2010

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 18 Dec 2000

NP 428A



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7300612J

TAN LEE BOON (CHEN LIWEN)

陈利文

CHINESE

Date of Birth: 01-01-1973 Sex: M

Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7300612J

Name: TAN LEE BOON (CHEN LIWEN)

Birth Date: 01 Jan 1973

Issue Date: 16 Dec 2002

1000009297H

INSURANCE CERT





## CERTIFICATE OF INSURANCE

### SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tan Lee Boon (Chen L/Wen)  
Period of Insurance : 07 Jul 2018 To 06 Jul 2019  
Engine No. : FB20YE28759  
Chassis No. : JF1SJ5KC5JG111509

Vehicle No. : SMC5516B  
Policy No. : 1800080503  
Endorsement No. :  
Issued Date : 23 Jul 2018

#### ABOUT THE COVER

Make/Model : SUBARU Forester 2.0i-L  
Engine Capacity/Tonnage : 1,995.00 CC  
Driver Restriction : NA  
Person or Classes of Persons Entitled to Drive\* :  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2018  
Insuring with COE/PAF : Yes

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 authorized 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 Authorized Driver (named or unnamed) is under the age of 23 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.

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 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 - \$800 Theft - \$0 Flood Cover - \$0

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Lee Boon (Chen L/Wen) - \$800 (Own Damage)

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

1. Motor Image Enterprise Pte Ltd Add: 19 Lorong 8 Toa Payoh Singapore 319255 64170100

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 8336 8200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://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: MayBank

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

0500619216

TAN CHONG CREDIT SUBARU-HHK

#111 BUKIT TIMAH ROAD

SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

330750

**DAMAGE PHOTO**





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