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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.
- Information provided must be as truthful and accurate 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.

and any other property and the same	ACCIDENT STATEMENT			
Date Of Report	10/04/2019 14:22			
Date Of Accident	09/04/2019 08:40			
Exact Location Of Accident	SLIP RD DUNEARN RD			
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SLK6916T			
Insured/Policyholder				
Name Of Registered Owner	XIA HAIYING			
NRIC No	S7674101H			
Email Address	NOEMAIL			
Mobile Phone No	(LOCAL) +65-98458810			
Alternative Phone No	OFFICE-98458810			
Vehicle Particulars				
Manufacturer	NISSAN			
Model	QASHQAI			
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			
lf 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	2100499244-02			
Cover Note Number	·			
Driver				
Name of Driver	XIA HAIYING			
NRIC No	S7674101H			
Date Of Birth	25/08/1976			
Occupation	INDOOR			
Date Of Driving Pass	10/10/2007			
Driving Experience	11 YEARS AND 5 MONTHS			
	FEMALE			
Mobile Number	(LOCAL) +65-98458810			
ax Number	and the entropy and the entropy and the state of the stat			
Contact Number	OFFICE-98458810			
Mail Address	NOEMAIL			

Address 257 ARCADIA RD #02-04

Postcode 289851

Was driver an employee of the Insured's Company N

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? YES

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

1

Number of Passengers (Including Driver)

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 ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH DRIVER

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SDS6762Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

XIA HAIYING

BODY

SLK6916T

YES

NO

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.
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- 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.
- 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.
- 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 information of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - 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

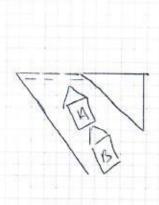
Date & Time:

Driver's Signature

(If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



A - SLK 6916T B - SDS 6762Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date of Accident	: 9/4/19 Accident Time: 8.40um (24-HR-Format)
Accident Place	: slip Road Dunearn Road
Vehicle. No. (Car Plate No.)	: SLK 6916T Make/Model: Nissun Qashqui 1.2
Insurace Company	: Al (7 Policy No: 2100479744-02
Owner or Company Name /IC No.	: XIa Haiying / 57674101H
Owner or Company Contact No.	:Owner's Hp 98458810 Company Tel
DRIVER'S Name / IC No.	: as asove
DRIVER'S Date Of Birth	: 25/8/1976 DRIVER'S License Pass Date 10/16/2007
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Own
DRIVER'S Address	= 257 Arcadia Ruad #02-04
DRIVER'S Contact No./ Alt No.	:1)
DRIVER'S Occupation	: INDOOR \OUTDOOR (e.g. working inside or outside office)
Email Address	:
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
	Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Dri	
Was there any video Captured by car Exact purpose for which vehicle was Any Injury (If YES, Pls state):	camera: YES NO being used at the time of accident: Private use \ Work purpose
Other Pa	rty Driver's Particular (if any)
Vehicle, No: SDS 67625	
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	
IC No. Driver/Contact:	IC No. Driver/Contact:

* NEW - Passenger's name & gender:

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7674101H



夏海

CHINESE Date of Bath 25-08-1976

25-08-1976 F Country of birm 8757410 00

REPUBLIC OF SINGAPORE DRIVING LICENCE



Liberton Santon S7674101H

XIA HAIYING

Men Daw 25 Aug 1978

801535792D



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

PASS DATE

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passangers, exclusive of the driver; and other motor vahicles without clutch pedals; are

18 Oct 2007

NP 428A

Licence No: \$7674101H



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Xia Haiying

Period of Insurance

: 24 Jan 2019 To 23 Jan 2020

Engine No.

: HRA2308504A

Chassis No.

: SJNFEAJ11U1720846

Vehicle No.

: SLK6916T

Policy No.

Issued Date

: 2100499244-02

Endorsement No.

06 Dec 2018

ABOUT THE COVER

Make/Model

: NISSAN QASHQAI 1.2 DIG-TURBO

Engine Capacity/Tonnage : 1,197.00 CC

Sum Insured : Market Value

First Year of Registration : 2017

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*: a) The Policyholder

as the Possynapur.

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.

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

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, 1997 (Malaysia), are not to be included under these headings,

EXCESS

Section 1 Fire - \$0 Own Damage - \$600 Thort - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Xia Halying - \$600 (Own Damage)

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

1.TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212

2.Autokuton Industrial Add: 19 Ubi Read 4 Singapore 408623 64509688
3.TC AutoCinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
4.Tan Chang Motor Sales Add: 913 Bukit Timah Road Singapore 588623 64694091 64894092 64694093
5.Tan Chang Motor Sales Add: 97 Loreng 8 Tos Payoh Singapore 319254 63570753 63570754

For other Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency holling at +85 8338 6200. Alternatively, you may refer to AlG website www.alg.com.sg or AlG SG Mobile App. Simply search and download "AlG SG" from Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

I/We hareby 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).

0500610426

TAN CHONG CREDIT PTE LTD-YKM 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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