

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	04/04/2019 14:59
Date Of Accident	03/04/2019 17:45
Exact Location Of Accident	AYE BEFORE NORMANTON PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF3913Y
Insured/Policyholder	
Name Of Registered Owner	HOW TI HWEI
NRIC No	S7018956I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96706784
Alternative Phone No	Others-96706784

Vehicle Particulars

Manufacturer	VOLVO
Model	S60-2.0 D4 (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If 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	2100480209-02
Cover Note Number	

Driver

Name of Driver	HOW TI HWEI
NRIC No	S7018956I
Date Of Birth	17/05/1970
Occupation	INDOOR
Date Of Driving Pass	09/06/1988
Driving Experience	30 YEARS AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96706784
Fax Number	
Contact Number	OTHERS-96706784
EMail Address	NOEMAIL
Address	3 WEST COAST WALK #05-05
Postcode	127140
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	CHAIN COLLISION
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	3
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)	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

REFER TO ATTACHMENT.

Attachment(s)

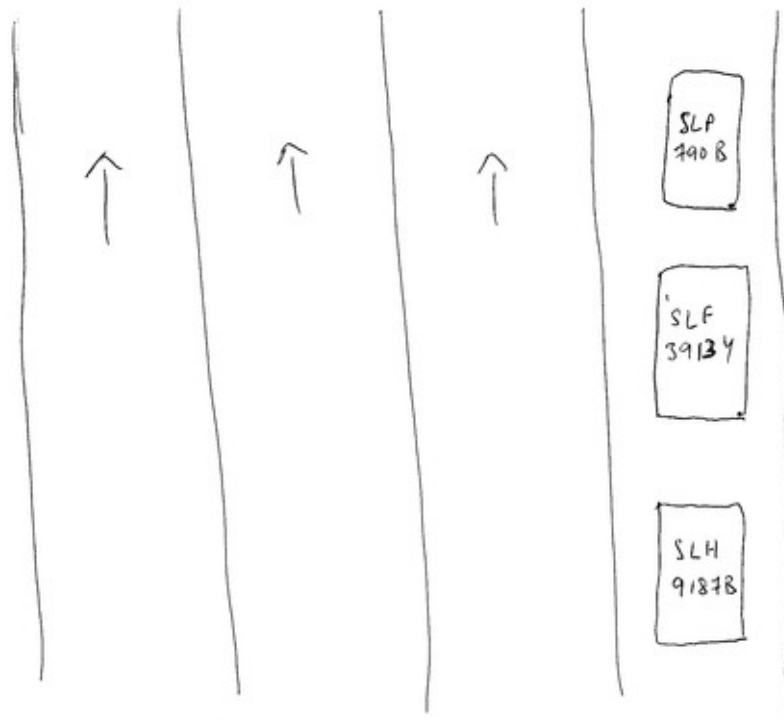
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH9187B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DANIEL ALEXANDER JAMES MOGG
NRIC/Passport Number	G3462304Q

No. Of Passenger (Including Driver)

Accident Sketch Plan



AYE before Normanton Park Exit

At around 5.45 pm on 3rd April 2019, on Lane 1 on AYE before Normanton Park, the vehicle in front of me (SLP 790B) braked suddenly. In turn, I had to brake to avoid hitting the vehicle. However, the car behind (SLH 91878) hit into my car, and pushed my car forward to hit the car in front. ^{Damage to left front of my car} ~~No visible damaged to my car.~~ Slight dent on license plate of SLH 91878. Dent on boot of SLP 790B.

How Ti Hwei
NRIC # S70189561

4th April 2019.

SINGAPORE ACCIDENT STATEMENT

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1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for filing.
2. Please report correctly the details of the accident to speed up the claims process.
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4. 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.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

ACCIDENT STATEMENT

Date and Time of Accident	Date: 03/04/2019 Time: 1745hrs.
Exact Location of Accident	Ave before Normanston Park.

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF 39BY
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INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)	HOW TI HWEI
Personal Identification - NRIC (Singaporean/PR)	S7018956I
- FIN/Passport Number	
- Not Applicable	

VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model	Manufacturer Volvo Model S60 D4
Type of Vehicle*	<input checked="" type="radio"/> Saloon <input type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input type="radio"/> Others
Exact Purpose for which vehicle was being used at time of accident	Local
Are you claiming under your own insurance policy for repair to your vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If No, P/s select: <input checked="" type="radio"/> Third Party <input type="radio"/> Reporting)
Vehicle Category*	<input checked="" type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle

INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company*	Alh
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input checked="" type="radio"/> No
Policy Number	2100480209-02
Motor CI	

DRIVER

	<input checked="" type="radio"/> Same as Insured above
Name of Driver	HOW TI HWEI
Personal Identification - NRIC (Singaporean/PR)	S7018956I
- FIN/Passport Number	
Date of Birth	12 dd/ 05 mm/ 1989
Driving Date Pass	09 dd/ 06 mm/ 1988
Year of Driving Experience	Year(s) Month(s)
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female
Contact Number / Mobile Phone / Fax No.	9670 6789

Address of Driver	3 West Coast Walk #05-05		Postcode (127140)
Email Address			
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If No, Relationship of the Driver with the Insured	Owner		
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Vehicle Registration Number of Driver's Own Vehicle (if applicable)			
Insurance Company of Driver's Own Vehicle (if applicable)			
GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	Chain Collision		
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____		
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____		
OTHER INFORMATION			
Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Was any other vehicle or property damaged?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Was there any video captured by Car Camera?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Number of Passengers (Including Driver)	01		
DETAILS OF POLICE ACTION			
Was the Accident reported to the Police?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, please state which Police Station.)		
Police Station Name			
Police Station Address			
Police Station Contact	Tel No.	Fax No.	
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, against whom?)		
DETAILS OF OTHER VEHICLE / PROPERTY 1			
Vehicle Registration Number	SLH 9187B		
Vehicle Make/ Model/ Colour			
Details of Properties			
Name of Driver	Daniel Alexander James Mogg		
Personal Identification - NRIC (Singaporean/PR)	G3462304Q		
- FIN/Passport Number			
Contact Number			
Address			
Name of Insurance Company			
Nature of Damage			
No. of Passenger (Including Driver)			
(Note - Please use page 6 if you need to add more vehicles)			

DETAILS OF OTHER VEHICLE / PROPERTY 2	
Vehicle Registration Number	SLP 790B
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	Leong Moo Ee
Personal Identification - NRIC (Singaporean/PR)	80855491 I
- FIN/Passport Number	
Contact Number	
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE / PROPERTY 3	
Vehicle Registration Number	
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Contact Number	
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE / PROPERTY 4	
Vehicle Registration Number	
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Contact Number	
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	

SKETCH PLAN

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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.

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.

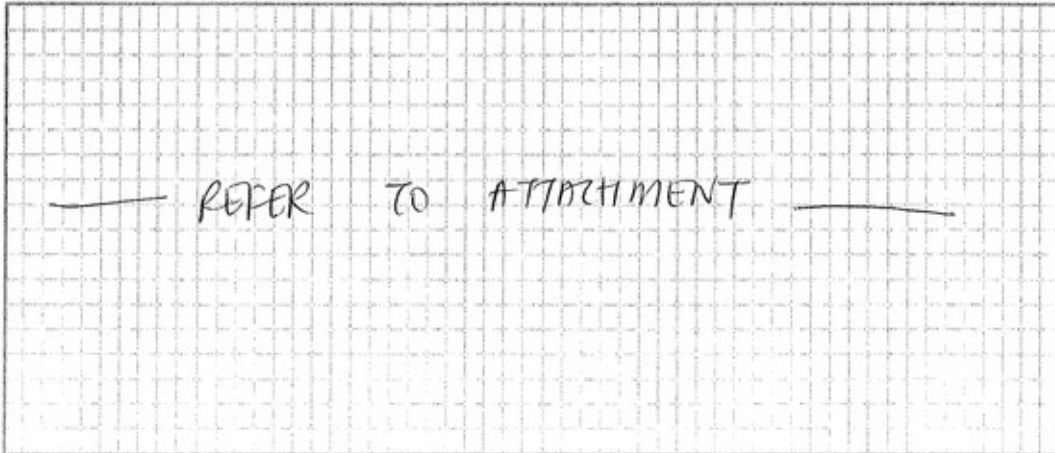
X 

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



REFER TO ATTACHMENT

Describe Circumstance of the Accident

Refer to Attachment .

IMPORTANT NOTE

Under General Condition – Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

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

Witnessed by Reporting Centre Personnel

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder : HOW TI HWEI
 Period of Insurance : 24 Aug 2018 To 23 Aug 2019
 Engine No. : D4204T141718848
 Chassis No. : YV1FSA8CDH2424443

Vehicle No. : SLF3913Y
 Policy No. : 2100480209-02
 Endorsement No. :
 Issued Date : 13 Jul 2018

ABOUT THE COVER

Make/Model : VOLVO S60 D4
 Engine Capacity/Tonnage : 1,969.00 CC
 Driver Restriction : NA
 Person or Classes of Persons Entitled to Drive* :
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2016
 Insuring with COE/PARF : 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 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.

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 2000cc

* 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)

HOW TI HWEI - \$800 (Own Damage)

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

1. Wearn's Automotive Pte Ltd Add: 245 Alexandra Road Singapore 159935 64304890 63788350

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: NA

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).

0503485745

WEARNES AUTOMOTIVE - FML (V)
 45 LENG KEE ROAD
 SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

SSPGW

Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo



Accident Photo



APR 1993

Address

APT BLK 724 CLEMENTI WEST STREET 2
#19-184
SINGAPORE 0512

Blood Group

A+

Date of Issue

12-08-1993

NRIC No. S08554911

LEONG MOO EE
724 CLEMENTI WEST ST 2
#19-184
SINGAPORE 120724



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

