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Owner / Driver: (Tel:)
Policy No: () Period	1: ()	Cover Type: (4), , , , /
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DITOLINE

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number Contact Number

EMail Address

Gender

- 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 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.	son, to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	17/04/2019 14:18
Date Of Accident	17/04/2019 11:45
Exact Location Of Accident	ONE GEORGE STREET CARPARK
Country/State of Loss	SINGAPORE
Charles and the second	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS3926S
Insured/Policyholder	
Name Of Registered Owner	TEO WEE KIONG
NRIC No	S7826871I
Email Address	WINSTON.HYDROSEAL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96621741
Alternative Phone No	OTHERS-97451504
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA 3
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
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	1700065901-01
Cover Note Number	•
Driver	
Name of Driver	TEO WEE KIONG
NRIC No	S7826871I
Date Of Birth	15/09/1978
Occupation	OUTDOOR
Date Of Driving Pass	21/03/2003

16 YEARS AND 0 MONTHS

WINSTON.HYDROSEAL@GMAIL.COM

(LOCAL) +65-96621741

OTHERS-97451504

MALE

Address BLK 128A PUNGGOL FIELD WALK #17-339

Postcode 821128

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 ON 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 2

Was any body injured in the Accident?

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 plains are interest.

soliciting/offering accident claims assistance.

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?

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: FILE TOO LARGE FAIL TO UPLOAD

NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBG1063B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver SASMAN BIN RANI

NRIC/Passport Number \$1819019B Contact Number 98593671

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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:

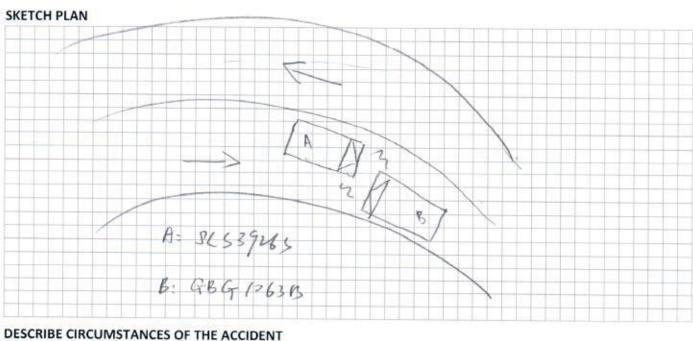
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - 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:
 - 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 .:



At about 1130 am my our exit gantry at one George street second flow. Carpark. As I was driwing down carpark ramp, a van appear in my lane and hit my our at the flow front.
Even though I stopped and horn to alert the driver that he is in the wrong direction, he cole could not all not stop in time
and his vehicle knocked into mine.

DECLARATION

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

Policyholder's Signature

Date & Time: 13 04 19
GIARMC Sketch Plan Form_V3 1.19 pm

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

	Singapore Accident Statement
	12/04/19
Date of Accident	
Time of Accident	(24hr format)
Exact Location Of Accid	ent One George Street carpark
Country/State of Loss	Singaporean
· 可在1000年中中国发展的影响	WWW.Versiter Details Of Own Vehicle
Vehicle No	SLS 3926 S
Insured/Policyholder	
70 pt	Individual / Company
Name of Registered Ow	mer Teo Wee Kitning
Co Reg No	# S78268712
Email Address	wington, hydroseal @ amail-com
Mobile No	9662 1741
Alternative Phone No	97451504
Vehicle Particulars	
Manufacturer	Marda
Model	25 Mazda 3 hatchback
Are you claiming under	your own insurance Yes / No
policy for repair to you	r vehicle?
If No, Please state actio	on to be taken TP Claims / Own Damages / Reporting Only
Vehicle Category	
Insurance Company	
Name of Insurance Con	npany AIG
Type Of Coverage	
Fleet Policy	Yes / No
Policy Number	17000 65 901
Cover Note Number	
Driver	
Name of Driver	Teo Wee Klong
NRIC No	578268711
Date of Birth	15/09/1978
Occupation	Indoor / Outdoor
Date of Driving Pass	21 03 2003
Gender	Female / Male

	0.1		
Mobile Number	96621741		
Fax Number			
Contact Number	64248 340	4	
Email Address	winston. hydroseal	egmail: Low	
Address	128A Punggal F	ield Wallc	
56	#17-339		
Postcode	821128		
Was driver an employee	of the Insured's Company	Yes / No	
If No, Relationship of the	Driver with the Insured	Parameter and the second	
Vehicle Registration Num	ber of Driver's Own Vehicle		
Insurance Company of Di	river's Own Vehicle		
General Information of the	he Accident		
Type of Accident		Head - Kenu	DESTRUCTION OF THE VIOLENCE OF THE CONTROL OF THE C
Weather Conditions		clear.	
Road Surface		bry	
Other Information			THE SPARES
Was any foreign vehicle i	nvoled in this accident?	Yes / 🏀	
Was any body injured in	the Accident?	Yes / No	
Was any other material o	or property damaged?	(Ves / No	
Was there any video cap	tured by Car Camera?	Ves)/(No)	
Number of Passengers (in	ncluding Driver)		
Details of Police Action		-	
Was the accident reporte	ed to the police?	Yes / No	
If Yes, Please state which	Police Station		
Was notice of intended F	rosecution given?	Yes / No	
If Yes, against whom?			
11年10年10年10日第二十年1		r Vehicle Property 1	and a significant services
Vehicle Registration Num		- 1063 B	
Vehicle Make/Model/Col	lour Nis	san NV 350	
Details Of Properties	-	vehicle b.	
Name of Driver	Sasma	n Bin Rani	
NRIC/Passport Number	5/8/	90195	
	Mp = G	18593671 Page 2	

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7826871



TEO WEE KIONG (ZHANG WEIGIANG)

张伟

CHINESE

SINGAPORE

Date of birth 15-09-1978 Country of birth

87828871



S7826871

Date of Issue

16-10-2008

APT BLK 128A PUNGGOL FIELD WALK #17-339 SINGAPORE 821128

NRIC No: \$78268711

Date: 30/07/2011

No: 6931051

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

PASS DATE

Class 2B Metercycles not exceeding 200 cc

Class 2A Motorcycles between 201 cc and 400 cc Class 3 Motor Cars and Motor Tractors the weight of which unlader does not exceed 2500 kilograms

03 Jul 1995 12 Jun 2001 21 Mar 2003

HP= 9662 1741 E-mail: winston.hydroseal @ gmail.com



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Teo Wee Kiong

Period of Insurance : 21 Sep 2018 To 20 Sep 2019

Engine No. : P520466820

Chassis No. : JM6BN24A8J0177039 Vehicle No.

: SLS3926S

Policy No.

Issued Date

: 1700065901-01

Endorsement No.

: 07 Aug 2018

ABOUT THE COVER

Make/Model : MAZDA 3 1.5 SKYACTIV

Engine Capacity/Tonnage : 1,496.00 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
 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 1500cc - 1600cc Optional

* 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 - \$500 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Teo Wee Kiong (Zhang Weiglang) - \$600 (Own Damage)

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

1. Trans Eurokars Pte Ltd. Add: 5 Ubi Close, Singapore 408605 63958899

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hottine 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: HONG LEONG FINANCE LTD

I/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).

0503599190

ARF (AP) PTE LTD - MAZDA

7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX

SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE