SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

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 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.
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7. By the lodgement of this report to the insurers, you hereby conseaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	26/04/2019 14:06		
Date Of Accident	26/04/2019 09:00		
Exact Location Of Accident	SLIP ROAD OF BRADDELL HILL TO BRADDELL ROAD		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SJN3024U		
Insured/Policyholder			
Name Of Registered Owner	WONG SHEEN LUEN DAVID (WANG XIANNENG DAVID		
NRIC No	S7136294I		
Email Address	WONGSHL@YAHOO.COM		
Mobile Phone No	(LOCAL) +65-98381929		
Alternative Phone No	Others-98381929		
Vehicle Particulars			
Manufacturer	MAZDA		
Model	5		
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?	YES		
If No, Please state action to be taken			
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	2100329705-06		
Cover Note Number			
Driver			
Name of Driver	WONG SHEEN LUEN DAVID (WANG XIANNENG DAVID		
NRIC No	S7136294I		
Date Of Birth	20/10/1971		
Occupation	INDOOR		

26/06/1990

28 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98381929

Fax Number

Contact Number OTHERS-98381929

EMail Address WONGSHL@YAHOO.COM

Address BLK 10H BRADDELL HILL

#03-29

Postcode 579727 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

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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

NO

NO

Was any body injured in the Accident? NO

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 claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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 SLP280G Vehicle Make/Model/Colour BMW X1

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver AMET HEMANT MODY

NRIC/Passport Number S6865484Z

Contact Number Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

90888114

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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 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.
- (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

praying Shotchtin stee

Date & Tipe APR 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature
Name: Pin Kwee CROO

NRIC/FIN No.: Sô

S6840583A

SKETCH PLAN	., ,		
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rear of car	· -		
/			
ACCI ADATION			
DECLARATION /We declare the foregoing particular	s are true in every respect		
we declare the foregoing particular	s are true in every respect.		
1			
1 : K			4
Policyholder's Signature	Driver's Signature	Repo	-
2 6 APR 2019	(If driver is not the policyh Date & Time:	older) Nam NRIG	C/FIN No.: Poh Kwee Choo

CARNIC SUBBEQUIENCES



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : WONG SHEEN LUEN DAVID
 Period of Insurance
 : 11 Feb 2019 To 10 Feb 2020

 Engine No.
 : LF10694627

: JM6CR10F290309071 Chassis No.

Vehicle No. : SJN3024U Policy No. : 2100329705-06

Endorsement No.

Issued Date : 24 Jan 2019

ABOUT THE COVER

Make/Model : MAZDA 5 SP

Engine Capacity/Tonnage : 1,999.00 CC Sum Insured : Market Value First Year of Registration : 2009 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 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 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2 Properly Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

WONG SHEEN LUEN DAVID - \$600 (Own Damage)

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

Approved reporting Jethies and Julianoses reparates (per curried via Julianoses Reparates (per curried via Julianoses Reparates (per curried via Julianoses) and an accident repairs to the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

For other Approved Reporting Centres/Alig 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 Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

IWNe 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).

0500682000

INSLINE INSURANCE AGENCY P L ROBINSON ROAD P O BOX 192 SINGAPORE 900342 ANSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

prile

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$71362941





WONG SHEEN LUEN DAVID (WANG XIANNENG DAVID)

王 显 能

CHINESE

Date of Birth 20-10-1971 M Country of Byth

SINGAPORE



1059804



NRC No. S71362941

21-06-1993

APT BLK 10H BRADDELL HILL #03-23 SINGAPORE 579727 NRIC No: \$71362941 Date: 27

Date: 27-01-2002 No: 3866943

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

PASS DATE

. Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 26 Jun 1990 of the driver; and other motor vehicles =< 2500kg

NP 428A





Accident Photo









