MPA119053745 / Premium Automobiles Pte Ltd - UBI ENTRY DATE & TIME: 25/04/2019 17:10 SUBMITTED BY: Tony Foong Chin Fong

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 <u>truthful and accurate</u> 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

aforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	25/04/2019 17:10
Date Of Accident	24/04/2019 18:05
Exact Location Of Accident	BUKIT TIMAH ROAD NEAR NEXUS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKN2658K
Insured/Policyholder	
Name Of Registered Owner	MA YULIN
NRIC No	S2666963D
Email Address	MAYULIN@JUNMA.BIZ
Mobile Phone No	(LOCAL) +65-81387755
Alternative Phone No	Office-65651265
Vehicle Particulars	
Manufacturer	AUDI
Model	A6 C7 2.0 TFSI MU 4G
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	2100374712-04
Cover Note Number	
Driver	
Name of Driver	LIU YUJING
NRIC No	S2666964B
Date Of Birth	27/10/1963
Occupation	INDOOR

29/11/2004

14 YEARS AND 4 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-86085620

Fax Number

Contact Number

EMail Address MAYULIN@JUNMA.BIZ

Address 943 BUKIT TIMAH ROAD #04-48

NO

2

NO

NO

NO

1

NO

NO

Postcode 589659 Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **SPOUSE**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

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 claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

24/04/2019 AT ABOUT 8.05 PM MDM LIU YUJING WAS DRIVING FROM HOME (THE CASCADIA) AND MERGE TO BUKIT TIMAH ROAD. SHE STOPPED AT EXIT AND WATCHED TRAFFIC CONDITION. AFTER CONFIRM NO UPCOMING VEHICLE, SHE SLOWLY MOVED FORWARD. THE VEHICLE SJP9322J SUDDENLY APPEARED FROM RIGHT SIDE AND AT ABOUT 45 DEGREE BETWEEN MIDDLE LANE TOWARDS SIDE LANE (I HAVE PROVIDED VIDEO RECORD). THE INCIDENT CAUSED DAMAGED TO MY FRONT RIGHT SIDE AND LEFT REAR DOOR ON THE OTHER VEHICLE. IT IS CLEARLY CAN BE SEEN THAT OTHER VEHICLE CHANGED DIRECTION AFTER THE HIT.

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 SJP9322J

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)

Sketch Plan

SKETCH PLAN

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- 7. 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)

Lunderstand, 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)
 - (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

Date & Time:

Driver's Signature \ (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Kelvin Name:

NRIC/FIN NO .: 6-8768907 L

The state of the s
24/04/2019 at about 88:05 Pm Mdm Liv YuTing was
driving from home (The caeradia) and Merge to Bukit
Timish Road. She stopped at exit and watched traffi
Condition. After confirm do ou comming tapole she
Slowly moved forward. The vehole STP9322) Suddenly
appeared from right side and at about 450 between
middle lane towards side lane (I have provided video
record). The incident caused damage to my front right
side and laft rear door on the othe vehicle. It is
clearly can be seen that other vehicle changed dreits
after the hit

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:

Reporting Centre Responsel's Signature Name: Relvin Khoo NRIC/FIN No.: G-8768 900 L

































