

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	29/05/2019 15:31
Date Of Accident	28/05/2019 17:30
Exact Location Of Accident	AYE TOWARDS CHANGI BEFORE JURONG TOWN HALL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM7392L
Insured/Policyholder	
Name Of Registered Owner	NORLINA BINTE AHMAD NORLI
NRIC No	S7918871I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91293536
Alternative Phone No	Office-91293536

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	2100506545-02
Cover Note Number	

Driver

Name of Driver	ROTH JOHN BENNY CEBASTIAN @ SRIPHET JOHN BENNY CEB
NRIC No	S6965628E
Date Of Birth	22/07/1969
Occupation	INDOOR
Date Of Driving Pass	08/02/2006
Driving Experience	13 YEARS AND 3 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-97289599
Fax Number	
Contact Number	
E-Mail Address	LINBENNYROTH@GMAIL.COM
Address	11 JALAN MUTIARA #01-02
Postcode	249191
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	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	7
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
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 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	SLA1767S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ARIGA
NRIC/Passport Number	
Contact Number	96383606

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLM1674M
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver GUNNER NEOW
NRIC/Passport Number
Contact Number 92332946
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJR3473T
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 OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SLM6122G
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver ZAM
NRIC/Passport Number
Contact Number 81807679
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SHA1437S
Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category	TAXI
Name of Driver	SHAHRUDIN
NRIC/Passport Number	
Contact Number	90231904
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number	SJF1610H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SOE
NRIC/Passport Number	
Contact Number	97791398
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	ROTH JOHN BENNY CEBASTIAN @ SRIPHET JOHN BENNY CEBASTIAN
Approximate Age	
Injuries Sustain	SHOULDER/BACK/NECK
Injured person in which vehicle?	SLM7392L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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 electronically.
8. Consent under the Personal Data Protection Act (PDPA)

1. I understand, acknowledge, agree and consent that:

- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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' Insurer(s) firm, 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 making of correspondence, statements, notices, 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/final packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purpose").
- (b) all Insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' Insurer(s) firm, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purpose(s); and
- (c) my Personal Information may/fan be disclosed by any of the Insurers and/or GIA to their third party service providers or agent(s) including their Insurer(s) firm, which may be filed outside of Singapore, for one or more of the above Purpose(s).
- (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 (a) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulation, law enforcement and government agencies as reasonably required for the purpose stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

[Signature]

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

[Signature]

Reporting Centre Personnel's Signature
Name:
NIC/FIN No.:

[Signature]

SKETCH PLAN

ME

CHANGI

CHANGI AIRPORT TOWN TOWN ROAD EXIT

A - SLIN 7392 L
B - SLA 1767 S
C - SLIN 1674 M
D - SLA 3473 T
E - SLIN 6122 G
F - SLA 1437 S
G - SDF 1610 H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG ME TOWARD CHANGI ON THE EXTREME RIGHT LANE OF A 3 LANE ROAD, EXPRESSWAY. SOMEWHERE BEFORE CHANGI TOWN TOWN ROAD EXIT, VEHICLE IN FRONT OF ME SLOWED DOWN AND STOPPED DUE TO THE HEAVY TRAFFIC FLOW. AS SUCH, I ALSO APPLIED BRAKE AND MANAGE TO STOPPED COMPLETELY BEHIND OF VEHICLE (G). BUT AT A SUDDEN, I FELT A STRONG IMPACT FROM THE REAR PORTION OF MY VEHICLE. DUE TO THE STRONG IMPACT MY VEHICLE WENT FORWARD HIT ONTO THE REAR PORTION OF VEHICLE (G). AFTER THE ACCIDENT, I ALIGHTED AND OBSERVE THAT I WAS INVOLVED IN A CHAIN COLLISION OF 7 VEHICLE.

A - SLIN 7392 L
B - SLA 1767 S
C - SLIN 1674 M
D - SDR 3473 T
E - SLIN 6122 G
F - SLA 1437 S
G - SDF 1610 H

DECLARATION

I/We declare that the foregoing particulars are true and correct.

Policyholder's Signature
Date & Time:

[Signature]

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

[Signature]

Reporting Centre Personnel's Signature
Name:
NIC/FIN No.:

[Signature]



MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLES

Name of Policyholder	: Norling Bros Animal Mall
Period of Insurance	: 10 Apr 2019 To 09 Apr 2020
Engine No.	: 27091031162511
Chassis No.	: WDD1173422NA56317

Vehicle No.	=	SLM7392L
Policy No.	=	2100608045-00
Endorsement No.	=	
Issued Date	=	26 Feb 2010

ABOUT THE COVER

Model/Model	MERCEDES-BENZ CLASO	First Year of Registration	2017
Engine Capacity/Power	1,665.00 CC	Sum Insured	Market Value
Year of Registration	NA	Off-Peak Car	No
Previous or Currents of Persons Entitled to Drive*		Insuring with COE/CPAPE	Yes

*The insured person is not allowed to be the Registered policy holder with the present insurance policy. The insured person is not allowed to be the Registered policy holder with the present insurance policy. The insured person is not allowed to be the Registered policy holder with the present insurance policy.

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Age Condition : All Age Condition

[illegible]

EXCISES

Section 1:
Fee - \$5 Own Damage - \$500 Theft - \$5 Repair Costs - \$5
Section 2:
Property Damage - \$5
Windscreen - \$100
Named Driver and Excess (also optional)
Nocturnal Excess Annual Rate - \$20 (Own Damage)

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

[illegible]

IMPORTANT NOTES

Ken Purchase Company Employer's Loan: **Danier Financial Services Africa & Asia Pacific Ltd**

0062530040
CYCLE & CARRIAGE - NT
239 ALBANY ROAD
DANFORTH 15900
Underwritten by AIG Auto Pacific Insurance Pte. Ltd.

For Use

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REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S79188711

NORLINA BINTI AHEAD
NORLI

Post BOYANSE Date of birth 15-05-1939 Country of Birth SINOA FONG	Sex P 	379 1887 W
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800-579-1887

AT 66K 724 SONG WEST AVENUE 6 MOJ-292
SINGAPORE 64729
Spec No: 67010071 Date: 17/11/2016

1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6955628E



Name
ROTH JOHN BENNY CEBASTIAN
@SRPHET JOHN BENNY
CEBASTIAN

Sex
Male

Date of Birth
22-07-1989

Place of Birth
CAGAYAN

Swedish
S6955628E

Swedish
S6955628E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6955628E



Name
ROTH JOHN BENNY CEBASTIAN
@SRPHET JOHN BENNY
CEBASTIAN

Sex
Male

Date of Birth
22-07-1989

Place of Birth
CAGAYAN

Swedish
S6955628E

Swedish
S6955628E

REPUBLIC OF SINGAPORE
DRIVER LICENSE



Full Name
ROTH JOHN BENNY CEBASTIAN
@SRPHET JOHN BENNY
CEBASTIAN

Sex
Male

Date of Birth
22-07-1989

Place of Birth
CAGAYAN

Swedish
S6955628E

Swedish
S6955628E

drive

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES

EFFECTIVE DATE

Class 1A Motorcycles and 200 cc
Class 1B Motorcycles > 200 cc
Class 2 Motor vehicles > 200 cc
Class 3 Motor vehicles > 200 cc with automatic transmission
Class 4 Motor vehicles > 200 cc with manual transmission

01 Feb 2006
01 Feb 2006
01 Feb 2006
01 Feb 2006
01 Feb 2006

NO DATA



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

