#### SINGAPORE ACCIDENT STATEMENT

#### **IMPORTANT NOTICE**

**Driving Experience** 

- 1. Please report <u>correctly</u> 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.

| Date Of Accident 17/06/2019 19:45  Exact Location Of Accident SLIP ROAD FROM CLEMENTI RD TO AYE (CITY)  Country/State of Loss SINGAPORE  DETAILS OF OWN VEHICLE  Vehicle Registration Number SLL2002B  Insured/Policyholder  Name Of Registered Owner TEO ORD HAI (ZHANG HUHAI) NRIC No S7304729C  Email Address ORHHAI@GMAIL.COM Mobile Phone No (LOCAL) +65-97651973  Alternative Phone No Others-97651973  Vehicle Particulars  Manufacturer NISSAN Model QASHQAF1.2 DIG-T CVT ABS 2WD 5DR (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?  If No, Please state action to be taken Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company AliG ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE Fleet Policy OO Policy Number 1800004699-01  Cover Note Number 160/02/2019 - 15/02/2020  Driver  NINC No S7304729C Date Of Birth 03/02/1973  Occupation INDOOR  | 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 |
|--|--|--|
| Date Of Accident 17/06/2019 19:45  Exact Location Of Accident SLIP ROAD FROM CLEMENTI RD TO AYE (CITY)  Country/State of Loss SINGAPORE  DETAILS OF OWN VEHICLE  Vehicle Registration Number SLL2002B  Insured/Policyholder  Name Of Registered Owner TEO ORD HAI (ZHANG HUHAI) NRIC No S7304729C  Email Address ORHHAI@GMAIL.COM Mobile Phone No (LOCAL) +65-97651973  Alternative Phone No Others-97651973  Vehicle Particulars  Manufacturer NISSAN Model QASHQAF1.2 DIG-T CVT ABS 2WD 5DR (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?  If No, Please state action to be taken Vehicle Category PRIVATE CAR  Insurance Company  Name of Insurance Company AliG ASIA PACIFIC INSURANCE PTE. LTD.  COMPREHENSIVE Fleet Policy OO Policy Number 1800004699-01  Cover Note Number 160/02/2019 - 15/02/2020  Driver  NINC No S7304729C Date Of Birth 03/02/1973  Occupation INDOOR  |  | ACCIDENT STATEMENT   |
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| Country/State of Loss SINGAPORE  DETAILS OF OWN VEHICLE  Vehicle Registration Number SLL2002B  Insured/Policyholder  Name of Driver Name of Driver Number TEO ORD HAI (ZHANG HUHAI)  NRIC No S7304729C  ORHHAI@GMAIL.COM Mobile Phone No (LOCAL) +65-97651973  Alternative Phone No Others-97651973  Vehicle Particulars  Manufacturer NISSAN Model QASHQAI-1.2 DIG-T CVT ABS 2WD 5DR (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?  If No, Please state action to be taken Vehicle Category PRIVATE CAR  Insurance Company  Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number 1800004699-01  Cover Note Number 16(02/2019 - 15/02/2020  Driver  NARIC OR OR HAI (ZHANG HUHAI) NRIC No S7304729C Date Of Birth 03/02/1973  Occupation INDOOR   | Date Of Accident   | 17/06/2019 19:45   |
| Vehicle Registration Number SLL2002B  Insured/Policyholder  Name Of Registered Owner TEO ORD HAI (ZHANG HUHAI) NRIC No S7304729C  Email Address ORHHAI@GMAIL.COM Mobile Phone No (LOCAL) +65-97651973  Alternative Phone No Others-97651973  Vehicle Particulars  Manufacturer NISSAN Model QASHQAI-1.2 DIG-T CVT ABS 2WD 5DR (A)  Exact Purpose for which vehicle was being used at time of accident accident Are you claiming under your own insurance policy for repair to your vehicle?  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 1800004699-01 Cover Note Number 16/02/2019 - 15/02/2020  Driver  NEIC ORD HAI (ZHANG HUHAI) NRIC No S7304729C Date Of Birth 03/02/1973 Occupation INDOOR  | Exact Location Of Accident   | SLIP ROAD FROM CLEMENTI RD TO AYE (CITY)   |
| Vehicle Registration Number  Insured/Policyholder  Name Of Registered Owner  NRIC No  S7304729C Email Address  ORHHAI@GMAIL.COM  Mobile Phone No  (LCCAL) +65-97651973  Alternative Phone No  Others-97651973  Wehicle Particulars  Wanufacturer  Mondel  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?  If No, Please state action to be taken  Vehicle Category  Name of Insurance Company  Name of Insurance Company  Alg ASIA PACIFIC INSURANCE PTE. LTD.  Type Of Coverage  COMPREHENSIVE  Fleet Policy  No  Policy Number  Cover Note Number  Driver  NERO ORD HAI (ZHANG HUHAI)  NEIC No  S7304729C  Date Of Birth  NDOOR  | Country/State of Loss  | SINGAPORE  |
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| Cover Note Number         16/02/2019 - 15/02/2020           Driver         TEO ORD HAI (ZHANG HUHAI)           NRIC No         \$7304729C           Date Of Birth         03/02/1973           Occupation         INDOOR   | Fleet Policy   | NO   |
| DriverName of DriverTEO ORD HAI (ZHANG HUHAI)NRIC NoS7304729CDate Of Birth03/02/1973OccupationINDOOR   | Policy Number  | 1800004699-01  |
| Name of Driver TEO ORD HAI (ZHANG HUHAI)  NRIC No S7304729C  Date Of Birth 03/02/1973  Occupation INDOOR   | Cover Note Number  | 16/02/2019 - 15/02/2020  |
| NRIC No         \$7304729C           Date Of Birth         03/02/1973           Occupation         INDOOR  | Driver   |  |
| Date Of Birth 03/02/1973 Occupation INDOOR   | Name of Driver   | TEO ORD HAI (ZHANG HUHAI)  |
| Occupation INDOOR  | NRIC No  | S7304729C  |
| ·  | Date Of Birth  | 03/02/1973   |
| Date Of Driving Pass 02/06/1994  | Occupation   | INDOOR   |
|  | Date Of Driving Pass   | 02/06/1994   |

25 YEARS AND 0 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-97651973

Fax Number

**Contact Number** OTHERS-97651973 **EMail Address** ORHHAI@GMAIL.COM Address 24 LOR PISANG UDANG

Postcode S597711 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 TO REAR** 

2

NO

NO

1

NO

NO

**Weather Conditions CLEAR** 

Road Surface SLOPE, AFTER RAIN

#### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

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)

#### **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**

Refer to attached sketch plan

#### Attachment(s)

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

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

SKZ4043H Vehicle Registration Number

Vehicle Make/Model/Colour TOYOTA HARRIER

**Details Of Properties** 

PRIVATE CAR Vehicle Category Name of Driver STEPHEN LIM S1813602C NRIC/Passport Number Contact Number 90060086

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

| SKETCH PLAN  |                                  |  |  |
|--|----------------------------------|--|--|
| Zerru  |                                  |  |  |
| Crossing   |                                  |  |  |
|  |                                  |  |  |
| ATE Coty)  | A - SLL 2002 B                   |  |  |
|  | 8 - SKZ 4043 H                   |  |  |
|  |                                  |  |  |
|  |                                  |  |  |
|  |                                  |  |  |
| Cloment Rd   |                                  |  |  |
| DESCRIBE CIRCUMSTANCES OF THE ACCIDENT   |                                  |  |  |
| T was diving from MISS GULL 1  | be a bar of all in               |  |  |
| I was driving from NUSS Guild House to AYE along Chamousti<br>Road.  |                                  |  |  |
|  |                                  |  |  |
| When I extered more the slip road leading to MYE (city), the car in front of newstopped. Apparaidly these was a pedentian attempting to cross the crossing at the slip road. |                                  |  |  |
| the car in from of menestopped. Apparaid there was   |                                  |  |  |
| a pedestran attemption to cross to crossing at the slip and  |                                  |  |  |
| , , , , , , , , , , , , , , ,  |                                  |  |  |
| I impediately stepped on my brake. For the car   |                                  |  |  |
| I immediately supped on my broke. And the car The car<br>consimulated down the slippy slip road and his who car infrom<br>of nine.   |                                  |  |  |
| 8/ rune  |                                  |  |  |
| <b>V</b>   |                                  |  |  |
|  |                                  |  |  |
|  |                                  |  |  |
|  |                                  |  |  |
|  |                                  |  |  |
|  |                                  |  |  |
| Important  |                                  |  |  |
| Important:  You have been advised by the workshop that in the event that you wish to   | - Reporting Only                 |  |  |
| claim against your own policy (OD CLAIM), There is a FOURTEEN (14)   | - Claim OD                       |  |  |
| DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame  | - Claim TP                       |  |  |
| from the day of the occurrence.  | - Claim OD/ TP at other workshop |  |  |
| DECLARATION  |                                  |  |  |

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

Policyholder's signature Date & Time 13/15/19

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

Nric/Fin No.

Reporting Centre Personnel's Signature Name:

#### 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:
  - (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 Name:

NRIC/FIN No .:



#### CERTIFICATE OF INSURANCE

#### **AUTOPLUS PRIVATE VEHICLE**

Name of Policyholder : Teo Oth Hal Period of Insurance : 16 Feb 2019 To 15 Feb 2020 Engine No. Chassis No. : HRA2327068A : SJNFEAJ11U1772223

Vehicle No. : SLL2002B : 1800004699-01 Policy No. Endorsement No. Issued Date : 04 Jan 2019

#### ABOUT THE COVER

Make/Model : NISSAN Cleahqei 1.2 DIG-Turbo
Engine Cepadity/Tonnage : 1,197.00 CC Sun Insured : Market Value
Driver Restriction : NA Off Poak Car : No
Person or Cleases of Persons Entitled to Drive\*: First Year of Registration : 2017 Insuring with COE/PARF : Yes

c) The Principle of the Control of the Policyholder's order or with higher permission. The specified on the Policyholder's order or with higher permission or the specified age on to the Policy will incommitty the Policy wider or any authorited or were my Etherhan meets the specified age on to the. You have to pay an additional some of \$1.000 an "Young and or has preleased to be "Remost" ("NOW) "You have to Your Authorises Drive" in most or university is under the age of this experience years during apprecia.

Age Condition: All Age Condition

Limitation as to use\*:

Description of the context of person purposes and to the Pully relative inclines. This Pully year not cover set for this or make, othing sallor, during sacrately, relating the context of t

Loss of Use 1500 to -150 to Optional

\* Loss that we seem of contract by Section 5 of the Motor Vehicles (It to Flat) Risks and Componenting As (Cap. 186) and Section 65 of the New Years (It to Flat) and to be included united from Perchasting.

#### EXCESS

Section 1 Fire - \$3 Over Damage - \$600 That - \$6 Flood Cover - \$0

Named Driver and Excess pean applicable

Any Yorig King - \$400 (Over Demagn), Chung Xin Lei - \$500 (Over Demagn), Too Om Hel - \$600 (Over Demagn)

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

Approved England Decreal Alth Autorised Department (for o pulse wind and notice). Any or Other Hot Department of the first in plants of the first in the England of the White Int International Conference on the Conference of The International Conference on the International Conference o Department (for a suita while at your sy).

Which the first 3 pasts of the first day station of the first of the station of the Whiles in S. 1944, in, You'd even the a price of having the

#### INPORTANT NOTES

Hire Purchase Company/Employer's Loans Standard Chartered Bank (Singapore) Limited

With heavily certify that the policy to which this Gertificate of insurance relates is issued in accordance with the part is a Road Transport Act, 1997 (Malaysia) and Motor With class (Tabel Pauly Malaysia, 1984) (Malaysia).

#### 0500253000

SARE HARROUR ASSURANCE AGENCY .
SUKZERHOUGANG ST 21 HOH-207
SINGAPORE SEGGE
Understitler by MO Ania Politic Insurance Pla. Ltd.

Marile

AIG Asia Pacific insurance Pte. Ltd.

TB Shanco May 407 16 AMS Suiting SOFFICE (T +46 soff 3000) www.oig.com.or.

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