MTE119082502 / Trans Eurokars Pte Ltd - Sungei Kadut ENTRY DATE & TIME: 24/06/2019 15:05 SUBMITTED BY: Vion Lim

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 25/06/2019 12:12

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 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.

ACCIDENT STATEMENT

Date Of Report 24/06/2019 15:05 Date Of Accident 23/06/2019 17:05

Exact Location Of Accident ALONG LOWER DELTA ROAD / JALAN BUKIT MERAH TRAFFIC

Country/State of Loss **SINGAPORE**

DETAILS OF OWN VEHICLE

SLJ3528E Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner SNG YONG CHUA VINCENT

NRIC No S1495904A **Email Address NOEMAIL**

Mobile Phone No (LOCAL) +65-98782200

Alternative Phone No Office-NOPHONE

Vehicle Particulars

Manufacturer **OPEL**

Model INSIGNIA-1.6 TURBO (A)

Exact Purpose for which vehicle was being used at

time of accident

PERSONAL 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

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

1700075169-01 Policy Number

Cover Note Number

Driver

Name of Driver YONG CHUA VINCENT SNG

NRIC No S1495904A Date Of Birth 28/11/1961 **INDOOR** Occupation Date Of Driving Pass 09/02/2000

19 YEARS AND 4 MONTHS **Driving Experience**

Gender **MALE**

Mobile Number (LOCAL) +65-98782200

Fax Number Contact Number

EMail Address NOEMAIL

25B JALAN MEMBINA Address #17-112 SINGAPORE

Postcode 164025

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

COLLISION - HEAD TO REAR Type Of Accident

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

NO Was any body injured in the Accident?

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) 2

Passenger 1 : VINNA LIM LAY PECK Name:

> Gender: : Female

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 **SHA7700S**

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

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

E-FILE

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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.
- 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)

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)
 - 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")
- 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
- 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.
- 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.

's Signature Date & Time:

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

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

7/5/2019

SKETCH PLAN		
DESCRIBE CIRCUMSTANCES O	E THE ACCIDENT	
		LICENSE PLATE NO: SLJ35282 .
ACCIDENT DATE: 23 6	19	CONTACT NUMBER: 9170 5550
ACCIDENT TIME: 17.0		EMAIL:
		DS TELOK BLANGAH
ECOMION DOWCK	DELTH PU IN	DS IELDE DLANGAR
NOTE: PLEASE NOTE THAT YOUR INSUI		OU TO SUBMIT AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLICE
S. W. Walter and S. W.	PLEASE CHECK YOUR POLICY FO	
PLEASE STATE: () CLAIM O	AN POLICY CLAIM THIRD PAR	and the same
ECLARATION We declare the foregoing particul:	ors are true in every respect.	Transfer and the same of the s
olicyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
ate & Time:	(If driver is not the policyholder) Date & Time:	Name: V

STARMC SEEDS Flantons, VS

SLJ3528E car accident on 23.06.2019 report (See below sketch)

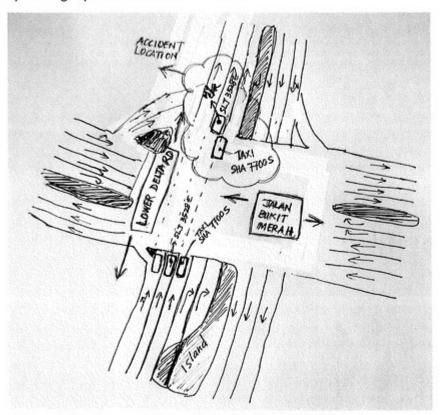
On 23 Jun 2019 at 1705 pm, I was driving along Lower Delta Road heading towards Telok Blangah direction.

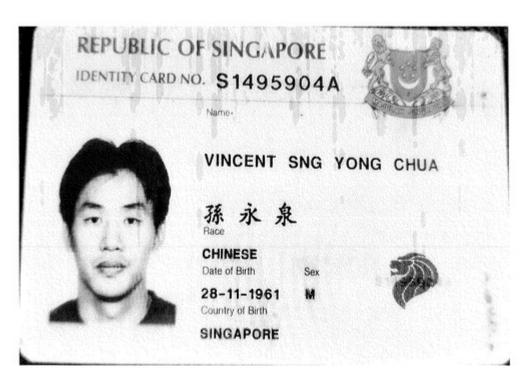
I stopped my car at the traffic light junction of Lower Delta Road and Jalan Bukit Merah Road when traffic light turns red. My car was travelling at lane 2 (Centre lane).

When traffic light turn green, I just started driving off my car, I heard a "bang" sound and I realised my car was hit by a Comfort taxi SHA7700S. The taxi drove of his car and was changing lane and thus accident happened.

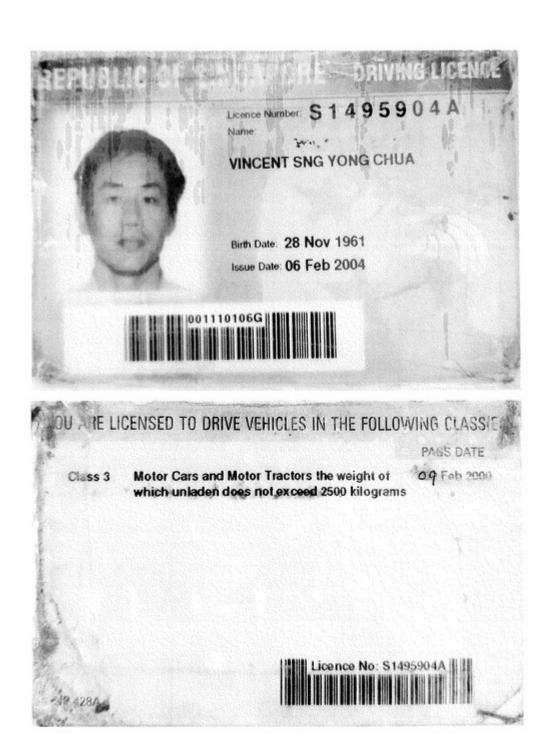
My car has sustained deep scratches at the rear right side. No one is injured in this accident.

I hereby making report of the above accident.











CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Sng Yong Chua Vincent Period of Insurance : 07 Dec 2018 To 06 Dec 2019

: B1162286HB4X0610 Engine No.

Chassis No. : W0LGS5E57H1005386

: SLJ3528E Vehicle No. Policy No. : 1700075169-01

Endorsement No.

Issued Date : 21 Nov 2018

ABOUT THE COVER

Make/Model : OPEL Insignia 1.6

First Year of Registration : 2016 Engine Capacity/Tonnage: 1,598.00 CC Sum Insured : Market Value Off Peak Car : No Insuring with COE/PARF : Yes : NA Driver Restriction

Person or Classes of Persons Entitled to Drive* :

a) The Polloyholder b) Any other person who is driving on the Polloyholder's order or with his/her permission. This Polloy will indemnify the Polloyholder 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

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, diffulng 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 Moter 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, 1997 (Malaysia), are not to be included under those headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Named Driver and Excess (where applicable)

Sng Yong Chua Vincent - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairors (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairars. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sale Apent's workshop.

For other Approved Reporting Centres/MO authorised Repairars, please contact our 24-hour accident emergency hottine at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.com.ag or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MALAYAN BANKING BERHAD

In We hereby cereity that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Perty Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Mataysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0107015000

LIM LAY BIN MICHELLE

371 ALEXANDRA ROAD #06-03A AIA ALEXANDRA

SINGAPORE 159963 SP-MICHELLE-PG

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

Accident Photo



Accident Photo









