SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be $\underline{\text{completed by the Policyholder and/or the Authorised Driver}}$
- 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 ability
- 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 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

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	31/08/2015 15:13	
Date Of Accident	30/08/2015 11:30	
Exact Location Of Accident	BLK 450 PASIR RIS DR 6 CARPARK	
Country/State of Loss	Singapore	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SKC812C	
Insured/Policyholder		
Name Of Registered Owner	YIP CHIH KIONG	
NRIC No	S1803716E	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-96865067	
Alternative Phone No	Office-96865067	
Vehicle Particulars		
Manufacturer	MERCEDES-BENZ	
Model	E200	
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?	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	2100388757	
Cover Note Number		
Driver		

Name of Driver

NRIC No

S1803716E

Date Of Birth

Occupation

Date Of Driving Pass

YIP CHIH KIONG

S1803716E

09/01/1967

Indoor

16/12/1988

Driving Experience 26 Years And 8 Months

Gender Male

Mobile Number (Local) +65-96865067

Fax Number

Contact Number Office-96865067

EMail Address NOEMAIL

Address BLK 533 PASIR RIS DRIVE 1 #02-256 SINGAPORE

Postcode

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

-

No

General Information of the Accident

Type Of Accident Unknown - REFER TO ATTACHED

Weather Conditions Clear Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No
Was any body injured in the Accident? No
Was any other material or property damaged? Yes
Was there any video captured by Car Camera? No
Number of Passengers (Including Driver) 3

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

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHD9035A

Vehicle Make/Model/Colour TRANS CAB

Details Of Properties

Name of Driver MR MOHAMED

NRIC/Passport Number

Contact Number 96334716

Postcode Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Address

Phone Number

Email Address

8/31/2015 11:25:36 AM PAGE

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Fax Server

HOTLINE TEL: (65) 8419 3000 FAX: (65) 6415-3723



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1967 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

OTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1989 (MACA 151A)	
MERCEDES-BENZ MOTOR INSURANCE	OWN DAMAGE EXCESS: \$\$800.00 (1) WINDSCREEN EXCESS: \$\$100.00
CERTIFICATE NO. 210038875 7=00000	(4: policies with effect from 1st Novemper 2002).
	SUM INSURED. Market Value. INSURING WITH COE/PARF (Yes)
	SKC812C
1) VEHICLE REGISTRATION NO.	Yip Chih Kiong
2) NAME OF INSURED	
3) EFFECTIVE DATE OF THE COMMENCEME OF INSURANCE FOR THE PURPOSES OF	U
EL DEBEON OF CLASSES OF PERSONS ENJ	ITLED TO DRIVE
SUBJECT TO AGE CONDITION: All Age Co	
 a) The insured. b) Airy other person who is driving on the Lisured's order of wo. This policy will indemnify the insured or any authorised driver. 	only if heighe meets the age conditions:
An Elderly, Young and or inexperienced Diavoi Excession	F-Vourse rethe said
Policy Locess applies to You and an Authorised Driver (plane) Authorised Driver is above the age of 65; below the age of 23	incrot tos (255 than _ years and me _ ye
	A Make Visited to
Provided that the person driving is permitted in accordance	with the licensing or other laws or regulations to drive the Motor Vehicle or a Court of Law or by reason of any enactment or regulation in that behalf
has been so permitted and is not disqualmed by orse, y from driving the Metar Vehicle.	
6) LIMITATION AS TO USE 1	e fusiwed's business. The Policy does not cover use for fine or trial speed-listing the carriage of gazet other than samples
 Use only for social domestic and pleasure purposes and for the Use only for social domestic and pleasure purposes and for the rewards turion, driving lost, racing, page-making, reliability in connection with any trade or business or use for any purpose. 	tral speed testing the carriage of goods other than samples.
in connection with any dealers	TANGER OF THE PARTY OF THE PART
TO THE PROPERTY OF THE PROPERT	**************************************
APROVED AND THE PROJECT RESERVED AND THE PROJECT OF	Ethoz : El Lompines St. 92 (121, 00242)
6 Lai Hua (Meng Kee) Motor = 21 Sin Ming Ind [Fel: 6453]	n odly 5. Karl Fook Sing Moder = 9 i 1280 i Lain E. († 1716) 8 i Hoj 2. Mova Automotive = 1008 Bulot Merch Fanc 3 (Tai: 62773892) 13 P. SME Motor = I. Kala Bukit Ava S. Bik. D. (Tel: 67476105)
G. L. Migasson v Moraldon v Marian v	
	C. B.C. Be-Kestambley wordings for details
LOSS OF USE 15 Days Replacement Ca	r only for repairs at C &C = Refer to policy wordings for details
ALASTOT DRIVER NA	
NAMED DRIVER NA	SACCIAL SERVICUS (SELTI)
LIPE DURCH4SE COMPANY MARCHDESHENZEN.	SNCIAL SERVICES (S) LTD of Vehicles (Third-Party Risks and Compensation) Act (Charter 189), and are not to by included under these headings:

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 29 Oct 2014

500660-410 CYCLE & CARRIAGE - YEOAL 239 ALEXANDRA ROAD SINGAPORE 159930 ANSP-MOTOR AIG Asia Pacific Insurance Pte. Ltd.

Authorised Representative

SSCGUK.

AIG Asia Pacific Insurance Pte. Ltd.

Reg. No. 2010094040A

102/13

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my w orkshop 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
- (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 πy 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Witnessed by Reporting Centre Driver's Signature (If driver is not the policyholder) / Date der's Signature / Date & Personnel Sketch Plan

Sketch Plan #3 Pg.1

Describe Circumstances of the Accident	BIK 450 HOB Pastr R's Drive 6
30 Ana 2015, 1130 am,	BIK 450 HDB MS! 189 911-0
	5(510 450)
I was looking out for traffic	before driving out of
I was looking out for traffic park lot, I saw a red Taxi	SHD9035A at the opposite of
the main road looking ri	ent and left in search of
the main load to the	lown. Then he was looking
Plock number looking six	lown. Then he was looking
a while for him to serve	slightly to the left when - rning left, away from me
left and turned his when	- nine left, away from me
I was convinced he is in	a out very very (slowly.
and I started to mov	
	n right and moved towards
But the tax, suddenly the	I jammed my brake and complete stop hed on my honk continearsly
me, slowly	+)ammed may
inmediately put my	1 car to a complete continearily
and stationery and put	hed on my honk continearsly
but the taxi continue to	turn right toward me !
and the tax. Continue to	cd into my risk!
3. (0,	3 100/2
The Tax: driver, Mr M.	shamed Yaseen was very apologic many times, he said he
ed and corry gorry	many times, he said he mber and could not hear a particulars and he
	and could not heat
my honk. We exchange agreed for me to ele	d particulars and he
as ned for me to ele	im his insurance.
agriculture 1	

Declaration

I/We declare for foregoing particulars are true in every respect.

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

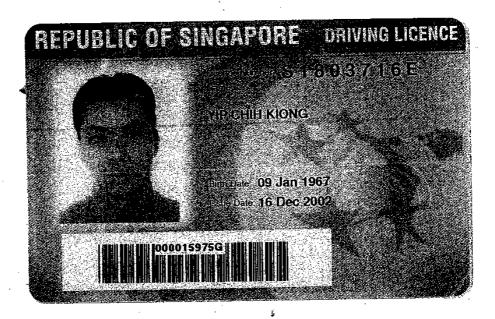
(Please contact your insurance company for any further details)

Policyholders Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 2B Class 2A

Motorcycles not exceeding 200 cc

Motorcycles between 201 cc and 400 cc

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 05 Jun 1989

05 Jun 1989

16 Dec 1988

NP 428A







