

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	24/06/2019 13:00
Date Of Accident	23/06/2019 17:00
Exact Location Of Accident	WOODLANDS AVE 7 TO AVE 4 SLIP ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFT6624J
Insured/Policyholder	
Name Of Registered Owner	TAN NGUAN KIAP
NRIC No	S1774882C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97676853
Alternative Phone No	Office-97676853

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER-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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	0100516054-14
Cover Note Number	

Driver

Name of Driver	ANG BEE LAY
NRIC No	S6915831E
Date Of Birth	13/05/1969
Occupation	INDOOR
Date Of Driving Pass	14/10/1996
Driving Experience	22 YEARS AND 8 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96256197
Fax Number	
Contact Number	
E-Mail Address	MAYMIKE1070@GMAIL.COM
Address	BLK 896A WOODLANDS DR 50#10-70
Postcode	730891
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	3
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 REPORT ATTACHED

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	GBA1660J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	VADIVEL VELMURUGAN
NRIC/Passport Number	G2219426M
Contact Number	

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

DETAILS OF OTHER VEHICLE PROPERTY 2

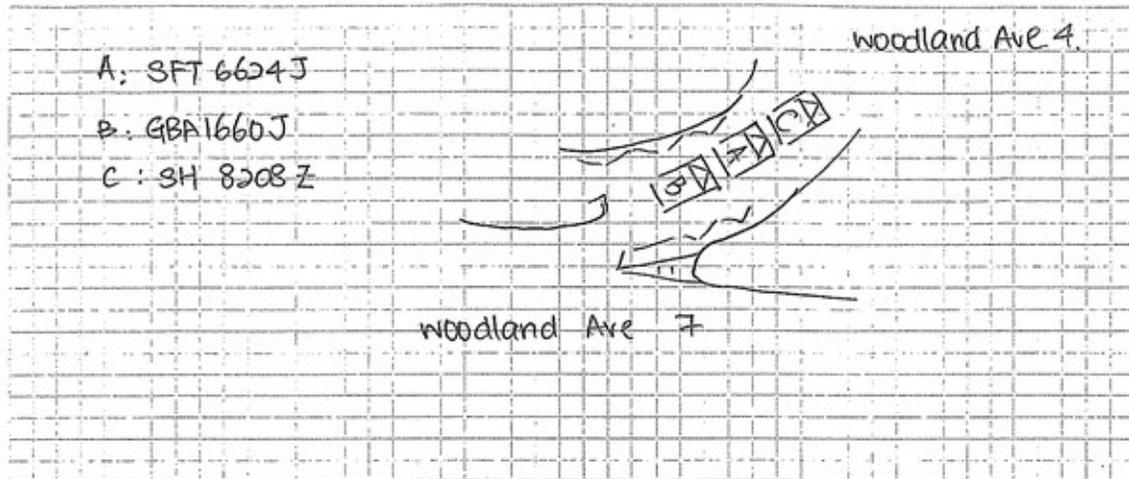
Vehicle Registration Number SH8208Z
Vehicle Make/Model/Colour TAXI
Details Of Properties
Vehicle Category TAXI
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ANG BEE LAY
Approximate Age
Injuries Sustain
Injured person in which vehicle? SFT6624J
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Sketch Plan

SKETCH PLAN

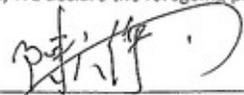


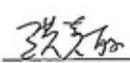
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23/6/19 I was driving ~~along~~ ~~out~~ at slip ~~out~~ road from
 woodland Ave 7 to Ave 4. I was stationery. at the slip road
 of me
 in front, there is a vehicle SH 8208Z waiting for incoming car to be
 clear. Suddenly a lorry GBA1660J hit onto my rear. a big
 impact cause my vehicle jerk in front and hit onto SH 8208Z.
 now
 After the accident, i, feeling not well will go see doctor.
 make accident
 later after the report.

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:

 24/6/19
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

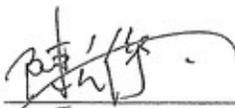
SKETCH PLAN

IMPORTANT NOTICE

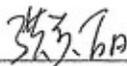
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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. 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:

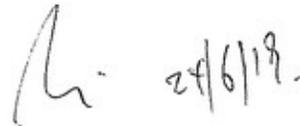
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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) 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 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.:

Reply all | Delete | Junk | ...



SFT6624J



chian ivy <ivychnian@gmail.com>

Mon 24/6/2019 12:54 PM

To: CDGE Braddell Private Cars Crash Repair Counter

Reply all | ...

Intro

AIG		CERTIFICATE OF INSURANCE	
PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE			
Name of Policyholder	: Tan Nguan Klap	Vehicle No.	: SFT6624J
Period of Insurance	: 06 Apr 2019 To 05 Apr 2020	Policy No.	: 0100516054-14
Engine No.	: 4G18GH8403	Endorsement No.	:
Chassis No.	: JMYSNCS3ASU002908	Issued Date	: 05 Mar 2019
ABOUT THE COVER			
Make/Model	MITSUBISHI LANCER 1.6 GL		
Engine Capacity/Tonnage	: 1597.00 CC	Sum Insured	: Market Value
Driver Restriction	: NA	Off Peak Car	: No
Person or Classes of Persons Entitled to Drive*	1. The Policyholder 2. Any other person who is driving on the Policyholder's order or with their permission The Policy will operate on the Policyholder or any authorized driver who is not the insured for specified age condition		
First Year of Registration	: 2005		
Insuring with COE/PARF	: Yes		
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 leasing, driving under the influence of alcohol, driving while using a mobile phone, or any other use involving the carriage of goods when their business is connected with any trade or business or use for any purpose in connection with Motor Trade.		
* Locations covered are specified in Section 2.1 of the Motor Vehicle (Third Party Risk and Compensation) Act (Cap. 189) and Section 15 of the Road Transport Act, 1987 (Singapore). See also for details under these headings.			
EXCESS			
Section 1	Fire: \$0 Theft: \$0		
Section 2	Property Damage: \$0		
Windscreen	: Full		
Named Driver and Excess	: (where applicable) Tan Nguan Klap		
APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)			
Approved Reporting Centres/AIG Authorized Repairers (for claims related repairs) Any approved repairs to the Vehicle can be carried out at the repairer if their details are specifically included by us. For approved Reporting Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6321 6239. Alternatively, you may refer to AIG website www.aig.com.sg or AIG 24 Hours App. Simply search and download AIG 24H from iTunes or Google Play.			
IMPORTANT NOTES			
Hire Purchase Company/Employer's Loan: CITIBANK SINGAPORE We hereby certify that this policy in which this Certificate of Insurance is issued is issued in accordance with the provisions of the Motor Vehicle (Third Party Risk and Compensation) Act (Cap. 189), Part 10 of the Road Transport Act, 1987 (Singapore) and Motor Vehicle (Third Party Risk) Rules, 1989 (Singapore).			
000290000 CHUA LAI KOON DARYL 371 ALEXANDRA ROAD #05-17 AA ALEXANDRA SINGAPORE 159633 SP-SINGAPORE Underwritten by AIG Asia Pacific Insurance Pte. Ltd.			
		 AIG Asia Pacific Insurance Pte. Ltd. AUTHORIZED REPRESENTATIVE	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

