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 <u>completed by the Policyholder and/or the Authorised Driver.</u>

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 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. **<u>Any false reporting may be referred to the Police for investigation.</u>**

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	01/07/2019 12:16
Date Of Accident	30/06/2019 15:00
Exact Location Of Accident	SIN MING ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLM5938B
Insured/Policyholder	
Name Of Registered Owner	TAN KHENG NGEE KELVIN
NRIC No	S1687183D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96441086
Alternative Phone No	Office-96441086
Vehicle Particulars	
Manufacturer	VOLVO
Model	XC60-2.0 T5 (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	YES
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	1800040131
Cover Note Number	
Driver	
Name of Driver	TAN KHENG NGEE KELVIN
NRIC No	S1687183D
Date Of Birth	12/09/1965
Occupation	INDOOR
Date Of Driving Pass	25/05/1993
Driving Experience	26 YEARS AND 1 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-96441086
Fax Number	
Contact Number	OFFICE-96441086
EMail Address	NOEMAIL
Address	BLK 446 BRIGHTHILL DRIVE #09-107
Postcode	570446
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
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	2
Was any body injured in the Accident?	NO
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	SMK9145U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE VERN LONG
NRIC/Passport Number	S7923281E
Contact Number	

Address
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for efiling.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorised Driver.
4. 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.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

ACCIDENT STATEMENT

Date and Time of Accident	Date: 30/06/2019 Time: 1500.
Exact Location of Accident	SIN MING ROAD.

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM5958B.

INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)	TAN CHENG NGEE KELVIN
Personal Identification - NRIC (Singaporean/PR)	S1687183D.
- FIN/Passport Number	
- Not Applicable	

VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model	Manufacturer VOLW Model X100.
Type of Vehicle*	◯ Saloon ☑ MPV ◯ CRV ◯ Van ◯ Lorry ◯ Bus ◯ M/cycle ◯ Others,_____
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	☑ Yes ◯ No (If No, Pls select: ◯ Third Party ◯ Reporting)
Vehicle Category*	☑ Private ◯ Commercial ◯ Motorcycle

INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company *	AIG ASIA PACIFIC
Type of Policy	☑ Comphensive ◯ Third Party Fire & Theft ◯ TP Only
Fleet Policy	◯ Yes ☑ No
Policy Number	1800 40131.
Motor CI	

DRIVER

	◯ Same as Insured above
Name of Driver	TAN KHENG NGEE KELVIN
Personal Identification - NRIC (Singaporean/PR)	S1687183D.
- FIN/Passport Number	
Date of Birth	12 dd/09 mm/1965 /yy
Driving Date Pass	25 dd/05 mm/1993 /yy
Year of Driving Experience	Year(s) Month(s)
Occupation	☑ Indoor ◯ Outdoor
Gender	☑ Male ◯ Female
Contact Number / Mobile Phone / Fax No.	96441086.

Address of Driver	BLK 496 BRIGHTHILL DRIVE #09-107 Postcode (570496
Email Address	NO EMAIL
Was driver an employee of the Insured's Company?	◯ Yes ✓ No
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own	◯ Yes ◯ No
Vehicle Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	

GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (Eg. Chain collison, Head-On collision,Side Swipe, Front to Rear)	HEAD- REAR
Weather Conditions	✓ Clear ◯ Raining ◯ Others,_____
Road Surface	✓ Dry ◯ Wet ◯ Others,_____

OTHER INFORMATION

Was any foreign vehicle involved in this accident?	◯ Yes ✓ No
Was any body injured in the accident?	◯ Yes ✓ No
Was any other vehicle or property damaged?	✓ Yes ◯ No
Was there any video captured by Car Camera?	◯ Yes ✓ No
Number of Passengers (Including Driver)	01

DETAILS OF POLICE ACTION

Was the Accident reported to the Police?	◯ Yes ◯ No (If Yes, please state which Police Station.)
Police Station Name	
Police Station Address	
Police Station Contact	Tel No. Fax No.
Was notice of intended Prosecution given?	◯ Yes ◯ No (If Yes, against whom?)

DETAILS OF OTHER VEHICLE / PROPERTY 1

Vehicle Registration Number	SMK 9145 U
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	LEE VERN LONG
Personal Identification - NRIC (Singaporean/PR)	S7923281E .
- FIN/Passport Number	
Contact Number	
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	

(Note - Please use page 6 if you need to add more vehicles)

Sketch Plan #3

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.
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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Mangement Centre establised 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.

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' law yers/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 w ith 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 w ell as on the external cover of envelopes/mail packages); and/or

(v) complying w ith applicable law in administering, processing, handling and/or dealing w ith 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.

Policyholder's signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel

Sketch Plan
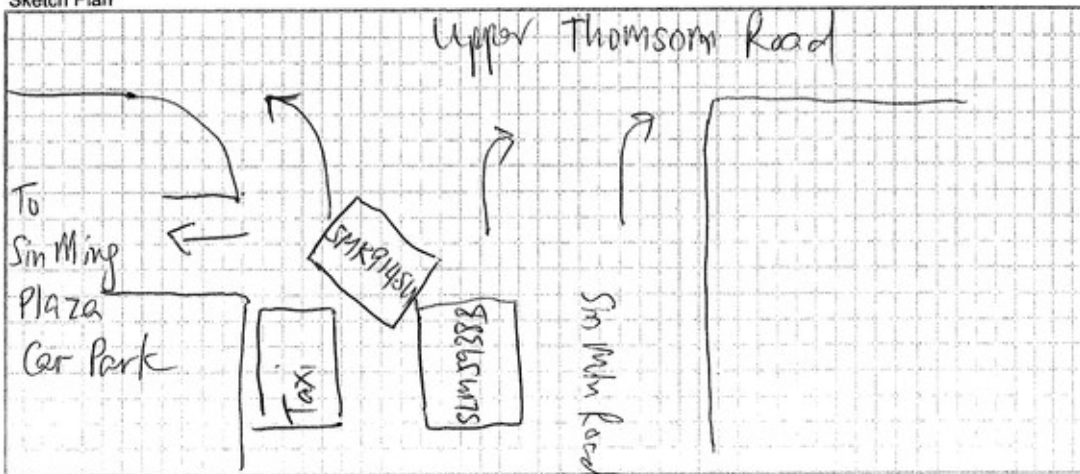
Sketch Plan #4

Describe Circumstance of the Accident

I was turning into Sih Ming Rd (from Shunfu Rd) at about 2.45 pm on 30/6/2009. The car in front of me (SMK 9145 U) was moving in the middle lane and brake abruptly. I could not react in time to his sudden change of action and bump into his car left rear end.

The driver explained that he brake suddenly because there was a taxi; (stopped illegally to take passenger) in his inner lane thet started to move off.

I could not accept his explanation of sudden braking in the middle of the road, but he claimed that the taxi will hit his car if he did not brake.

IMPORTANT NOTE

Under **General Condition – Conduct of Claim** of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

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   Witnessed by Reporting Centre Personnel
                                          & Time

Sketch Plan #5

AIG

CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder	: TAN KHENG NGEE KELVIN	**Vehicle No.**	: SLM5938B
Period of Insurance	: 13 Apr 2019 To 12 Apr 2020	**Policy No.**	: 1800040131-01
Engine No.	: B4204T111867170	**Endorsement No.**	:
Chassis No.	: YV1DZ40LDH2093698	**Issued Date**	: 29 Mar 2019

ABOUT THE COVER

Make/Model	: VOLVO XC60 T5 DRIVE E				
Engine Capacity/Tonnage	: 1,969.00 CC	Sum Insured	: Market Value	First Year of Registration	: 2017
Driver Restriction	: NA	Off Peak Car	: No	Insuring with COE/PARF	: Yes

Person or Classes of Persons Entitled to Drive* :

a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder 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 2 years' driving experience.

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, driving 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 Motor Trade.

Loss of Use 2000cc

* 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, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - $0 Own Damage - $800 Theft - $0 Flood Cover - $0

Section 2
Property Damage - $0

Windscreen : $100

Named Driver and Excess (where applicable)

TAN KHENG NGEE KELVIN - $800 (Own Damage)

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

1.Wearnes Automotive Pte Ltd Add: 249 Alexandra Road Singapore 159935 64304890 63789350

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

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

0503485742

WEARNES AUTOMOTIVE - DL (V)
45 LENG KEE ROAD
SINGAPORE 159103
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

Sketch Plan #6

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1687183D

Name
TAN KHENG NGEE KELVIN

陳 毅 毅

Race
CHINESE

Date of Birth   Sex
12-09-1965   M

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE   DRIVING LICENCE

Licence Number S1687183D
Name
TAN KHENG NGEE KELVIN

Birth Date: 12 Sep 1965
Issue Date: 05 Jun 2000

000544252A

3192327

NRIC No. S1687183D

Blood Group   Date of issue
O+   12-09-2000

APT BLK 446 BRIGHTHILL DRIVE #09-107
SINGAPORE 570446

NRIC No: S1687183D   Date: 05-01-2002 (R)   No: 4007551

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

PASS DATE

Class 3   Motor Cars and Motor Tractors the weight of   25 May 1993
           which unladen does not exceed 2500 kilograms

NP 428A   Licence No: S1687183D

Accident Photo

Accident Photo