SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

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.
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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.	
	ACCIDENT STATEMENT
Date Of Report	05/07/2019 11:15
Date Of Accident	04/07/2019 17:05
Exact Location Of Accident	HOUGANG AVE 8 CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKV8663M
Insured/Policyholder	
Name Of Registered Owner	CHUA CHENG AIK
NRIC No	S0202238I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91122745
Alternative Phone No	Office-91122745
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180
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?	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	2100431241-03
Cover Note Number	
Driver	
Name of Driver	CHUA CHENG AIK
NRIC No	S0202238I
Date Of Birth	18/05/1954
Occupation	INDOOR

05/12/1975

43 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91122745

Fax Number

Contact Number OFFICE-91122745

EMail Address NOEMAIL

Address BLK 446 HOUGANG AVE 8 #12-1643

Postcode 430446
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

Simole

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.

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NO

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

NO

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFET TO ATTACHED.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFG9191P
Vehicle Make/Model/Colour BLACK

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver KOH CHYE AIK
NRIC/Passport Number S8004573E

Contact Number

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

Sketch Plan

SKETCH PLAN

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

- 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
 - (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
- 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

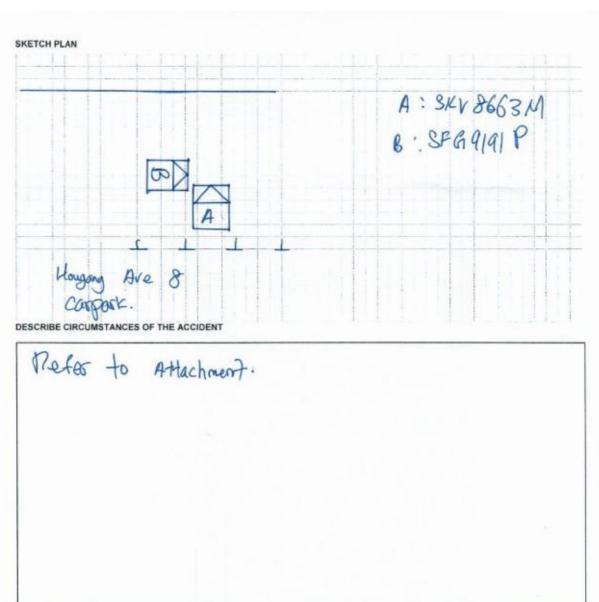
Driver's Signature

(If driver is not the policyholder)

Date & Time

Go Chee Han DID: 6771 4336 HP: 9181 7717 Email: cheehan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pie Lid Customer Service Centre - Pandan Loop

Reporting Centre Personnel's



DECLARATION

I/We declare the 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)

Policyholder's Signature

Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

Go Chee Han

DID: 6771 4336 HP: 9181 7717

Email: chechan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

Reporting Centre Personnel's

Name:



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Chua Cheng Aik

Period of Insurance

: 06 Oct 2018 To 05 Oct 2019

Engine No. Chassis No. : 27491030445828 : WDD2050402R105046 Vehicle No.

: SKV8663M

Policy No.

: 2100431241-03

Endorsement No.

Issued Date

: 29 Aug 2018

ABOUT THE COVER

Make/Model

: MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE

Engine Capacity/Tonnage : 1,595.00 CC

Sum Insured : Market Value

First Year of Registration : 2015

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 higher permission. This Policy will indensify the Policyholder or any authorised driver only if heighe most the specified age condition.

You have to pay an additional sum of \$2,000 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 him or reward, driving builtion, driving test, racing, pace-making, reliability trial or spend-leading. 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 85 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)

Chus Cheng Alk - \$800 (Own Damage)

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

Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 82061818 2 Cycle & Carriage Plandan Loop Service Center - Body Care & Repair Add: 188 Plandan Loop Service Center - Body Care & Repair Add: 188 Plandan Loop Service 128378 62061818

For other: Approved Reporting Centres(AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Attemptively, you may refer to AIG website www.elg.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Gosgle Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

I/We temby 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. 169). Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0500660439

CYCLE & CARRIAGE - RUTHZH 239 ALEXANDRA ROAD SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE





Licence Number: \$ 0 2 0 2 2 3 8 1 Name:

CHUA CHENG AIK

Birth Date: 18 May 1954 Issue Date: 02 Oct 2015

FOR CAC USE ONLY

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

Class 2B Class 2A

Class 3

Class 2

Motorcycles =< 200 cc

Motorcycles =< 200 cc

Motorcycles between 201 cc and 400 cc

Motorcycles > 400 cc

Motor Cars =< 3000kg with =<7 passengers, exclusive
of the driver; and other motor vehicles =< 2500kg

EFFECTIVE DATE

FOR C&C USE ONLY

Licence No:S0202238

NP 428A













