

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	10/07/2019 14:37
Date Of Accident	09/07/2019 10:35
Exact Location Of Accident	WOODLANDS CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGZ6051T
Insured/Policyholder	
Name Of Registered Owner	CHIANG LENG OON
NRIC No	S0467065E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81238258
Alternative Phone No	OFFICE-81238258

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	2100442089-03
Cover Note Number	

Driver

Name of Driver	JACE LIM WEI MIN
NRIC No	S8713061D
Date Of Birth	07/05/1987
Occupation	INDOOR
Date Of Driving Pass	25/05/2009
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81238258
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	APT BLK 310A PUNGGOL WALK \$04-506
Postcode	821310
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SON-IN-LAW
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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)	3
Passenger 1	NAME: : BEATRICE GENDER: : FEMALE
Passenger 2	NAME: : ASHLYN 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 THE STATEMENT ATTACHED.

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	SKQ5763D
Vehicle Make/Model/Colour	TOYOTA CAMRY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HO SANG BIN
NRIC/Passport Number	
Contact Number	83331629
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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:

- (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:

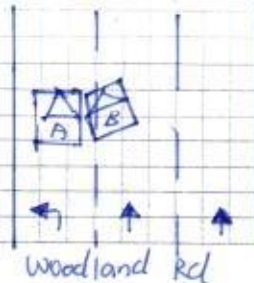
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Vehicle A: SGZ 6051T

Vehicle B: SKA5763D

woodland checkpoint



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time. I, vehicle A was travelling straight on the stated venue. Suddenly vehicle B cut into my lane and hit on to my vehicle front right portion.

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:

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

ACCIDENT STATEMENT

ACCIDENT DATE: 09/07/19 (DD/MM/YYYY), TIME: 1035am (HH:MM)

LOCATION: Woodland checkpoint (car lane)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGZ 6051T
b) INSURANCE COMPANY: ALG
c) POLICY NUMBER: 2100442089-03
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Toyota Vios
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Private use
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Chiang Leng soon (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0467065E CONTACT: _____
c) ADDRESS: Blk 55 Geylang Bahru #12-3613 (S) 1233

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Jace Lim Wei min (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8713061D CONTACT: 8123 8258
c) ADDRESS: Blk 310A Punggol Walk #04-506 (A) 821310

*d) DATE OF BIRTH: 7/5/1987 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Son-in-law

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKQ 5763D MODEL: Toyota Camry
b) DRIVER'S NAME: Ho Sang Bin
c) NRIC/FIN/PASSPORT: S1310557Z CONTACT: 8333 1629

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passengers
(including driver)
(03)

① Beatrice (F)

② Ashlyn (F)

* No of passengers
(including driver)
()

* No of passengers
(including driver)
()

Email = rico60autoservices@gmail.com

fax = 6286 7060

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8713061D**

Name: **LIM WEI MIN**

Birth Date: **07 May 1987**

Issue Date: **25 May 2009**

001745205A




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8713061D**

Name: **JACE LIM WEI MIN**

林 伟 铭

Race: **CHINESE**

Date of birth: **07-05-1987**

Country/Place of birth: **SINGAPORE**

Sex: **M**

88713061D





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

Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg

PASS DATE: **25 May 2009**

NP 428A

Licence No: **S8713061D**



5320333

NRIC No: **S8713061D**

Date of issue: **23-06-2014**

APT BLK 310A PUNGGOL WALK #04-506
SINGAPORE 821310

NRIC No: **S8713061D** Date: **14/10/2015**






0585120



NRIC No **S0467065E**



Blood Group **B+** Date of issue **27-10-1992**

APT BLK 66 GEYLANG BAHRU
#12-3613
SINGAPORE 1233



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Chiang Leng Oon
Period of Insurance : 04 Dec 2018 To 03 Dec 2019
Engine No. : 1NZX650681
Chassis No. : MR053HY9305036515

Vehicle No. : SGZ6051T
Policy No. : 2100442089-03
Endorsement No. :
Issued Date : 07 Nov 2018

ABOUT THE COVER

Make/Model : TOYOTA VIOS

Engine Capacity/Tonnage : 1,497.00 CC

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2007

Insuring with COE/PAF : 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 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, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$1100 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

Chiang Leng Oon - \$1100 (Own Damage)

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

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. 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 Sole Agent's workshop.
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: SPEED CREDIT PTE LTD

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, 1999 (Malaysia).

0030210000

AIG ASIA PACIFIC INSURANCE P.L.
78 SHENTON WAY #07-16 AIG BUILDING
SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE