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 <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. 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 conseaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	23/07/2019 10:15
Date Of Accident	22/07/2019 13:30
Exact Location Of Accident	NO 7 JLN DARI SERIMPI
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SDA6311K
Insured/Policyholder	
Name Of Registered Owner	NEO SUE KIM
NRIC No	S0043882J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97322712
Alternative Phone No	Office-97322712
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?	NO
If No, Please state action to be taken	REPORTING ONLY
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	1900052153
Cover Note Number	
Driver	
Name of Driver	NEO SUE KIM
NRIC No	S0043882J
Date Of Birth	08/11/1948
Occupation	INDOOR

18/12/1972

46 YEARS AND 7 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-97322712

Fax Number

Contact Number OFFICE-97322712

EMail Address NOEMAIL

Address 70 BAYSHOURE RD #25-07

Postcode 469987 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**

2

NO

NO

YES

NO

1

NO

NO

Weather Conditions CLEAR DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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

MY CAR PERFORM REVERSING AND ACCIDENTALLY COLLIDED CAR B (SLV5636A) FRONT RIGHT DOOR. I HAVE VIDEO FOOTAGE AND NO ONE WAS INJURED.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: REFER CSE AQ

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLV5636A

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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
- 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 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
 - (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
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- 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.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and
- (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

Name: Alan While

SKETCH PLAN

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

Reporting Centre Personnel's

Name: Alan and



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE Name of Policyholder : NEO SUE KIM Period of Insurance

Engine No. Chassis No.

: 12 Mar 2019 To 11 Mar 2020 : 27491031611677

: WDD2050402R459711

Vehicle No. Policy No.

: SDA6311K

Endorsement No.

: 1900052153

Issued Date

: 19 Mar 2019

ABOUT THE COVER

Make/Model

Engine Capacity/Tonnage : 1,595.00 CC

Person or Classes of Persons Entitled to Drive*;

: MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019

Insuring with COE/PARF : Yes

a) The Policyholder b) Any other person isho 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/sitre 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 : All Age Condition

Limitation as to use* :

LIMITATION AS 10 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, shving busines, daving fest, racing, pace-making, reliability trial or speed-setting, the carriage of goods other than samples in connection with Motor Tracks. Loss of Use 2000cc

*Consective Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Makeysia), are not to be EXCESS Section 1 Fire - S0 Own Damage - \$1300 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

NEO SUE KIM - \$1300 (Own Damage)

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

Cycle & Carriage Eunos Service Center (For accident reporting only). Add: 330 Ubl Road 3 Singapore 408650 52061818.
 Cycle & Carriage Pandan Loop Service Center - Body Care & Repair. Add: 188 Pandan Loop Singapore 128378 62061818.

For other Approved Reporting Certhes/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 8338 6200. Alternativety, you may refer to AIG website www.aig.com.sg

IMPORTANT NOTES

fire Purchase Company/Employer's Loan: MayBank

hereby certify that the policy to which mis Certificate of insurance relates is issued in accordance with the provisions of the Motor Vehiclos (Third Party Risks and Compensation) Act (Cap. 189), Part IV of Sec. 1997 (Malaysia) and Motor Vehiclos (Third Party Risks) Rules, 1999 (Malaysia).

& CARRIAGE - LEEHAN EXANDRA ROAD ORE 159930

ritten by AIG Asia Pacific Insurance Pte. Ltd.

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REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S 0 0 4 3 8 8 2 J

NEO SUE KIM

Birth Date: 08 Nov 1948 Issue Date: 10 Oct 2003



FOR C&C USE ONLY

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

Class 3

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

PASS DATE

18 Dec 1972

FOR C&C USE ONLY

NP 428A

Licence No: S0043882J

Accident Photo











Accident Photo









Accident Photo





