Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 22/08/2019 09:20

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 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 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 consent to the archiving of this report at the centre and to copies of the report being made available

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	22/08/2019 08:44	
Date Of Accident	06/08/2019 08:45	
Exact Location Of Accident	BUKIT PANJANG RING ROAD	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLN9448S	
Insured/Policyholder		
Name Of Registered Owner	YUNNI ARDIANA SUSILO	
NRIC No	S7784287Z	
Email Address	YUNNIYUNNI0611@YAHOO.COM	
Mobile Phone No	(LOCAL) +65-91991776	
Alternative Phone No	Others-91991776	
Vehicle Particulars		
Manufacturer	MITSUBISHI	
Model	OUTLANDER 2.4 CVT 4WD SR	
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	1700006408-02	
Cover Note Number	23/05/2019-22/05/2020	
Driver		
Name of Driver	YUNNI ARDIANA SUSILO	
NRIC No	S7784287Z	
Date Of Birth	11/06/1977	
Occupation	INDOOR	

24/07/2012

7 YEARS AND 0 MONTHS

Gender FEMALE

 Mobile Number
 (LOCAL) +65-91991776

 Fax Number
 (LOCAL) +65-91991776

 Contact Number
 OTHERS-91991776

EMail Address YUNNIYUNNI0611@YAHOO.COM
Address 343 UPPER BUKIT TIMAH RD #01-03

Postcode 588196

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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

NO

NO

YES

NO

1

NO

NO

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

REFER TO SKETCH PLAN

Attachment(s)

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

Remarks/ Reasons: VIDEO WAS RECORDED BY FRONT VEHICLE

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMF2745K
Vehicle Make/Model/Colour SKODA

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver GAN WEI LEE
NRIC/Passport Number S7642484E

Contact Number Address 91155226

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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.
- 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)
 - (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
- 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 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

* - monthson or a

Date & Time: 22 Avg 20 19

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: Palcswaran Anand.

NRIC/FIN No.:

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collision in his text happened in his.	repair, He mentioned a		
uncomfortable with.			
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I ended up telling him to certile yio	i Msuranco		
Important:			
You have been advised by the workshood at the second	- Reporting Only		
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14)	- Claim OD		
from the day of the occurrence.	- Claim TP		
DECLARATION	- Claim OD/ TP at other workshop		
I/WE declare the foregoing particulars are true in every respect.			
or a respect.			

Policyholder's signature

Date & Time 22 August 2019

Driver's Signature

(if driver not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name: Rateswamn

Nric/Fin No.



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : YUNNI ARDIANA SUSILO

Period of Insurance : 23 May 2019 To 22 May 2020

Engine No. : 4B12SA0911

Chassis No. : JMYXTGF3WHJ000383 Vehicle No. : SLN9448S Policy No. : 1700006408-02

Endorsement No.

Issued Date : 26 Apr 2019

ABOUT THE COVER

Make/Model : MITSUBISHI OUTLANDER 2.4 CVT

Engine Capacity/Tonnage : 2,360.00 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 indemely 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 "inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above

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 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

* 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

YUNNI ARDIANA SUSILO - \$600 (Own Damage)

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

Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 800 Sin Ming Ave Singapore 575733 89328000
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
 Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hottine 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: United Overseas Bank Limited

ry 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 provision of the Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia). This process is a sense of the real of the following party of the continuous process of the process of the continuous following party and

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CYCLE & CARRIAGE - VINCE 239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Service to the street of the service contains the contained to the service of the

AIG Asia Pacific Insurance Pte. Ltd. **AUTHORISED REPRESENTATIVE**

78 Shenton Way #07-16 AIG Building \$079120 | T:+65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.

IDENTITY CARD NO \$7784287Z



YUNNI ARDIANA SUSILO

JAVANESE

11-06-1977

INDONESIA

DRIVING LICENCE REPUBLIC OF Character S7784287Z YUNNI ARDIANA SUSILO Birth Date: 11 Jun 1977 Issue Date: 24 Jul 2012



INDONESIAN 23-04-2011

23-04-2011
343 UPPER BUKIT TIMAH ROAD #01-03
SINGAPORE 588198
NRIC No.: S7784287Z Cate: 15/

Date: 15/11/2016 (R)

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











