SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

aforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	13/08/2019 15:44
Date Of Accident	12/08/2019 07:50
Exact Location Of Accident	TOWARDS SULTAN ABU BAKAR CHECKPOINT TO SG
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGX9222H
Insured/Policyholder	
Name Of Registered Owner	LOKE KIAN SIONG
NRIC No	S7414077G
Email Address	LOKE_VINCENT@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-81258298
Alternative Phone No	Office-81258298
Vehicle Particulars	
Manufacturer	AUDI
Model	A5 SPORTBACK QUATTRO 2.0 A
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	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	2100427627-03
Cover Note Number	24/09/2018-23/09/2019
Driver	
Name of Driver	LOKE KIAN SIONG
NRIC No	S7414077G
Date Of Birth	03/05/1974
Occupation	INDOOR
Date Of Driving Pass	02/03/1999

20 YEARS AND 5 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-81258298

Fax Number

Contact Number OFFICE-81258298

EMail Address LOKE_VINCENT@YAHOO.COM.SG

272D JURONG WEST ST 24 Address

09-16

Postcode 644272 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 SIDE SWIPE **Weather Conditions CLEAR Road Surface** DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

Passenger 1 Name: : LIM TONG LEE

> Gender: : Male

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 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLD6023G Vehicle Make/Model/Colour **BMW 2 SERIES**

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SHANE ALEXANDER S8936803J

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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
- 5. Any false reporting may be referred to the Police for investigation.
- 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
- 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.
- S. 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)
 - (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
- (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 GtA 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

i relations.

13 Any 2019

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name

NRIC/VIN NO.:

SKETCH PLAN		
A		1717
H+++/A-/		
1		
	+++++++++	
	++++++++++++	
TTTTT/ME/_	+++++++++++++	
TITLE		
	740160 63G 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	+++++++++++++++++++++++++++++++++++++++
		
		
DESCRIBE CIRCUMSTANCES O	F THE ACCIDENT	1 1 1 1 1 1 1 1 1 1
On 12 Aug 2019 x	17.50 1 61	fore Malaysian custom towards trans, As traffic was erratic and was mergin . In this the rebide ahead moved, by inched former thus causing the
the was a marrive	Count Just be	time Malaysian Choton towards trail
2 1 1 1002 01 1 600	and schaotic traffic.	As traffic was erratic and was meral
my was phead sco	borsh as shown chow	a Just as the relicle about an all
proceedly to more	forward Suf Sch 6023	by inched formed their course It
the panel of my car	to be damased.	the coming the
portant:		
ou have been advised by the workshop that in the event that you wish to laim against your own policy (OD CLAIM), There is a FOURTEEN (14) AYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame om the day of the occurrence.		- Reporting Only
		- Claim OD
		- Claim TP
on the occurrence.		· Claim OD/ FR at other workshop
CLARATION		
WE declare the foregoing parti	culars are true in every respect.	
		10
/ /.		1//
ino-the/11		V/Va:
icyholder's signature	Daland at	
te & Time	Driver's Signature	Reporting Centre Personnel's Signature
	(if driver not the policyholder	Name:
13 Aug 2019	Date & Time	Nric/Fin No.

INSURANCE CERT



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Loke Kian Siong

Period of Insurance

: 24 Sep 2018 To 23 Sep 2019 : CDN084239

Engine No. Chassis No.

: WAUZZZ8T8AA032493

Vehicle No. Policy No.

: SGX9222H : 2100427627-03

Endorsement No.

Issued Date : 27 Aug 2018

ABOUT THE COVER

: AUDI A5 SPORTBACK 2.0 TFSI QU

Engine Capacity/Tonnage: 1,984.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2010 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

a) The Policyholder b) Any other person who is diving on the Policyholder's order or with his/her parression. This Policy will indernify 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" (10%) 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, dismestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hive or reward, driving button, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods after 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 inapprative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Csp. 186) 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 - \$1400 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (whom applicable)

Loke Klan Siong - \$1400 (Own Damage)

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

Approved Repairing Centrest AIG Authorised Repaires (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 Scie Agent's workshop.

For other Approved Repairing CentrestAIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 5200. Alternatively, You may refer to AIG website www.atg.com.s. or AIG SG Motife App. Simply search and deserted "AIG SG" from iTunes or Google Play. se contact our 24-hour accident emergency hotime at +65 5338 5200. Alternatively, You may refer to AIC website www.aig.com.ag

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 (Cac. 189), Part IV of the Road Transport Act, 1997 (Mallaysia) and Motor Vehicles (Third Party Risks) Rules, 1909 (Melaysia).

0501951000

EE BOON KHENG EDMUND BLK 671C JURONG WEST ST 65 #11-122 SINGAPORE 643671 SP-JAMES-MOH

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7414077G



LOKE KIAN SIONG (LUO JIANXIANG)

CHINESE 049-01-04th Sec 03-05-1974 M SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Names: S7414077G Birth Date: 03 May 1974 tone Date 04 Apr 2003

57414077G

29-12-2004

APT BLX 272D JURIONG WEST STREET 24 #09-16
SINGAPORE 644272
NRIC No: \$74140776
Onto: 24-07-2006
No: \$409537

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

NP 428A

































