

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	19/08/2019 13:41
Date Of Accident	18/08/2019 21:55
Exact Location Of Accident	PIE TWDS AIRPORT BEFORE THOMSON
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH8394B
Insured/Policyholder	
Name Of Registered Owner	CHUA THIAM SOON
NRIC No	S1828934B
Email Address	CHUATHIAMSOON67@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96224288
Alternative Phone No	OFFICE-96224288

Vehicle Particulars

Manufacturer	HONDA
Model	CRV
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	1900014525
Cover Note Number	

Driver

Name of Driver	CHUA MING YANG MALCOLM
NRIC No	S9914911F
Date Of Birth	05/05/1999
Occupation	INDOOR
Date Of Driving Pass	30/01/2018
Driving Experience	1 YEAR AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90263722
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 639 CHOA CHU KANG ST 64 #10-19
Postcode	680639
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	CHAIN COLLISION
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)	5
Passenger 1	NAME: : MUHD OMER IQBAL GENDER: : MALE
Passenger 2	NAME: : PERVAIZ IQBAL GENDER: : MALE
Passenger 3	NAME: : HINA PERVAIZ GENDER: : FEMALE
Passenger 4	NAME: : IMAN IQBAL 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

I WAS TRAVELLING ALONG PIE TOWARDS AIRPORT ON THE SECOND RIGHT LANE OF 4 LANES. AS I WAS TRAVELLING STRAIGHT, I NOTIVED THAT THERE WERE ROADWORKS ON THE RIGHT MOST LANE. I PROCEED TO TRAVEL STRAIGHT. WHEN SUDDENLY, ONE M/TAXI (SHD9920M) SWERVED INTO MY LANE AND ENCROACHED INTO MY PATH FROM THE RIGHT MOST LANE INTO MY LANE. I IMMEDIATELY APPLIED MY BRAKE AND STOP WHEN M/CAR (SJP5022B) CAME FROM MY REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. DUE TO THE STRONG IMPACT, CAUSED MY VEHICLE TO SURGE FORWARD AND COLLIDED ONTO TAXI (SHD9920U).

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	SJP5022B
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Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHD9920U
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE C
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
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.:

GIA/RA/ SketchPlanForm_V3

Im Auto

Sketch Plan #2 Pg. 1

SKETCH PLAN

A: SLH 8394B.
B: SJ P 5022B
C: SHD 9920H

ROAD WORK.

PIE TOWNS AP BEFORE THOMPSON.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG PIE TOWARDS AIRPORT ON THE SECOND RIGHT LANE OF 4 LANES, AS I WAS TRAVELLING STRAIGHT, I NOTICED THAT THERE WAS ROADWORK ON THE RIGHT MOST LANE, I PROCEED TO TRAVELLING STRAIGHT, WHEN SUDDENLY ONE M/TAXI SHD 9920M, SWERVED INTO MY LANE AND ENCROACH INTO MY PATH FROM THE RIGHT MOST LANE INTO MY LANE. I IMMEDIATELY APPLY MY BRAKE AND STOP, WHEN M/CAR SJPS022B CAME FROM MY REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE, DUE TO THE STRONG IMPACT CAUSED MY VEHICLE TO SURGE FORWARD AND COLLIDED ONTO M/TAXI SHD 9920H.

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.:

Identification Card

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1828934B



Name

CHUA THIAM SOON



蔡 添 順

Race

CHINESE

Date of Birth

16-06-1967

Sex

M

S1828934B

Country of Birth

SINGAPORE

3288558



NRIC No S1828934B



Blood Group

Date of issue

06-01-2003

65453300
64673300



THINK ONE MOTOR TRADING

ING MOTOR TRADING

4668372

Identification Card

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9914911F



Name

CHUA MING YANG MALCOLM

蔡明陽

Race

CHINESE



Date of birth

05-05-1999

Sex

M

Country/Place of birth

SINGAPORE

5281618



NRIC No. S9914911F



Date of issue

10-03-2014

Address

APT BLK 639 CHOA CHU KANG STREET 64
#10-19
SINGAPORE 680639

Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S9914911F**
Name: **CHUA MING YANG MALCOLM**

Birth Date: **05 May 1999**
Issue Date: **30 Jan 2018**

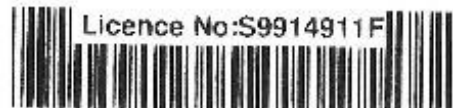


 002768863B

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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	30 Jan 2018

NP 428A





CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : CHUA THIAM SOON
Period of Insurance : 15 Feb 2019 To 14 Feb 2020
Engine No. : K24Z99053612
Chassis No. : MRHRM3650HP000119

Vehicle No. : SLH8394B
Policy No. : 1900014525
Endorsement No. :
Issued Date : 14 Feb 2019

ABOUT THE COVER

Make/Model : HONDA CRV 2.4 (Sedan)
Engine Capacity/Tonnage : 2,354.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2016
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 for any such 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 a Young and/or Inexperienced Driver (named or unnamed) is under the age of 25 and/or has less than 3 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 without valid licence, racing, jockeying, reliability trial or speed testing, the damage of goods other than samples in connection with any trade or business or use for any purpose in connection with Auto Trade.

Loss of Use 150000 - 160000 Optional

* Limitations rendered irrespective by Section 6 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 160) and Section 35 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Hire - \$0 **Own Damage** - \$800 **Theft** - \$0 **Fire Cover** - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CHUA THIAM SOON - \$800 (Own Damage)

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

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

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 6835 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: MayBank

We hereby certify that the policy is valid in the Republic of Singapore and is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 160), Part (b) of the Road Transport Act 1987 (Malaysia) and Motor Vehicle (Third Party Risks) Rules, 1986 (Malaysia).

0504125000

PREMIUM LEASING PTE LTD

291 ALEXANDRA ROAD AUTO CUSTOMER SERVICE CENTRE

SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Manile

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORIZED REPRESENTATIVE

Copy to Green Desk

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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

