

## 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	19/09/2019 11:43
Date Of Accident	30/08/2019 12:10
Exact Location Of Accident	ALONG ANG MO KIO ST 63 TOWARDS ANG MO KIO AVE 9
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFX6885B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUA SAW HUI (CAI SUHUI)
NRIC No	S7508731D
Email Address	FELICIA.CHUA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97525288
Alternative Phone No	Others-97525288

### Vehicle Particulars

Manufacturer	MAZDA
Model	3 1.5 SKYACTIV
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	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	1800071568
Cover Note Number	

### Driver

Name of Driver	CHUA SAW HUI (CAI SUHUI)
NRIC No	S7508731D
Date Of Birth	02/03/1975
Occupation	OUTDOOR
Date Of Driving Pass	04/11/2003
Driving Experience	15 YEARS AND 9 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-97525288
Fax Number	
Contact Number	OTHERS-97525288
EMail Address	FELICIA.CHUA@GMAIL.COM
Address	BLK 236 BISHAN STREET 22 #13-162
Postcode	570236
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 - 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?	YES
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 20 BISHAN STREET 23 , <b>POSTCODE:</b> 579757 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-5529999 - <b>FAX NO:</b> 65561905
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/20190830/2183.

#### 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	FP923G
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1
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Name	
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FP923G
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Sketch Plan


### SKETCH PLAN

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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. 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 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: 19 SEP 2019  
11:43 AM

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

  
Reporting Centre Person's Signature  
Name: Kwee Choo  
NRIC/FIN No.: S6840583A

Ang Mo Kio Ave 9

Ang Mo Kio St 63

H u m p

B

X

(A) SFX 6885B

(B) motorcycle (FP923G)

Refer to Police report: T/2019 0830/2183.

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time: 19 SEP 2019

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name: Poh Kwee Choo  
NRIC/FIN No.: S6840583A



**SINGAPORE  
POLICE FORCE**



T/20190830/2183

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

1 of 4  
Report No. T/20190830/2183

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 30/08/2019 20:23		Vide Report No.:		Station Diary No.: 215	
<b>Informant's Particulars</b>					
Name of Informant: CHUA SAW HUI			Address: APT BLK 236 BISHAN STREET 22 #13-162 SINGAPORE 570236		
ID Type / ID No.: NRIC NO / S7508731D			Contact No.: Home/Office: Mobile: 97525288		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 44	Date of Birth: 02/03/1975	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: IT SALES			Driving Licence Information: Class: 2B,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 30/08/2019 12:10	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 ANG MO KIO STREET 63 ANG MO KIO AVENUE 9 along ANG MO KIO STREET 63 towards ANG MO KIO AVENUE 9				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Nil				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FP923G	Motorcycle					0
SFX6885B	Car	MAZDA	MAZDA3 HATCHBACK 1.5 AT DELUXE EU6	Silver	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20190830/2183

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

2 of 4

Report No. T/20190830/2183

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFX6885B	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800071568	06/06/2018	05/06/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	Muhammad Aswan Bin andi A'shikin		ID No.	S9444235D
Related Vehicle	FP923G (Motorcycle)		Contact No.	94569485
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL
Driver				
Name	CHUA SAW HUI		ID No.	S7508731D
Related Vehicle	SFX6885B (Car)		Contact No.	97525288
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

**Brief Details.**

On 30/8/2019 at about 1208hrs, I was driving my vehicle (SFX6885B) along Ang Mo Kio street 63 towards Ang Mo Kio Ave 9. It was a two lane road and I was travelling on the right lane. Subsequently, I checked that there's no vehicle so I proceeded to change lane to the left. While I was changing my lane, suddenly a motorcycle (FP923G) rode at the left side of my vehicle and got very close to my vehicle. I did not side swipe against his motorcycle (FP923G) and our vehicle did not come into contact. Subsequently, the rider of the motorcycle (FP923G) kicked my vehicle causing him to fall towards his left to avoid the collision. Upon seeing him fall, I stopped my vehicle and rendered assistance. I asked the rider if he requires medical assistance. However, he claimed that he does not need the ambulance. We exchanged particulars. I made a check on my vehicle and observed there was a black stain but the corner of my left side mirror light glass chipped off. My vehicle was installed with a front camera which was it did not record the incident. I am lodging report for record purpose in case there are any allegation made against me.



**SINGAPORE  
POLICE FORCE**



T/20190830/2183

3 of 4

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

Report No. T/20190830/2183

CONTINUATION OF REPORT

CERTIFICATE OF INSURANCE





# CERTIFICATE OF INSURANCE

## MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : CHUA SAW HUI (CAI SUHUI)  
Period of Insurance : 06 Jun 2018 To 05 Jun 2020  
Engine No. : P520492034  
Chassis No. : JM6BN24A8J0200577

Vehicle No. : SFX6885B  
Policy No. : 1800071568  
Endorsement No. :  
Issued Date : 26 Jun 2018

### ABOUT THE COVER

Make/Model : MAZDA 3 1.5 SKYACTIV  
Engine Capacity/Tonnage : 1,496.00 CC  
Driver Restriction : NA  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2018  
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 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CHUA SAW HUI (CAI SUHUI) - \$600 (Own Damage)

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

1. Trans Eurocars Pte Ltd Add: 5 Ubi Close, Singapore 408605 63958899

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](http://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: HONG LEONG FINANCE 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, 1959 (Malaysia).

0503599190

ARF (AP) PTE LTD - MAZDA  
7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX  
SINGAPORE 069111  
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*M. N. N.*

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

SSCA58

DRIVER'S NRIC + DRIVING LICENCE

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7508731D



Name  
CHUA SAW HUI  
(CAI SUHUI)

Race  
CHINESE

Date of birth  
02-03-1975

Sex  
F

Country of birth  
SINGAPORE



S / SDB73 10

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7508731D

Name  
CHUA SAW HUI  
(CAI SUHUI)

Birth Date: 02 Mar 1975

Issue Date: 18 Jun 2003



000579361B

3703283



NRIC No: S7508731D



Date of issue  
11-04-2005

APT BLK 236 BISHAN STREET 22 #13-162  
SINGAPORE 570236

NRIC No: S7508731D Date: 04/05/2014


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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	30 Jun 1999
Class 3	Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg	04 Nov 2003

S7508731D

S / No. 9000015379

Licence No: S7508731D



NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo





CHASSIS NUMBER

