

## 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	16/09/2019 13:40
Date Of Accident	14/09/2019 16:30
Exact Location Of Accident	FARRER RD TO QUEENSWAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT4973T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG SOON GUAN
NRIC No	S6975159H
Email Address	STEVEN.SG.ONG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90022927
Alternative Phone No	Others-90022927

### Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI-1.2 DIG-T CVT ABS 2WD 5DR (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	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	1700071441-01
Cover Note Number	31/10/2018 - 30/10/2019

### Driver

Name of Driver	NATALIE ONG JIAQI
NRIC No	S9729015F
Date Of Birth	01/09/1997
Occupation	INDOOR
Date Of Driving Pass	23/11/2016
Driving Experience	2 YEARS AND 9 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-85114460
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 714 ANG MO KIO AVE 6 #07-4018
Postcode	S560714
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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
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)	1

#### 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

Refer to attached 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	SMH1104G
Vehicle Make/Model/Colour	OPEL CROSSLAND
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ALEXANDER METZNER
NRIC/Passport Number	
Contact Number	97255975

Address

Postcode

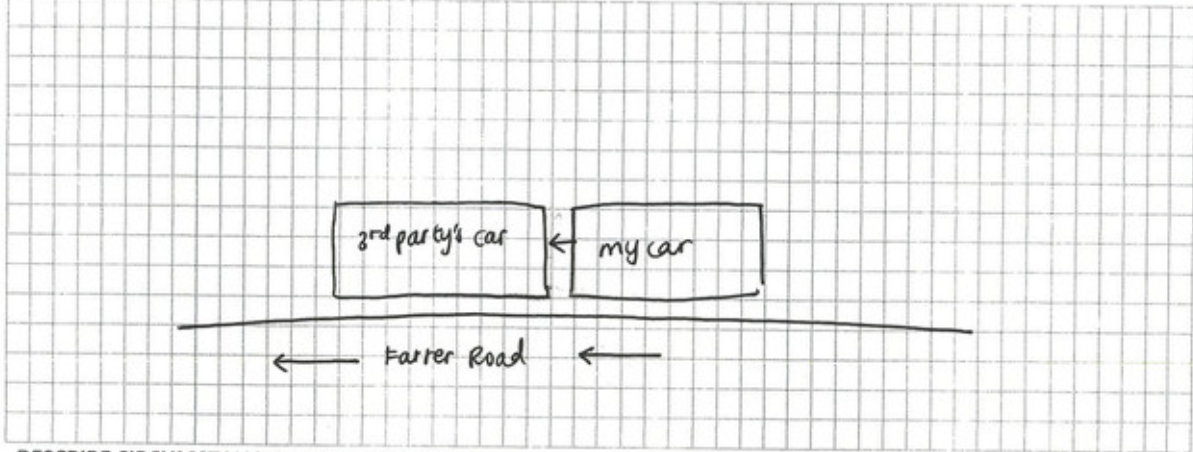
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Farrer Road and from a distance saw that the traffic light turned from red to green. The car in front had not moved off yet, and I was slowing down as I approached. I did not stop fully and bumped into the car in front at a slow speed.


#### Important:

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) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- |                          |                                  |
|--------------------------|----------------------------------|
| <input type="checkbox"/> | - Reporting Only                 |
| <input type="checkbox"/> | - Claim OD                       |
| <input type="checkbox"/> | - Claim TP                       |
| <input type="checkbox"/> | - Claim OD/ TP at other workshop |

### DECLARATION

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



Policyholder's signature  
Date & Time



Driver's Signature  
(if driver not the policyholder)  
Date & Time





Reporting Centre Personnel's Signature  
Name:  
Nric/Fin No.

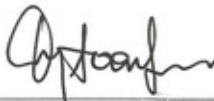
## SKETCH PLAN

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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.:



COI

AIG		CERTIFICATE OF INSURANCE	
<b>NISSAN AUTO PROTECTOR PRIVATE VEHICLE</b>			
<b>Name of Policyholder</b>	: ONG SOON GUAN	<b>Vehicle No.</b>	: SLT6573T
<b>Period of Insurance</b>	: 31 Oct 2018 To 30 Oct 2019	<b>Policy No.</b>	: 1700071441-01
<b>Engine No.</b>	: HRA2500453A	<b>Endorsement No.</b>	:
<b>Chassis No.</b>	: SUNFEA11U2043795	<b>Issued Date</b>	: 08 Oct 2018
<b>ABOUT THE COVER</b>			
<b>Make/Model</b>	: NISSAN Gashol 1.2 DIG-Turbo	<b>Sum Insured</b>	: Market Value
<b>Engine Capacity/Tonnage</b>	: 1,197.02 CC	<b>Off Peak Car</b>	: No
<b>Driver Restriction</b>	: NA	<b>First Year of Registration</b>	: 2017
<b>Person or Classes of Persons Entitled to Drive*</b> :		<b>Insuring with COE/PAF</b> : No	
<p>a) The Policyholder  b) Any other person who is driving on the Policyholder's order or with special 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 \$5,000 for "Younger and Inexperienced Driver Discount" ("YIED") if You, as a Your Authorised Driver (named as above) is under the age of 25 and/or has less than 3 years' driving experience.</p>			
<b>Age Condition</b> : All Age Condition			
<b>Limitation as to use*</b> :			
<p>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 before, during test, racing, pace racing, stunts, trial or speed testing, the carriage of goods other than parcels in connection with any trade or business or use for any purpose in connection with Motor Trade.</p>			
<b>Limit of Use</b> 1900cc - 1900cc			
<p>* Indemnity restricted according to Section 5 of the Motor Vehicle and Compensation Act (Cap. 186) and Section 35 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>			
<b>EXCESS</b>			
<b>Section 1</b>			
Fire - \$0 Own Damage - \$500 Third - \$0 Excess Cover - \$0			
<b>Section 2</b>			
Property Damage - \$0			
<b>Windscreen</b> : \$150			
<b>Named Driver and Excess</b> (where applicable)			
ONG SOON GUAN			
<b>APPROVED REPORTING CENTRE/AUTHORISED REPAIRERS (FOR CLAIMS RELATY TO REPAIRS)</b>			
<p>1. TC AutoCare, 4th Flr, 1, 10th, 11th, 12th Road Singapore 200001  2. AutoLink Insurance, 400, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 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王佳琦

Race  
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Country of birth  
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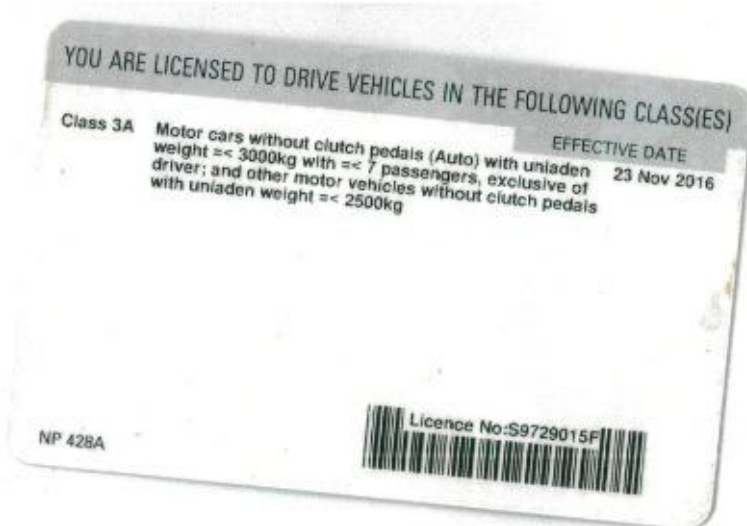


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