# SINGAPORE ACCIDENT STATEMENT

# **IMPORTANT NOTICE**

Occupation

**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 <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

| aforesaid.   |                                      |
|--|--------------------------------------|
|  | ACCIDENT STATEMENT                   |
| Date Of Report   | 19/09/2019 16:04                     |
| Date Of Accident   | 18/09/2019 13:35                     |
| Exact Location Of Accident   | ZION ROAD TOWARDS ORCHARD ROAD       |
| Country/State of Loss  | SINGAPORE                            |
|  | DETAILS OF OWN VEHICLE               |
| Vehicle Registration Number  | SKK611Z                              |
| Insured/Policyholder   |                                      |
| Name Of Registered Owner   | LIM AH THIONG                        |
| NRIC No  | S1805568F                            |
| Email Address  | ANDY@ACCESSPROFESSIONAL.COM          |
| Mobile Phone No  | (LOCAL) +65-97933322                 |
| Alternative Phone No   | Others-97933322                      |
| Vehicle Particulars  |                                      |
| Manufacturer   | LEXUS                                |
| Model  | LS460                                |
| 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                                       | 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  | 1800040847-01                        |
| Cover Note Number  |                                      |
| Driver   |                                      |
| Name of Driver   | LIM AH THIONG                        |
| NRIC No  | S1805568F                            |
| Date Of Birth  | 28/10/1967                           |
|  |                                      |

**INDOOR** 

24/01/1990

29 YEARS AND 7 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-97933322

Fax Number

**Contact Number** OTHERS-97933322

**EMail Address** ANDY@ACCESSPROFESSIONAL.COM

NO

2

NO

NO

YES

NO

1

NO

NO

NO

Address 201 TANJONG RHU ROAD #07-15

Postcode 436917

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

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.

Was there any audio recorded?

# Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

SHC5523P Vehicle Registration Number

Vehicle Make/Model/Colour TRANSCAB RENAULT

**Details Of Properties** 

**TAXI** Vehicle Category

Name of Driver TAN CHENG HONG

NRIC/Passport Number S1638764I Contact Number 98774486

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

#### Sketch Plan

### SKETCH PLAN

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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.

Date & Time:

1 9 SEP 2019

Driver's Signature

(If driver is not the policyholder)

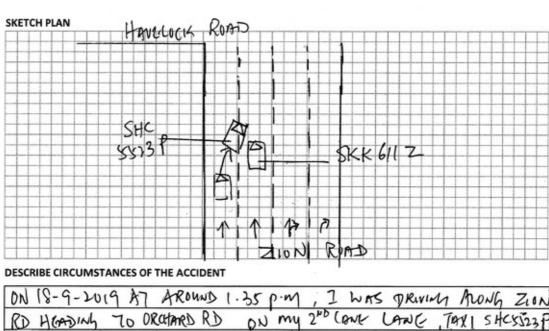
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jenny Lim S6927273H



RD HEADING TO DROTATED RD WAS DRIVING ON MY LEFT LANE SWODENLY CUT INTO MY LANE WITHOUT SIDE (FIT DATO MY DNY SIGNAL, HENCE HIS TAXI REAR RIGHT VEYICLE FRUNT LEM CIRNER, I GUICKLY USE MY HOME PHONE 700K BOMZ PHOOD SITUMING THE PARI CUT INTO MY LANG, UPON ALIGHTED WE Exceptible DAMICHIME For INSUMPLE /bjurts. DECLARATION

e foregoing particulars are true in every respect.

GIARMC SketchPI . 9 SEP 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

Jenny Lim S6927273H











# CERTIFICATE OF INSURANCE

### AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Lim Ah Thiong

Period of Insurance : 28 Aug 2019 To 27 Aug 2020

Engine No.

: 1UR0209464

Chassis No.

: JTHGL46FX05043237

Vehicle No.

: SKK611Z : 1800040847-01

Policy No. Endorsement No.

Issued Date

: 06 Aug 2019

### ABOUT THE COVER

Driver Restriction : NA

Make/Model

: LEXUS LS460

Engine Capacity/Tonnage: 4,608.00 CC

Off Peak Car : No

Sum Insured : Market Value

First Year of Registration : 2011

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 fultion, 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), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

Section 1 Fire - \$0 Own Damage - \$1000 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0 Windscreen: \$100

Named Driver and Excess (where applicable)

Lim Ah Thiong - \$1000 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (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 Sole Agent's workshop.

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: NA

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 (Cap. 189), Part IV of 5 the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0502152000

LEE HOCK CHYE SAM

1 GATEWAY DRIVE #19-10 WESTGATE TOWER

SINGAPORE 608531

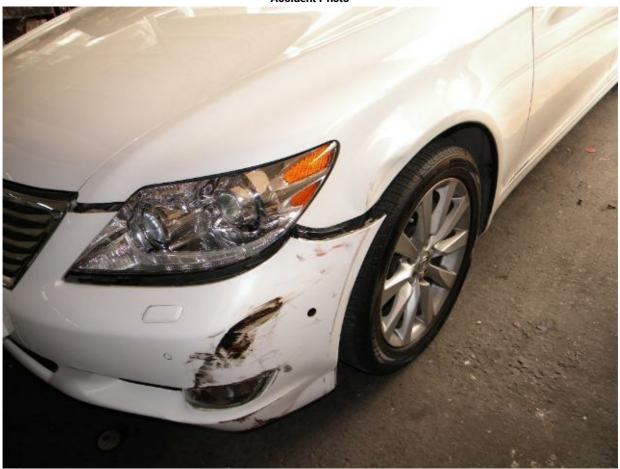
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

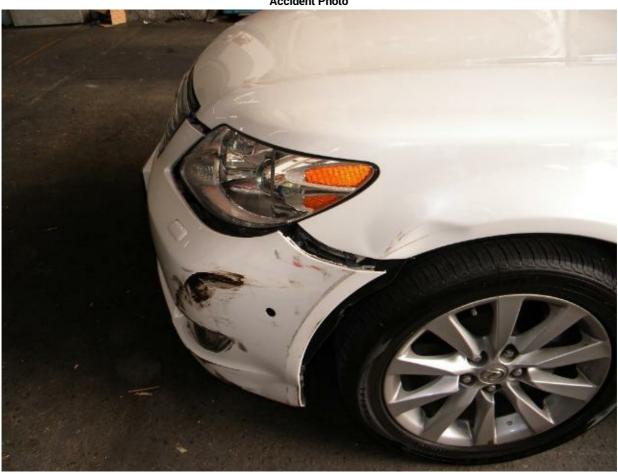








**Accident Photo** 



# **Accident Photo**







# **Chassis Number**



# **Accident Photo**



**Accident Scene Photo** 

