

## 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 13:02
Date Of Accident	15/09/2019 06:15
Exact Location Of Accident	CHANGI VILLAGE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ2745D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YAP BOON KIAT
NRIC No	S1787456Z
Email Address	YBKPAUL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98336995
Alternative Phone No	Office-NOPHONE

### Vehicle Particulars

Manufacturer	SUBARU
Model	XV-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL/LEISURE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	2100447999-03
Cover Note Number	

### Driver

Name of Driver	YAP BOON KIAT
NRIC No	S1787456Z
Date Of Birth	13/05/1967
Occupation	INDOOR
Date Of Driving Pass	09/04/1990
Driving Experience	29 YEARS AND 5 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98336995
Fax Number	
Contact Number	OFFICE-NOPHONE
EMail Address	YBKPAUL@GMAIL.COM
Address	515 YIO CHU KANG #05-45
Postcode	787083
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?	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)	2
Passenger 1	Name: : M Gender: : Male

#### 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

PLEASE REFER ATTACHED

#### 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	SHD5876R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	

NRIC/Passport Number

Contact Number

Address

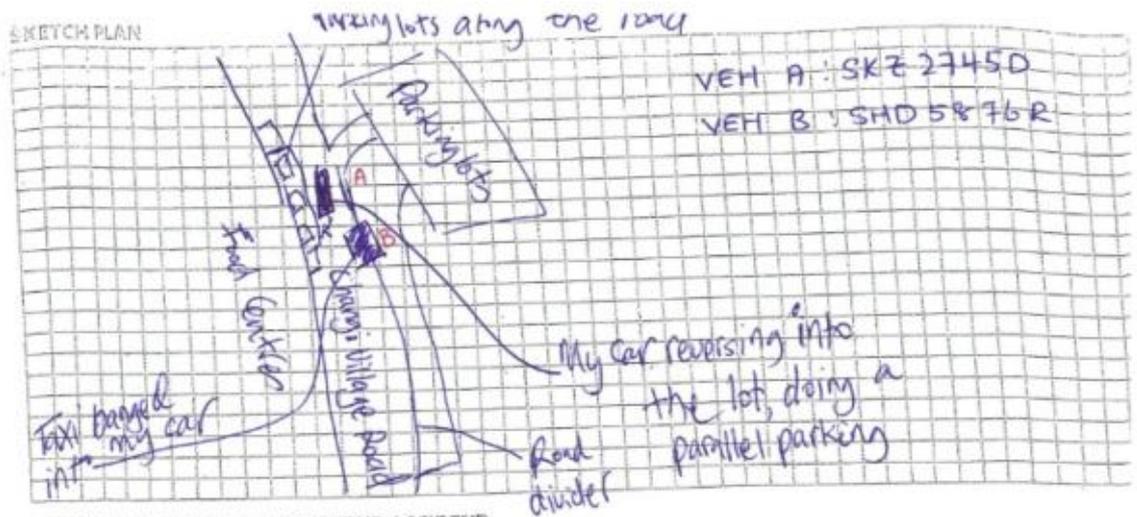
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1. At around 6.5am, I drove <sup>along</sup> Changi Village Road, SUBARU XV SKZ 2745D
2. To the left of Changi Village Road, there was an empty parking lot. I spotted the empty lot just behind the T junction behind Changi Village Road & Lorong Bekukong. I proceeded to show my signal, so that other cars behind me were aware that ~~that~~ I planned to park my car.
3. A car behind me at a safety distance travelled slowly and proceeded to pass my car safely ~~as~~ I was reversing my car.
4. I continued reversing my car, noting that another car was around 5 cars length behind my car. I proceeded to reverse my car slowly into the parking lot. I did so while my car was in the leftmost lane. The breadth of Changi Village is wide enough to accommodate a minimum of ~~3~~ 3 normal saloon cars.
5. However, the driver of Transcab SHD 5876 R was straddling both lanes of Changi Village Road and did ~~not~~ not notice me reversing.
6. Consequently the front left of his car knocked into the rear right of my car. This resulted in damage to the rear right bumper, along with dents and scratches.
7. At the point of impact, I was in a state of shock, while attempting to bring the car to a stop, I mistook the acceleration pedal for the brake pedal, while my car was already in reverse mode. As such this resulted in my car reversing into a metal handrail by the side of the road.

DECLARATION

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

*[Signature]*

Policyholder's Signature

Date & Time:  
Sept 16, 2019

SIARMC SketchPlanForm\_V3

10:50am

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

*[Signature]*  
Reporting Centre Personnel's Sign  
Name: DANIEL JUDE  
NRIC/PIN No.: -

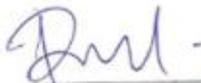
SKETCH PLAN

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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 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 provider 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:

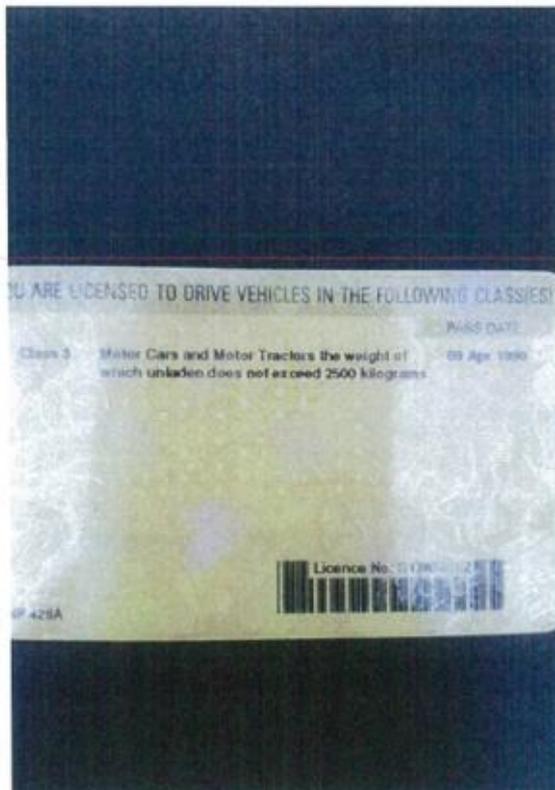
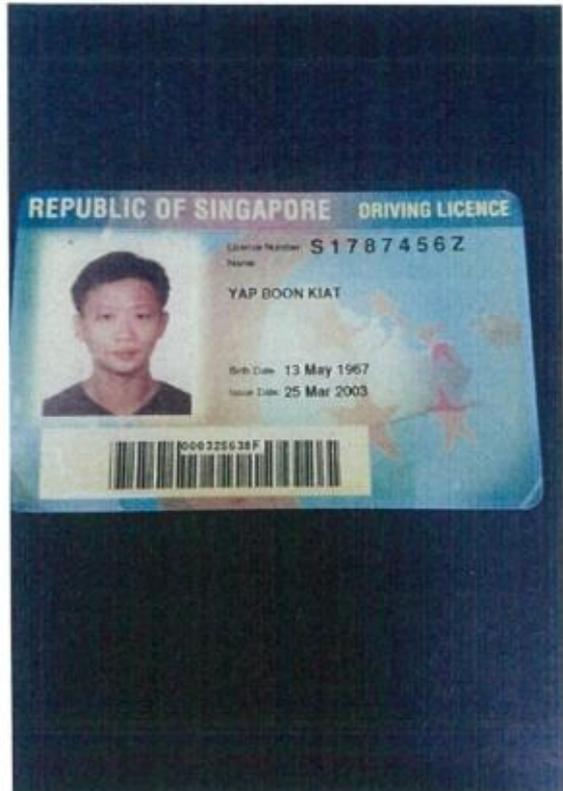
Sept 16, 2019  
10:51am

GIA/AMC SketchPlanForm\_V3

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



Reporting Centre Personnel's Signature  
Name: DANIEL JOE  
NRIC/FIN No.: -



INSURANCE CERT



# CERTIFICATE OF INSURANCE

## SUBARU AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Yap Boon Kiat  
**Period of Insurance** : 18 Jan 2019 To 17 Jan 2020  
**Engine No.** : FB16Y069232  
**Chassis No.** : JF1GP3KC5FG159168

**Vehicle No.** : SKZ2745D  
**Policy No.** : 2100447999-03  
**Endorsement No.** :  
**Issued Date** : 04 Dec 2018

### ABOUT THE COVER

**Make/Model** : SUBARU XV 1.6  
**Engine Capacity/Tonnage** : 1,600.00 CC  
**Driver Restriction** : NA  
**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" ("YIDF") 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 - 1500cc

\* Limitations rendered inoperative by Section 6 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 - \$800 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

**Named Driver and Excess (where applicable)**

Yap Boon Kiat - \$800 (Own Damage), Lal Joo Kiang Karen - \$800 (Own Damage)

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

1. Motor Image Enterprises Pte Ltd. Add: 19 Lorong 8 Tse Payoh Singapore 319255 64170100

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6333 8200. 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

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).

0500618208

TAN CHONG CREDIT SUBARU-DEL  
 911 BUKIT TIMAH ROAD  
 SINGAPORE 599622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**  
 AUTHORISED REPRESENTATIVE

City-W Text

Accident Photo



Accident Photo



Accident Photo



Accident Photo



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