

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	23/09/2019 13:59
Date Of Accident	21/09/2019 04:45
Exact Location Of Accident	TAMPINES AVE 5 & AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX8772X
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Insured/Policyholder

Name Of Registered Owner	CONNECT4CAR PTE LTD
Co Reg No	201411459M
Email Address	DANIEL.NG@CONNECT4CAR.COM
Mobile Phone No	
Alternative Phone No	Office-67451266

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
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	999994343
Cover Note Number	

Driver

Name of Driver	MIGAWATI BINTE JANTAN
NRIC No	S1584814F
Date Of Birth	15/02/1963
Occupation	INDOOR
Date Of Driving Pass	26/06/1991
Driving Experience	28 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-92389763
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 528 WOODLANDS DRIVE 14 #05-517
Postcode	730528
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - -
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?	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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20190921/2053.

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	FY5018P
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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	
Name	RIDER OF VEH B
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FY5018P
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

Sketch Plan

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) to comply 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.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report.

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.:



**SINGAPORE
POLICE FORCE**



T/20190921/2053

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

1 of 3

Report No. T/20190921/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/09/2019 11:29		Vide Report No.: G/20190921/0048		Station Diary No.: 38	
Informant's Particulars					
Name of Informant: MIGAWATI BINTE JANTAN			Address: APT BLK 528 WOODLANDS DRIVE 14 #05-517 SINGAPORE 730528		
ID Type / ID No.: NRIC NO / S1584814F			Contact No.: Home/Office: Mobile: 00		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 56	Date of Birth: 15/02/1963	Type of Informant: Driver		
Race: Javanese			Language:		Institution / School Name:
Occupation: PRIVATE HIRER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/09/2019 04:45	Type of Location: Straight Road
Location: Junction of Road 1 and Road 2 TAMPINES AVENUE 5 TAMPINES AVENUE 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FY5018P	Motorcycle	YAMAHA		Red		0
SKX8772X	Car	TOYOTA		Silver		1

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20190921/2053

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Report No. T/20190921/2053

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Brief Details.

On the date, time and location mentioned above, I V1 (SKX8772X) was travelling along extreme left of 5 lane road going straight. Upon reaching junction, as traffic light was 'red'. I stopped and collided onto V2 (FY5018P) which was at unknown lane. The collision was the right side mirror onto V2.

The accident took place immediately when I stop my vehicle. I did not noticed V2 at all. It was only collision did I realise V2 was stationary. V2 rider conveyed to hospital.

No mechanical fault. In-car CCTV's SD card handed over to TPO who attended to case.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20190921/2053

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

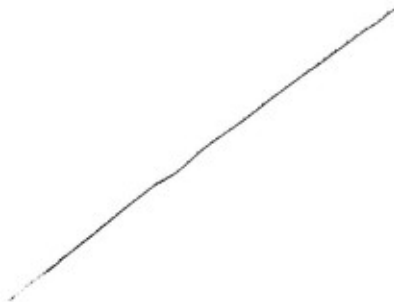
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Report No. T/20190921/2053





CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan



IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sgt 2 GOH JUN KIAT JASON 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 21/09/2019 11:29
Officer In Charge Of Case: TP / GIT / Sgt 2 HO JIEKANG IVAN  Contact No: 65476170	Classification Of Case:
Authentication Stamp NP168  SIGNATURE	

Driving License

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1584814F



Name

MIGAWATI BINTE JANTAN

Race

JAVANESE

Date of birth

15-02-1963

Country/Place of birth

SINGAPORE

Sex

F

S1584814F



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1584814F

Name

MIGAWATI BINTE JANTAN

Birth Date: 15 Feb 1963

Issue Date: 16 Mar 2019



6163157



NRIC No. S1584814F

Date of issue

10-02-2019

APT BLK 528 WOODLANDS DRIVE 14 #05-517
SINGAPORE 730528

NRIC No: S1584814F

Date: 30/08/2019

SINGAPORE 730145

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 25 Jun 1991



NP 428A



HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

COMPREHENSIVE		COMMERCIAL MOTOR		POLICY EXCESS		SS\$2000.00 (Sect 1 & 2)
CERTIFICATE NO.		SKX8772X		WINDSCREEN EXCESS		SS\$100.00
POLICY NO.		999994343				
				SUM INSURED	YES	
				INSURING WITH COE/PARF	YES	
1) VEHICLE REGISTRATION NO.				SKX8772X		
2) NAME OF INSURED				CONNECT4CAR PTE LTD		
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT				04 December 2018		
4) DATE OF EXPIRY OF INSURANCE				03 December 2019		
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*						
<small>Any person who is driving on the Insured's order or with their permission. SS\$2,000.00 Section I & SS\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore. An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore. Accident repair has to be carried out at AIG appointed list of workshop only.</small>						
<small>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</small>						
6) LIMITATION AS TO USE*						
1) Use for social, domestic, pleasure purposes and business purposes of Insured						
2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.						
3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.						
<small>The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.</small>						
LOSS OF USE		Not Included				
HIRE PURCHASE COMPANY		SINGAPURA FINANCE LTD				
<small>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</small>						

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 29 Nov 2018

AIG Asia Pacific Insurance Pte. Ltd.

504641-000
Assure Insurance Agency Pte Ltd
29 Kelantan Road
#01-111 Kelantan Court
Singapore 200029

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

