

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	03/10/2019 11:06
Date Of Accident	02/10/2019 19:15
Exact Location Of Accident	ALONG SIMS AVENUE AT YELLOW NBOX
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJE2080K
Insured/Policyholder	
Name Of Registered Owner	LIM SIEW PING
NRIC No	S7737730A
Email Address	SPLIM25@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97398377
Alternative Phone No	Others-97398377

Vehicle Particulars

Manufacturer	TOYOTA
Model	C-HR 1.8
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	1800038989-01
Cover Note Number	

Driver

Name of Driver	LIM SIEW PING
NRIC No	S7737730A
Date Of Birth	25/12/1977
Occupation	INDOOR
Date Of Driving Pass	08/01/2001
Driving Experience	18 YEARS AND 8 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-97398377
Fax Number	
Contact Number	OTHERS-97398377
EMail Address	SPLIM25@GMAIL.COM
Address	BLK 324 UBI AVENUE 1 04-545
Postcode	400324
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	RAINING
Road Surface	WET

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?	
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)	4
Passenger 1	Name: : DAPHNE YAP Gender: : Female
Passenger 2	Name: : PERLINE Gender: : Female
Passenger 3	Name: : MEIQI Gender: : Female

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 TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO - APPLE HEV INTERNATIONAL
Was there any audio recorded?	NO

Details of Witness 1

Name	CHUAH GEOK HIOH
Phone Number	94304056
Email Address	

Details of Witness 2

Name	JERROLD WONG
Phone Number	83836566
Email Address	

Details of Witness 3

Name	MAXIE
Phone Number	91726640
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD5965S
Vehicle Make/Model/Colour	TRANSCAB
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

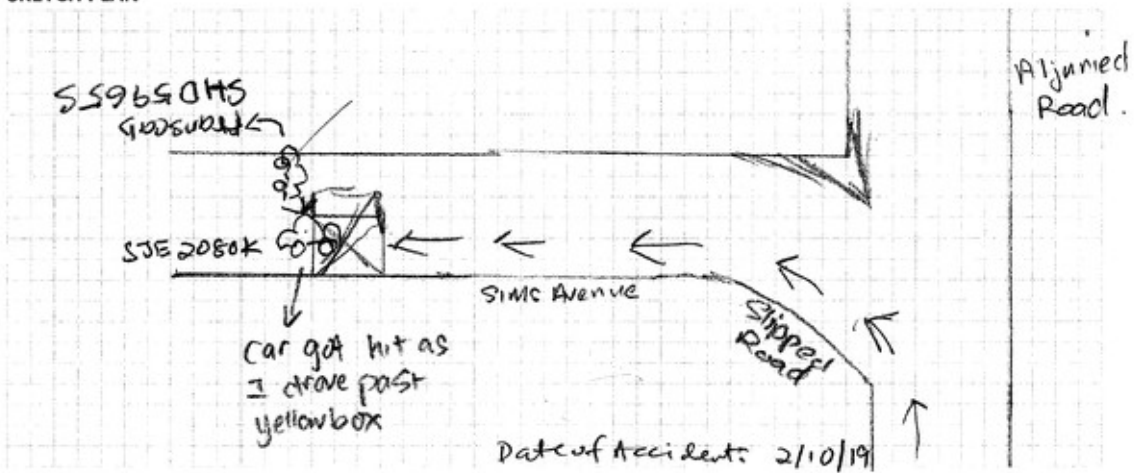
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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 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:
-3 OCT 2019
11:06am

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


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Time: 7:15 pm.

I was heading towards Lorong 2SA Geylang Public carpark.
So I turn from the slip road of aljunied road into
Sims Avenue.
I was driving at a slow speed due to rain and
heavy traffic.
As I need to turn into lorong 2SA Geylang
public carpark, I kept to the first lane
So after I drive through the slipped road and onto
Sims Avenue. I drive straight on as there's
no vehicles ahead. I kept to the first lane
since I'll be turning into the public carpark later.
As I drive along, suddenly a transcab taxi just
ram into my car on my right hitting the driver's door
area.

DECLARATION

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

Signature

Policyholder's Signature
Date & Time:
-3 OCT 2019

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

Signature
Reporting Centre Personnel's Signature
Name:
NRIC/IN No.:

CERTIFICATE OF INSURANCE



CERTIFICATE OF INSURANCE

AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : LIM SIEW PING
Period of Insurance : 25 May 2019 To 24 May 2020
Engine No. : 22R8014744
Chassis No. : ZYX102006090

Vehicle No. : SJE2080K
Policy No. : 1800038989-01
Endorsement No. :
Issued Date : 22 Apr 2019

ABOUT THE COVER

Make/Model : TOYOTA C-HR 1.8
Engine Capacity/Tonnage : 1,797.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
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 - 1800cc Optional

* 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

LIM SIEW PING - \$600 (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 can be carried out at the repairer of Your choice (unless specifically excluded by Us).
For 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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

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, 1969 (Malaysia).

0500718000

JG MOTOR AGENCY
80 CHANGI ROAD #04-06 CENTROPOD @ CHANGI
SINGAPORE 497115
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

Shen Yik Hong, Director

For information only: AIG Singapore 20011201, E: +65 6419 3000, www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.

DRIVER'S NRIC + DRIVING LICENCE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7737730A



Name
LIM SIEW PING
(LIN XIUBING)
林秀冰

Race
CHINESE

Date of Birth
25-12-1977

Sex
F

Country of Birth
SINGAPORE

AS177862

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7737730A

Name
LIM SIEW PING (LIN XIUBING)

Birth Date: 25 Dec 1977

Issue Date: 16 Dec 2002

000026581A

AS177862

NPIC No. S7737730A

Street Group: O+

Date of issue: 25-07-2002

Address
APT. BLK 324 UBI AVENUE 1
#04-545
SINGAPORE 400324

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

Class	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	08 Jan 2001

NP 428A

Licence No: S7737730A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

