NATIONAL Assessment Centre	Services.	fuel I Jan'03] .	MMAL	1913776	4.	
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(H) D' Reporting Only	I-Photo Uplos	nded				
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TP Insurer:	Ass't Report by	y Fax / Hand to	Owner/Wksp			EDEALES PAR
Professed Wksp / INC Assign Wksp / QW: (Transfer of the Paris of the Pa		Tol:	Fax:)
TP Particulars: Veh No: SG	R 2228 U.	. INC(.)/Non-IN	C(,).		
Owner / Driver: (Tel:			
Policy No: () Perio	d: ()	Cover Type:	() .	
Confirmed by : (Dates	Tin)	
Insured/Driver Liability: (%) [No	te-Est. Status (V	/O): N: 0-20)%; P: 21-79	%. P: 80-100	%]	
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Drive-In ()/Towed-In (); Invoice:	YES()/N	O(); To	owing Co: (. 1)
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1) Apply for Transfort Allowance ()/Cou	irtesy Car ()				
2) QC Check / Post Repair Inspection	(·)	4			, , ,	
3) Upload Resurvey Photo [Repair Cost > \$300	00] (·)) : ;	-			
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		Invoice auteu		MIZAGE NEW WALL		27,7128

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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 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.
- 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.

Extended to the property of the property	ACCIDENT STATEMENT
Date Of Report	17/10/2019 13:55
Date Of Accident	16/10/2019 13:00
Exact Location Of Accident	27 MOULMEIN RISE SHOW FLAT CARPARK
Country/State of Loss	SINGAPORE
Market Street Street Street Council of Street	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLU9630U
Insured/Policyholder	
Name Of Registered Owner	VALERIE LAUREN LEE (LI WENXIN)
NRIC No	S7728706Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97638887
Alternative Phone No	OFFICE-97638887
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO K3
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	1700089260
Cover Note Number	
Driver	
Name of Driver	VALERIE LAUREN LEE (LI WENXIN)
NRIC No	S7728706Z
Date Of Birth	19/10/1977
Occupation	OUTDOOR
Date Of Driving Pass	31/10/2007
Driving Experience	11 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97638887

OFFICE-97638887

NOEMAIL

Address

18 FLORA DR #04-30

Postcode

506946

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

OWNER

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

CHANGI N.P.C

Police Station Address

ROAD: 9 SIMEI STREET 2, POSTCODE: 529914, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20191016/2222

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

SGR2228U

Vehicle Make/Model/Colour

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

IMPORTANT NOTICE

- Please report <u>correctly</u> 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:
 - 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 Sigrature Date & Time:

Driver's Signature (If driver is not the policyholder)

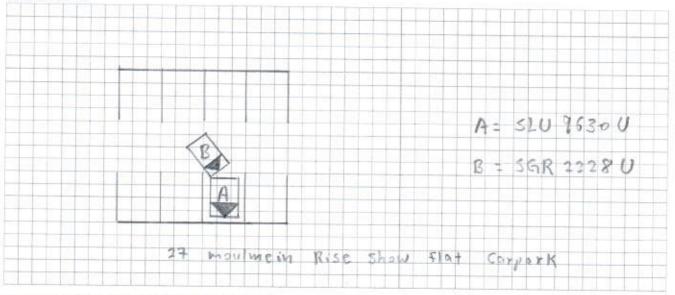
Date & Time:

Reporting Centre Personnel's Signature Name:

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer	+0	Police	Report	7/20191016/2223
		,		

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.:





Police Station Of Origin:

Changi N.P.C

9 Simei Street 2 SINGAPORE 529914

Tel No: 1800-5872999

1 of 3 Report No. T/20191016/2222

REPORT OF A TRAFFIC ACCIDENT

16/10/20	e Report N 19 23:23	Made:	Vide Report No.:	Station Diary No.: 23	
Informar	t's Partic	ulars		THE RESERVE OF THE PARTY OF THE	
	Informant: LAUREN		Address: 18 FLORA DRIVE #04-30 SIN	NGAPORE 506946	
ID Type / ID No.: NRIC NO / S7728706Z		06Z	Contact No.: Home/Office: Mobile: 97638887		
Nationalit SINGAPO	y: DRE CITIZ	EN	Email:		
Sex: Female	Age:	Date of Birth: 19/10/1977	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation REAL ES	on: TATE AGI	ENT	Driving Licence Information:	Date of Expiry	

General Infor	mation of the Accid	ent			
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/10/2019 13:0	Type of Location: Car Park	
Location: Along Road 1 MOULMEIN F 27 Moulmein		rk			
Weather:			18	Road Speed Limit:	
Clear		Dry			
Traffic Flow:	56.0	Traffic Control:		Traffic Volume:	
Type of Collis Between Mov	ion: ing Vehicles - Head ⁻	Γο Rear		Anyone conveyed by ambulance:	

Details of V	ehicle Invo	lved	A Company of the last			
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGR2228U	Car					0
SLU9630U	Car	KIA	CERATO K3 1.6A SUNROOF	White	Slightly Damaged	0

Details of V	ehicle Insurance	Property of		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLU9630U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1700089260	19/12/2017	18/12/2019





2 of 3

Report No. T/20191016/2222

Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999

CONTINUATION OF REPORT

Details of Perso	n Involved				ACTION A	
Any Pedestrian I	nvolved: No	I ICIVALI PROVINCE	400	manana mazz		
No. of Pedestriar	ns Injured: NIL		Use of Pe	edestriar	Cross	sing: NA
Driver	The same of the same	PARTY NAMED IN		WHEEL .	STATE	
Name	VALERIE LAUREN LEE		ID No		S7728706Z	
Related Vehicle	SLU9630U (Car)			Conta	ct No.	97638887
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3A Date of Expiry: NIL
Date Treatment	NIL Date D			charge	NIL	
No. of Days gran	ted Medical Leave	Degree o	egree of Injury NIL			

Brief Details.

On the 16/10/2019 at about 1250hrs, I had parked my vehicle at the said location head in and did my work. I went back to my vehicle at 1335hrs and didn't check on my vehicle then. I continued to do my daily activities till the end of the day. At about 2130hrs, upon reaching home, I wanted to take some items from the boot and that was when I discovered the damages. My car suffered scratches, dent to the right rear bumper. The rear bumper was also detached and misalign. Reverse sensor was also affected by the hit. I immediately took out my in car CCTV SD card and look at the footage.

I found out that at about 13:00:59sec, there was a Toyota Camry silver colour had hit onto the right rear of my vehicle. I could only make out the following vehicle numbers. Its either SGR2228U or SQR2228U. The driver appears to be a male Chinese driver. No note was left behind on my car. I have already downloaded the video for the investigation officer.





3 of 3

Report No. T/20191016/2222

Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999

CONTINUATION OF REPORT

Sketch Plan

NP168

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 / Sr Staff Sgt DZULHILMI BIN OMAR	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/10/2019 23:23
Officer In Charge Of Case: TP / HRT /	Classification Of Case:
Sr Staff Sgt TAN JEOK LENG Contact No.: 65476144	
Authentication Stamp	1



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Valerie Lauren Lee(Li Wenxin)

Period of Insurance Engine No.

: 19 Dec 2017 To 18 Dec 2019

: G4FGHH688280 Chassis No. : KNAFZ411MJ5756173 Vehicle No.

: 1700089260

Policy No. Endorsement No.

: 000000000169251

Issued Date

: 27 Dec 2017

ABOUT THE COVER

Make/Model

: KIA Cerato K3 1.6 SX

Engine Capacity/Tonnage : 1,591.00 CC Driver Restriction

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*:

: NA

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

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 - 1600cc

* Limitations rendered inoperative by Section 8 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

Windscreen: \$100

Named Driver and Excess (where applicable)

Valerie Lauren Lee(Li Wenxin) - \$600 (Own Damage)

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

Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 509339 55884501
 Cycle & Carriage Customer Service Centre (For Windscreen claim only). Add: 241 Alexandra Road Singapore 159931 54278800

Cycle & Carriage Customer Service Centre (For windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

For other 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.ag or AIG SG Mobile App. Simply search and download 'AIG SG' from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

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 the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0504624206

Co.

FULCOKICP2 - KT

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

SSCHEZ