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 <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	16/10/2019 11:37	
Date Of Accident	15/10/2019 10:35	
Exact Location Of Accident	WOODLANDS CROSSING TOWARD CHECKPOINT	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLH2523K	
Insured/Policyholder		
Name Of Registered Owner	LIW SEAN IAN SAXON (LIU XIANYUAN SAXON)	
NRIC No	S7335921Z	
Email Address	LSISAXON@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-96770849	
Alternative Phone No	OTHERS-97230223	
Vehicle Particulars		
Manufacturer	NISSAN	
Model	NOTE-1.2 DIG-S CVT (A)	
Exact Purpose for which vehicle was being used a time of accident	t 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	2100488247-03	
Cover Note Number		

Name of Driver LIW SEAN IAN SAXON (LIU XIANYUAN SAXON)

 NRIC No
 \$7335921Z

 Date Of Birth
 03/10/1973

 Occupation
 INDOOR

 Date Of Driving Pass
 06/11/2007

Driving Experience 11 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96770849

Fax Number

Contact Number OTHERS-97230223

EMail Address LSISAXON@GMAIL.COM

Address BLK 423 PASIR RIS DRIVE 6, #10-127

Postcode 510423 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?

Was any injured conveyed to hospital by

Number of Passengers (Including Driver)

ambulance?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NO 5

NAME: : LIW TEN KEN

GENDER: : MALE

Passenger 2 NAME: : NG LAY LENG RAINNE

GENDER: : FEMALE

Passenger 3 NAME: : LIW EE SHWEN IGNATIUS

GENDER: : MALE

Passenger 4 NAME: : SIM CHOON MUI

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

Refer attachment.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJU5416Y

Vehicle Make/Model/Colour KIA CEERATO FORTE/SILVER
Details Of Properties FRONT BUMPER LH CORNER

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 Pg. 1

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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.
- 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) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

arc

Date & Time: 16 oct 2019

12:02 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

RGAD 1 ORE 103623

Name: Ho

>XXXX 434R

UTION INDUSTRIAL PTE LIL

FAX: 6346 748

Sketch Plan #2 Pg. 1

SKETCH PLAN		
A A	11	L & Woodlands Road
2 DD ->>PD	y Woodlands Evossing	> tanual Woodland's Checkpoin
Flyover to c	16 Woodlande	7-
-		E ,
A - SLH B - STU	1	Woodlands Center Road.
I was deliting	Ma valida A SCH2	523k on lane 2 towards
Woodlands CIQ.	When vehicles in f	Port of me moved forward,
I drove forward	. also . while movin	g forward, vehicle 'B'SJUS416Y
made a sudden	lave change to	lane I and collided into
the RH side .	of my vehicle 'A'.	
)
,		
	/	
		AUTOLUTION INDUSTRIAL PTE LIL
		19 UBI ROAD 4 SINGAPORE 408623
DECLARATION		TEL: 6490 9666 FAX: 6846 7480
I/We declare the foregoing particula	ars are true in every respect.	
61.		
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time: 160ct 2019 12102 pm	(If driver is not the policyholder) Date & Time:	Name: Harrisch Sand NRIC/FIN No.: SXXXX434B
GIARMC Sketch®lanForm V3		11/1/14/54/5



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Liw Sean lan, Saxon (Liu Xianyuan, Saxon) Vehicle No. : SLH2523K : 27 Oct 2019 To 26 Oct 2020 Period of Insurance Policy No. : 2100488247-03

Engine No. : HR12213466B Endorsement No.

Chassis No. : JN1TBAE12Z0982830 Issued Date : 31 Aug 2019

ABOUT THE COVER

: NISSAN NOTE 1.2 (SUPERCHARGED/NON-SUPERCHARGED) Make/Model

Engine Capacity/Tonnage: 1,198.00 CC Sum Insured : Market Value First Year of Registration : 2016 Driver Restriction Off Peak Car : Yes Insuring with COE/PARF : Yes : 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 anti/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 - 1600cc

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

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Liw Sean Ian, Saxon (Liu Xianyuan, Saxon) - \$600 (Own Damage)

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

1.TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212
2.AutoLution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
3.TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
4.Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5.Tan Chong Motor Sales Add: 17 Lorong 6 Toa Payoh Singapore 539254 63570753 63570754

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.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: United Overseas Bank Limited

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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

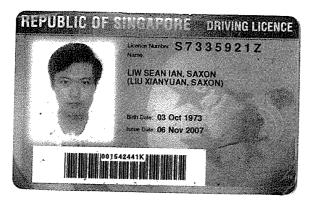
0500610483

TAN CHONG CREDIT PTE LTD - NYM 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 ANSP-MOTOR Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

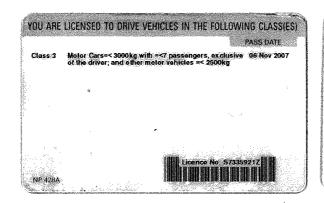
AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

78 Shenton Way #07-16 ATG Building \$079120 | T +65 6419 3000 | www.aig.sg

Driving License Pg. 1









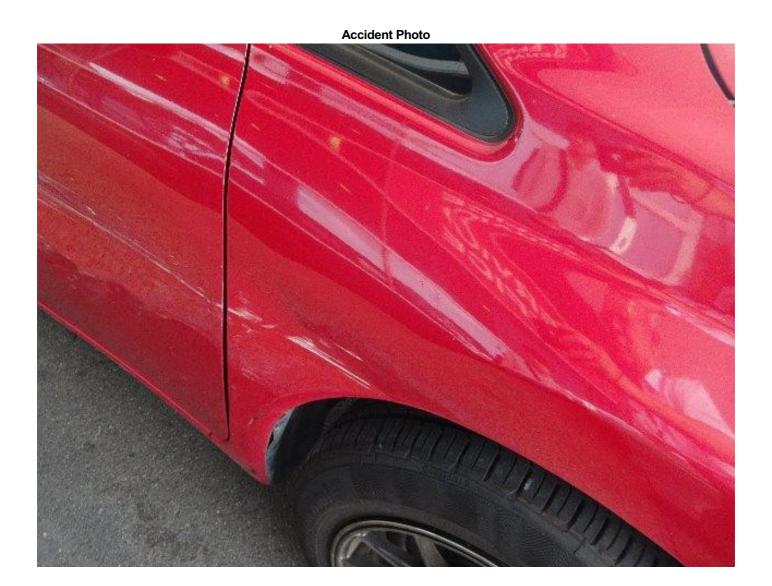
Accident Photo



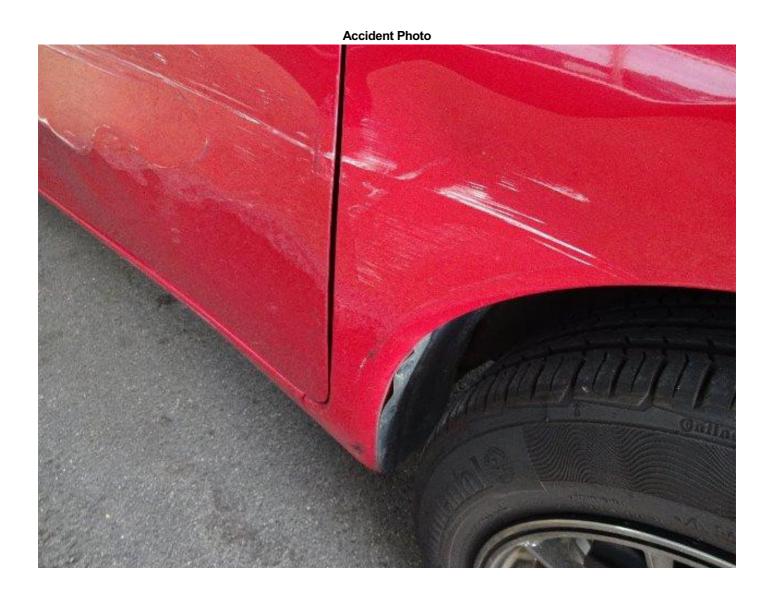
Accident Photo

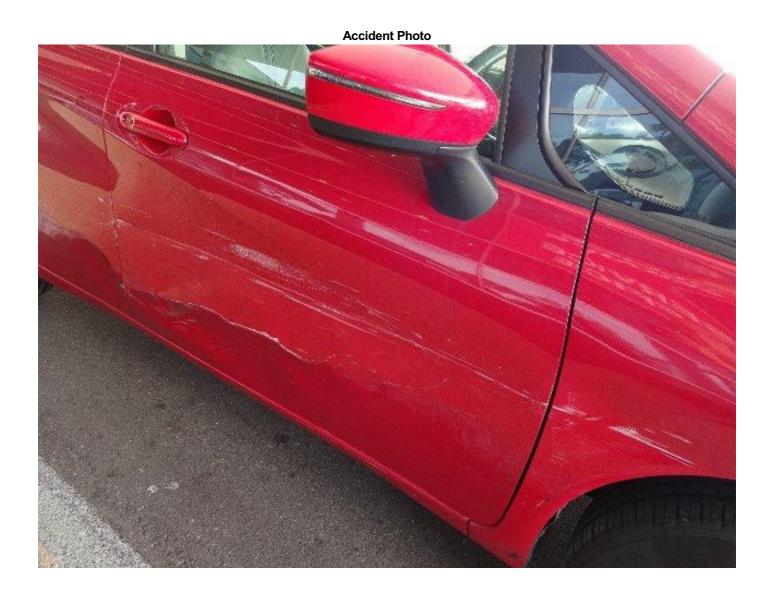






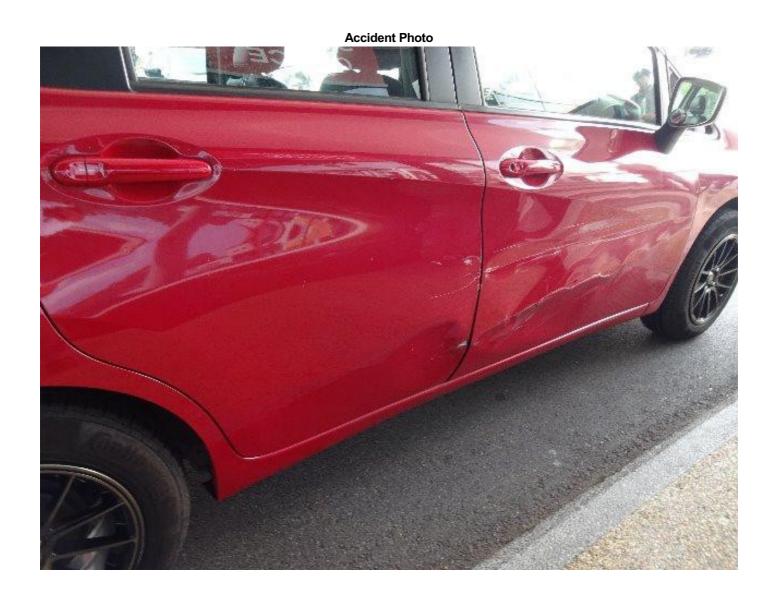


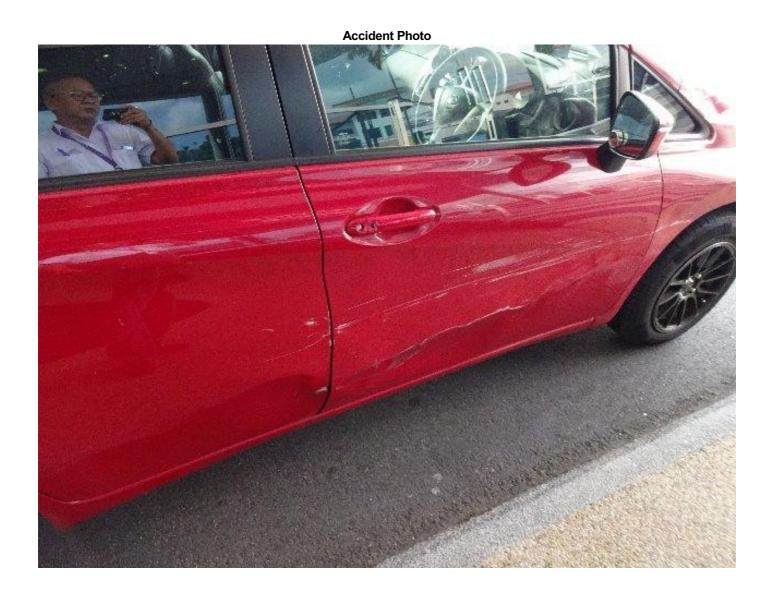












Identification Card





