

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	28/11/2019 09:37
Date Of Accident	20/10/2019 16:30
Exact Location Of Accident	ALONG JURONG EAST CENTRAL > BOON LAY WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU1727P
Insured/Policyholder	
Name Of Registered Owner	STANLEY TEO SZE-HAU
NRIC No	S7401948Z
Email Address	STANLEY.TEOSH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98220663
Alternative Phone No	Office-98220663

Vehicle Particulars

Manufacturer	KIA
Model	SORENTO 2.4L EX AT ABS D/AB 2WD 5DR
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	1800126331
Cover Note Number	

Driver

Name of Driver	STANLEY TEO SZE-HAU
NRIC No	S7401948Z
Date Of Birth	01/02/1974
Occupation	INDOOR
Date Of Driving Pass	28/09/2000
Driving Experience	19 YEARS AND 0 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98220663
Fax Number	
Contact Number	OFFICE-98220663
E-Mail Address	STANLEY.TEOSH@GMAIL.COM
Address	35 BUKIT BATOK EAST AVE 6 #02-11
Postcode	659765
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	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?	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: : FUNG WEN LI 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 TO SKETCH PLAN

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	SLLP1703Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANG CHI SIANG

NRIC/Passport Number	S7407274G
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:

20/11/18

Driver's Signature

(If driver is not the policyholder)

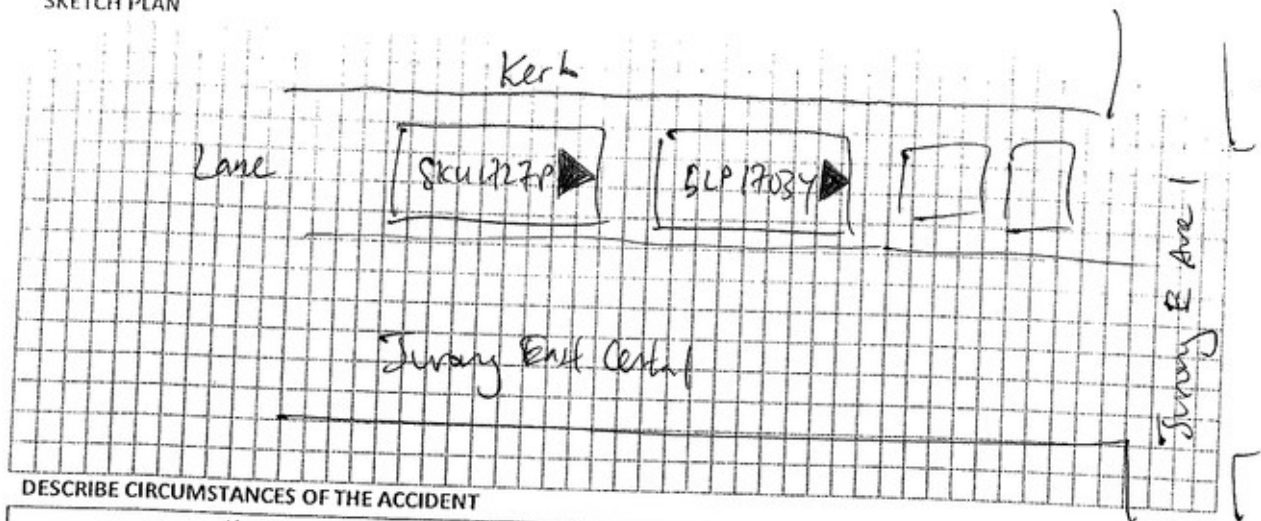
Date & Time:

Reporting Centre Personnel's Signature

Name: Rakeswaran Anand.

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Travelling along Juvang East Central towards Boon Lay Way

Stop in traffic likely due to traffic light.

When front car move off, I also begin to move.

Front car stop suddenly, I also stop.

Front car driver dismantled and said I had collided with front car.

No collision sound was heard, no impact was felt.

No observable damage to own car.

Front car rear bumper observed black marks.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- | | |
|-------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> | - Reporting Only |
| <input type="checkbox"/> | - Claim OD |
| <input type="checkbox"/> | - Claim TP |
| <input type="checkbox"/> | - Claim OD/ TP at other workshop |

DECLARATION

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

Policyholder's signature
Date & Time

2009/11/28

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

Reporting Centre Personnel's Signature
Name: Palesoman Anand
Nric/Fin No.

Identification Card & DL of Owner

IDENTITY CARD NO S7401948Z



STANLEY TEO SZE-HAU
(STANLEY ZHANG SHIHAI)

張世豪

Race
CHINESE

Date of birth
01-02-1974

Country/Place of birth
SINGAPORE

Sex
M



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7401948Z**
Name:
STANLEY TEO SZE-HAU
(STANLEY ZHANG SHIHAI)

Birth Date: 01 Feb 1974
Issue Date: 07 Feb 2004

001111732G

9443079



NRIC No. S7401948Z



Nationality
CANADIAN
Date of issue
03-04-2017

Address
5 BROOKVALE DRIVE
#04-22
SINGAPORE 599970

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

28 Sep 2000

NP 428A



Licence No: S7401948Z

CERTIFICATE OF INSURANCE



CERTIFICATE OF INSURANCE

IMPORTANT
What can the

AUTOVALUE PRIVATE VEHICLE

Name of Policyholder : STANLEY TEO SZE-HAU (STANLEY ZHANG SHIHAI)
 Period of Insurance : 24 Oct 2018 To 23 Oct 2019
 Engine No. : G4KEAH711522
 Chassis No. : KNAKU811MA5065507
 Vehicle No. : SKU1727P
 Policy No. : 1800126331
 Endorsement No. :
 Issued Date : 24 Oct 2018

ABOUT THE COVER

Make/Model : KIA SORENTO 2.4
 Engine Capacity/Tonnage : 2,359.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2010
 Insuring with COE/PAF : 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.

* 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)

STANLEY TEO SZE-HAU (STANLEY ZHANG SHIHAI)

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers.
 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: NA

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, 1959 (Malaysia).

0504615000

COSMO INSURANCE AGENCY PTE LTD
 210 TURF CLUB ROAD LOT A16, THE GRANDSTAND
 SINGAPORE 267995

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

COSMO Insurance Agency Pte Ltd

Accident Photo



Accident Photo



Accident Photo



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