

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	17/10/2019 10:12
Date Of Accident	15/10/2019 13:40
Exact Location Of Accident	ALONG WOODLANDS CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG2874R
Insured/Policyholder	
Name Of Registered Owner	YANG YANQIU
NRIC No	S7383026E
Email Address	MICHELLEYANG73@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-83030593
Alternative Phone No	Others-83030593

Vehicle Particulars

Manufacturer	NISSAN
Model	X-TRAIL
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800150135
Cover Note Number	

Driver

Name of Driver	YANG YANQIU
NRIC No	S7383026E
Date Of Birth	03/12/1973
Occupation	INDOOR
Date Of Driving Pass	09/12/2008
Driving Experience	10 YEARS AND 10 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-83030593
Fax Number	
Contact Number	OTHERS-83030593
E-Mail Address	MICHELLEYANG73@HOTMAIL.COM
Address	BLK 702 WOODLANDS DRIVE 40 #10-100
Postcode	730702
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 - CHANGE/CROSS LANE
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?	
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	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/20191015/2191.

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	SFJ9688H
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

SKETCH PLAN

IMPORTANT NOTICE


1. Please report **correctly** the details of the accident to speed up the claims process.
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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) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time: 17 OCT 2019

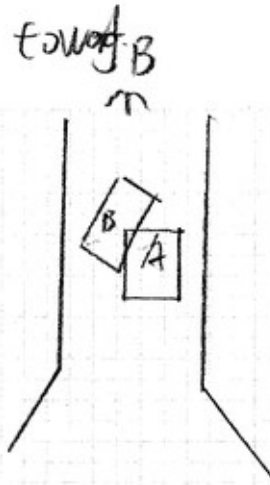
CO-1 Jan

 17.10.19
Driver's Signature
(If driver is not the policyholder)
Date & Time: 17 OCT 2019

CO-1 Jan


Reporting Centre Personnel's Signature
Name: Poh Kwee Choo
NRIC/FIN No.:

SKETCH PLAN



A (SMG 2874R)
B (SFJ 9688H)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/10/2019 at about 1345hrs I was driving my car (SMG 2874R) along right lane of woodlands checkpoint while driving another car (SFJ 9688H) overtook me while overtaking the side of his car hit the front of my car

After the accident we exchanged particulars and drove off. There is an in-car camera at the front of my car but did not capture the accident.


Refer to Police report: 20191015/2191.


Originally just a small matter, but SFJ 9688H was at 9:11PM on October 16th. say make Insurance report. So I he later make report. (17/10/2019: 12:17AM)

DECLARATION

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


Policyholder's Signature
Date & Time: 17 OCT 2019

 17. 10. 19
Driver's Signature
(If driver is not the policyholder)
Date & Time: 17 OCT 2019


Reporting Centre Personnel's Signature
Name: Poh Kwen Choo
NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191015/2191

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

1 of 3

Report No. T/20191015/2191

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/10/2019 21:42	Vide Report No.:	Station Diary No.: 188
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Informant's Particulars

Name of Informant: YANG YANQIU			Address: APT BLK 702 WOODLANDS DRIVE 40 #10-100 SINGAPORE 730702		
ID Type / ID No.: NRIC NO / S7383026E			Contact No.: Home/Office: Mobile: 83030593		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 45	Date of Birth: 03/12/1973	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: UNEMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 15/10/2019 13:40	Type of Location: Straight Road
Location: Along Road 1 Woodlands Crossing				
Woodlands Checkpoint				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFJ9688H	Car				No Damage	0
SMG2874R	Car	NISSAN	X-TRAIL 2.0 CVT	Brown	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMG2874R	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800150135	13/12/2018	12/12/2019



**SINGAPORE
POLICE FORCE**



T/20191015/2191

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

2 of 3

Report No. T/20191015/2191

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Jiang Chuan Hwang	ID No.	S1586424I
Related Vehicle	SFJ9688H (Car)	Contact No.	96388132
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	YANG YANQIU	ID No.	S7383026E
Related Vehicle	SMG2874R (Car)	Contact No.	83030593
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 15/10/2019 at about 1340hrs, I was driving my car (SMG2874R) along the right lane of Woodlands Checkpoint.

While driving, another car (SFJ9688H) overtook me. While overtaking, the side of his car hit the front of my car.

After the accident, we exchanged particulars and drove off.

There is an in-car camera at the front of my car, but did not capture the accident.



**SINGAPORE
POLICE FORCE**



T/20191015/2191

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

3 of 3



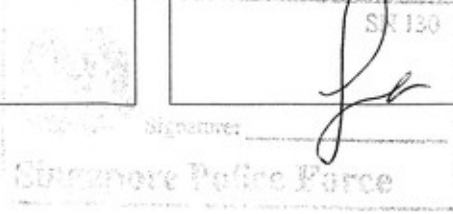
Report No. T/20191015/2191

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: L / Sgt 2 SER WEN LIANG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 15/10/2019 21:42
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:  SR 130
Authentication Stamp NP168	

CERTIFICATE OF INSURANCE



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Yang YanQiu
Period of Insurance : 13 Dec 2018 To 12 Dec 2019
Engine No. : MR20319019C
Chassis No. : JN1JANT32Z0011244

Vehicle No. : SMG2874R
Policy No. : 1800150135
Endorsement No. :
Issued Date : 04 Jan 2019

ABOUT THE COVER

Make/Model : NISSAN X-TRAIL
Engine Capacity/Tonnage : 1,997.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PAF : Yes

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 - 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)

Yang YanQiu - \$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. Autoklub 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 8 Toa Payoh Singapore 319254 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: DBS BANK LTD

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).

0500610392

TAN CHONG CREDIT PTE LTD-TBK
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

SSCNFY

Accident Photo



Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MLHM19137602 Vehicle Registration No: SMG2874R
Name(as shown in NRIC) : YANG YANQIU NRIC/FIN/Passport No : S738026E
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 702 Woodlands Drive 40 #10-100 Singapore(730702)
Contact (Tel) : _____ Mobile No. : 83030593
Email Address : michellyang73@hotmail.com
Date of Accident : 15/10/2019 Time of Accident : 13:40 Hours
Place of Accident : along Woodlands Checkpoint
Insurance Company: AIG ASIA PACIFIC INSURANCE PTE. LTD.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To amend the insurance company.

YANG YANQIU

Policyholder / Driver's Signature
Date: 01/11/2019



Reporting Centre Personnel's Signature
Name: Poh Kwee Choo
NRIC/FIN No.: _____
Date: 01/11/2019