SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

- 1. 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.
- 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.
- 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 conse	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	14/01/2019 17:16
Date Of Accident	11/01/2019 18:40
Exact Location Of Accident	BOON TAT STREET
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLX7821H
Insured/Policyholder	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-96379107
Vehicle Particulars	
Manufacturer	INFINITI
Model	Q30
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	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	999994322
Cover Note Number	
Driver	
Name of Driver	YU WENJUN
NRIC No	S8611741Z
Date Of Birth	22/04/1986
Occupation	OUTDOOR .
Date Of Driving Pass	09/01/2006

13 YEARS AND 0 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-96379107

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 143 JALAN BUKIT MERAH #05-1136

Postcode 160143

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

2

NO

NO

NO

1

YES

NO

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

Was any body injured in the Accident?

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.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] **BUKIT MERAH EAST NPC**

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN / POLICE REPORT NO: T/20190112/2004

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMD8001U

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

IFMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Infermation 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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;
 - (lii) 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:
 - 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.

NOTING OF

Policyholder's Signature

Date & Time: (1-01-2-19

BIS MOTORING PEE UTD

Driver's Signature

(If driver is not the policyholder)

Date & Time: 11-01-2019

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jenny Lim S6927273H

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We declare the fo	2	Driver's Signature	e		Reporting Centre Perso	nnei's Signature Jenny Lim S6927273H





Police Station Of Origin: Bukit Merah East N.P.C

A 391 New Bridge Road Police Cantonment Complex SINGAPORE 088762

Tel No: 1800-2369999

REPORT OF A TRAFFIC ACCIDENT

		12/20		

1 of 3 Report No. T/20190112/2004

	Oate/Time Report Made: 12/01/2019 00:40		Vide Report No.:	Station Diary No.: 9		
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	Informant:		Address: APT BLK 143 JALAN BUKIT MERAH #05-1136 SINGAPORE 160143			
IDType / ID No.: NRIC NO / S8611741Z			Contact No.: Home/Office:	Mobile: 96379107		
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Age: Date of Birth: Male 32 22/04/1986			Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: G0 JACK DRIVER			Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 11/01/2019 18:4	Type of Location: Straight Road
	TREET		MOST LANE BEFOR	E THE TRAFFIC LIGHT.
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
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Details of W	ehiele Invo	lxxx		dia kata	(F) (F) (F) (F) (F)	通 设装分 () 公司
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLX7821H	Car	INFINITI	Q30 1.5D DCT EU6	Black	Slightly Damaged	1
SMD8001U	Car	VOLVO	V40 T2 (A)	White	Slightly Damaged	0





Poice Station Of Origin:
Buit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762

Report No. T/20190112/2004

2 of 3

TelNo: 1800-2369999

CONTINUATION OF REPORT

Brief Details.

On11th January 2018 at about 6.42pm, I was approaching a Traffic Light on the right-most lane (Lane 1) lo cated on Boon Tat Street that was indicating Red. I passed 2 cars which has stopped on the center lane (Lane 2) at a very slow speed when the Traffic Light turned green. Just before I started to accelerate off, I heard a scratching sound on the rear-left side of my car (SLX7821H). I continued forward before stopping my car and turning on the Hazard Light. This was when I noticed that a white car (SMD8001U) passed me on my left and stopped diagonally in front of me before the driver looked at me for about 30 seconds before it moved off. I noticed that there were scratches on the front-right side of the car. The said driver did not alight from his car to exchange particulars with me. I managed to record down the Vehicle Registration Number of the said car onto my mobile phone before the said car moved off.





Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

3 of 3 Report No. T/20190112/2004

CONTINUATION OF REPORT

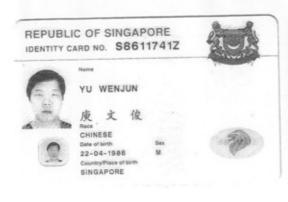
Sketch Plan

Imformant 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.

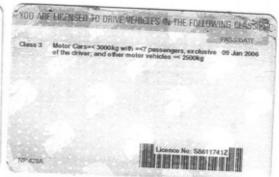
Signature Of Officer Recording The Report: A / Staff Sgt MUHAMMAD TAUFIQ BIN SUHAIMI	Signature Of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	12/01/2019 00:40
Officer In Charge Of Case:	Classification Of Case:
TP/HRT/	
SI ABDUL KAREEM BIN ABDUL HAGUE	
Contact No.: 65476079	
Authentication Stamp	

SLX 7821H (DOA = 11-01-2019)











CERTIFICATE OF INSURANCE

IMOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

PMOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

PROAD TRANSPORT ACT, 1987 (MALAYSIA)

IMOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

(The below excess is subject to GST)

COMPREHENSIVE

COMMERCIAL MOTOR

POLICY EXCESS

S\$1500.00 (Sect I & Sect II)

CERTIFICATE NO.

SLX7821H

WINDSCREEN EXCESS

\$\$100.00

POLICY NO.

999994322

SUM INSURED

Market Value

1) VEHICLE REGISTRATION NO.

INSURING WITH COE/PARF YES SLX7821H

BIS MOTORING PTE LTD

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

26 December 2018 25 December 2019

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's A uthorised driver must be between age 23 to 65 with at least 2 years driving experience

Accident repair can be carried out at Munich Auto Care in the condition that all repairs have to be surveyed, appointed by AIG surveyors before proceeding with repair

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
 Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for fulfion, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

UNITED OVERSEAS BANK LIMITED

"Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 19 Dec 2018

500656-000 Cowell Insurance (Agency) Pte. Ltd. 8 Burn Road #09-09 Trivex Singapore 369977

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL









