

## 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	02/11/2019 10:58
Date Of Accident	01/11/2019 18:45
Exact Location Of Accident	SOUTH BRIDGE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM289K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIM SOOK CHERN
NRIC No	S1465449F
Email Address	JADON.WONGERNIE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91474483
Alternative Phone No	Others-98502063

### Vehicle Particulars

Manufacturer	AUDI
Model	A1 SPORTBACK
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?	YES
If No, Please state action to be taken	
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	1900107166
Cover Note Number	

### Driver

Name of Driver	WONG EN YI, JADON
NRIC No	S9347226H
Date Of Birth	10/12/1993
Occupation	INDOOR
Date Of Driving Pass	05/12/2012
Driving Experience	6 YEARS AND 10 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98502063
Fax Number	
Contact Number	
E-Mail Address	JADON.WONGERNIE@GMAIL.COM
Address	7 PANDAN VALLEY #03-504
Postcode	597631
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	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: : REENA TAY 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

KINDLY 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	EQ1415G
Vehicle Make/Model/Colour	HONDA VEZEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN CHEE LENG

NRIC/Passport Number

Contact Number

96174559

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Sketch Plan

## SKETCH PLAN

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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.

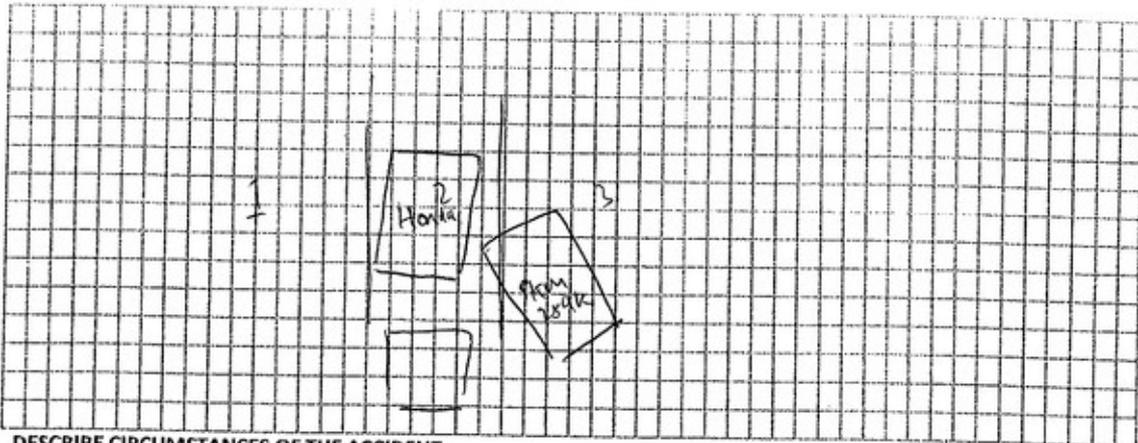
Policyholder's Signature  
Date & Time:

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

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/PIN No.:

02/11/19

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Changing lane from 3rd to 2nd lane saw a car from the 2nd Lane behind, judged to have enough space. I shifted in, 3rd party looked like he was also changing lanes from 1st lane to 2nd lane. but looked like ~~had~~ he was coming from my blindspot.

<p><b>Important:</b> 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.</p>	<input type="checkbox"/>	- Reporting Only
	<input checked="" 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

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

*[Signature]*  
.....  
Reporting Centre Personnel's Signature  
Name:  
Nric/Fin No.

SKM 289 K.



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : LIM SOOK CHERN  
 Period of Insurance : 07 Jun 2019 To 11 Sep 2020  
 Engine No. : CHZ111160  
 Chassis No. : WAUZZZ8X3HB002597

Vehicle No. : SKM289K  
 Policy No. : 1900107166  
 Endorsement No. :  
 Issued Date : 11 Jun 2019

### ABOUT THE COVER

Make/Model : AUDI A1 SPORTBACK 1.0 TFSI S TRONIC  
 Engine Capacity/Tonnage : 999.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\*  
 at the Policyholder  
 of Any other person who is driving on the Policyholder's motor or with his/her permission  
 This Policy will indemnify the Policyholder or any authorized driver or any other person who meets the specified age condition  
 You have to pay an additional sum of \$1,000 as "Young Driver Surcharge" (YDS) if You are or Your Authorized Driver (named or unnamed) is under the age of 25 and has less than 2 years driving experience  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2017  
 Insuring with COE/PART : Yes  
 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 Trials  
 Loss of Use 1500cc - 1600cc Optional  
 \* Limitations underact applicable by Section 6 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 199) 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) - \$5 (Flood Cover) - \$0  
 Section 2  
 Property Damage - \$0  
 Windscreen : \$100

### Named Driver and Excess (where applicable)

LIM SOOK CHERN - \$600 (Own Damage) WONG KEE MENG - \$600 (Own Damage), CHARIS WONG JEN LING - \$600 (Own Damage), WONG FAY YI JADON - \$600 (Own Damage)

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

Approved Reporting Centres and Authorized Repairers (for claims related repairs)  
 Any accident repairs to the vehicle must be carried out by one of our Authorized Repairers. Within the first 3 years of the first registration of the vehicle, repairer - You have the option of having the accident repairs carried out at the State Agents workshop.  
 For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 0199. Alternatively, You may refer to AIG website with options eg. at AIG SIA Mobile app. Search search and download AIG SIA from itunes or google play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

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. 199), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503811000

ALFA AUTOMOTIVE  
 1 COMMONWEALTH LANE #01-24 ONE COMMONWEALTH  
 SINGAPORE 149544

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*J. Tanik*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

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I (Owner Name) Lim Sook Chern, IC S1465449F Owner of this car no. SKM289K authorize Wong En Yi  
Jadon S9347226H to file accident report which happened on (Accident Date) 01/11/2019 at  
(Location) South Bridge Road.

Owner's Name: Lim Sook Chern

Signature:



Date: 02/11/2019

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Driving License

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S9347226H**

Name: **WONG EN YI, JADON**

Birth Date: **10 Dec 1993**

Issue Date: **05 Dec 2012**

002129853J



**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO **S9347226H**



Name: **WONG EN YI, JADON**

**黄恩义**

Race: **CHINESE**

Date of birth: **10-12-1993** Sex: **M**

Country of birth: **SINGAPORE**

FOR ACCIDENT CLAIM USE ONLY

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES**

Class	Description	EFFECTIVE DATE
Class 2B	MOTORCYCLES NOT EXCEEDING 100 CC	01 Mar 2014
Class 2A	MOTORCYCLES BETWEEN 250 CC AND 400 CC	12 Jun 2015
Class 2	MOTORCYCLES EXCEEDING 400 CC	15 Jul 2016
Class 3	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2000 KILOGRAMS	05 Dec 2012

S / No. 9000262601

9347226H

Licence No: S9347226H



NP 428A

4580291



NRIC No: **S9347226H**



Date of issue: **10-05-2010**

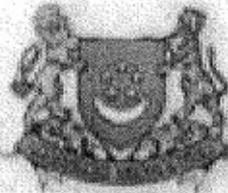
**7 PANDAN VALLEY #03-504**  
**SINGAPORE 597631**

NRIC No: **S9347226H** Date: **05/08/2019**

SINGAPORE 590730

FOR ACCIDENT CLAIM USE ONLY

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1465449F



Name

LIM SOOK CHERN

FOR ACCIDENT CLAIM  
USE ONLY

Race

CHINESE

Date of birth

13-07-1961

Sex

F

Country of Birth

SINGAPORE



1731114



NRIC No. S1465449F



Blood Group

A+

Date of issue

28-02-1994

7 PANDAN VALLEY #03-504  
SINGAPORE 597631

NRIC No: S1465449F

Date: 02/08/2019

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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