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TP Particulars: Veh Nor	SGR 71644	. NC( . )/N	ion-INC().		
Owner / Driver: (		Tel:	.,		
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1) Apply for Transport Allowance (	)/Courtesy Car( )			•	
2) QC Check/Post Repair Inspection	( · )	<del></del>	<u> </u>		
3) Upload Resurvey Photo [Repair Co.	st>\$3000] ( )				
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		Involve dated	Yes Charge		

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## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- 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.

- 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	14/11/2019 15:59
Date Of Accident	13/11/2019 15:20
Exact Location Of Accident	JUNCTION OF JLN JURONG KECHIL AND JLN ANAK BUKIT
Country/State of Loss	SINGAPORE
ALC: UKL STEEL OF STEEL OF D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL7623A
Insured/Policyholder	
Name Of Registered Owner	THARUMAN PRISCILLA ALICE YELAMMA
NRIC No.	S0216020Z
Email Address	XALICE@SJSM.ORG.SG
Mobile Phone No	(LOCAL) +65-98805817
Alternative Phone No	OTHERS-98805817
Vehicle Particulars	
Manufacturer	HONDA
Model	JAZZ
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100176260-09
Cover Note Number	
Driver	
Name of Driver	THARUMAN PRISCILLA ALICE YELAMMA

Name of Driver THARUMAN PRISCILLA ALICE YELAN

S0216020Z NRIC No Date Of Birth 04/10/1954 Occupation INDOOR 12/07/1977 Date Of Driving Pass

42 YEARS AND 4 MONTHS Driving Experience

FEMALE Gender

(LOCAL) +65-98805817 Mobile Number

Fax Number

OTHERS-98805817 Contact Number

EMail Address XALICE@SJSM.ORG.SG Address BLK 305 CLEMENTI AVENUE 4

#04-393

2

NO

্র

NO

NO

Postcode 120305

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

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.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes.Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

True many any mass supransor, our commen

Was there any audio recorded?

SGP7164Y

PRIVATE CAR

DETAILS OF OTHER VEHICLE PROPERTY 1

YES

NO

NO

Vehicle Registration Number Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver WONG KIM LAN

NRIC/Passport Number S6803419A Contact Number 98353119

Address BLK 10 TOH YI DRIVE

#06-333

Postcode 590

Insurance Company Name DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

# IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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.
- 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:
  - 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/FIN No.: //

In Anak Bukit		
->	A:	5JL7623A
S Kali	В:	SGP 7164X

# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

THE ACCIDENT
My Car has stopped at the traffic junction of Jalan Jurong Kechil and Jalan Anak Bukit, While my car was still stationary, I suddenly felt a strong impact in the rear of my car. Vehicle B (5GP 71644) hit into the rear of my car. car, the driver, Ms wang was apologetic or we exchange details.
ECLARATION Ve declare the foregoing mostly to the second s

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signatu

NRIC/FIN No.:

Date of Accident •	Time of Accident	Country / Exact Location of Accident
3 11 19	1520 hrs	Traffic junction of Iln Juring Erichil & Iln Anak Built

DETAIL	S OF OWN VEHICLE
Vehicle Registration	No: SJL 7623A
Name of Owner:	Thavuman Priscola Alice Yela
Owner IC:	S0316020 Z
Vehicle Model & Typ (Audi/Toyota etc)	e Honda Jazz
Exact purpose of vet	n. Private Commercial
Are you claiming you own insurance?	Own Damage (Third Party Reporting Only
Insurance Company	A16
Type of Policy	Comprehensive / Commercial / Third Party
*Policy Number	2100176260
*Contact Nbr	98805817
*Alternative contact nbr	As Above
	DRIVER
Name of Driver	As Above
Driver IC	As Above
Date of Birth	4/10/1954
Occupation	(Indoor ) outdoor
*Yrs of Driving Experience	12/1977 - 42 y 5
Gender	<b>t</b>
Contact No	As Above
Address	BK 305 Clementi AVE 4 #04-30
Email Address X	alice sism. org. sq
Employee of Insured's Company?	No No
If no, state relationship of Driver with Insured.	seif (owner)
Driver's own vehicle no. & Insurance company	_
DETAILS OF INJ	URED PERSONS 1
Name	THE WASTA TO MANUAL
Address	
Injuries Sustained	L7 K
If vehicle occupants, state in which vehicle?	

GENERAL INFORMA	TION OF THE ACCIDENT
Type of Collision (eg. Chain collision, head- on collision, side swipe, front rear)	
Weather Conditions	Clear / Raining / Others (pl. state)
Road Surface	Wet Dry Others
Video Footage	Yes / No
Offer by other workshop	Yes / No
*No. of passengers incl driver / Gender	pax
OTHER INF	ORMATION
Was anybody injured in the accident? *	Yes (No
Was any other vehicle or property damaged? (including Witness)	Yes
DETAILS OF PO	OLICE ACTION
Accident reported to the Police?	Yes (No
if yes, state which police station	NA
Notice of Intended	

DETAILS OF OTHE	R VEHICLE / PROPERTY 1
Vehicle Reg. No.	SGP 71649 (1)
Vehicle Make / Model / Colour / Properties	1947
Name of Driver	Wong Kim Lan
IC / FIN / Passport Nbr	S 6803419 A
Contact Nbr	98353119
Address	BIK10, #06-333 Toh Yi Dave
Insurance Company	Direct Asia
*No. of passengers incl driver / Gender	lyax
DETAILS	OF WITNESS
Name	NA
Gender	NA
Were seatbelts worn?	Yes (No)
Conveyed to hospital by ambulance?	NA:



# CERTIFICATE OF INSURANCE

# AUTOPLUS PRIVATE VEHICLE

Name of Policyholder

: Tharuman Priscilla Alice Yelamma

Period of Insurance

: 11 Dec 2018 To 10 Dec 2019

Engine No. Chassis No. : 113711009061 : JHMGE68509S209010 Vehicle No.

: SJL7623A

Policy No.

: 2100176260-09

Endorsement No. **Issued Date** 

: 000000000247152 : 20 Dec 2018

### ABOUT THE COVER

Make/Model

: HONDA JAZZ 1.4 [Sedan]

Engine Capacity/Tonnage : 1,339.00 CC

Sum Insured : Market Value

First Year of Registration : 2008

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : 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 higher 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 inexpenenced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than

Age Condition

: All Age Condition

Limitation as to use\*

Liss 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 tast, 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 Optional

\* 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)

Tharuman Priscilla Alice Yelamma - \$600 (Own Damage)

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

Approved Reporting Centres/ A/G Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

For other Approvad Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 fi200. Alternatively, Visu may refer to AIG website www.ing.com.sg or AIG SG Mobile App. Semply search and download "AIG SG" from ITunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

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, 1969 (Malaysia).

0204007000

CHOO LEE LENG

371 ALEXANDRA ROAD #09-01 AIA ALEXANDRA

SINGAPORE 159963 SP-ALPS

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. **AUTHORISED REPRESENTATIVE**