

## 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             | 20/11/2019 17:54 |
| Date Of Accident           | 20/11/2019 15:25 |
| Exact Location Of Accident | SLF BUILDING     |
| Country/State of Loss      | SINGAPORE        |

### DETAILS OF OWN VEHICLE

|                             |          |
|-----------------------------|----------|
| Vehicle Registration Number | SLR4755S |
|-----------------------------|----------|

### Insured/Policyholder

|                          |                       |
|--------------------------|-----------------------|
| Name Of Registered Owner | WANG HONG HENG MELVIN |
| NRIC No                  | S8126690E             |
| Email Address            | HHWANG81@GMAIL.COM    |
| Mobile Phone No          | (LOCAL) +65-96258498  |
| Alternative Phone No     | Others-96258498       |

### Vehicle Particulars

|              |        |
|--------------|--------|
| Manufacturer | MAZDA  |
| Model        | BIANTE |

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             | 1700048944-02                        |
| Cover Note Number         |                                      |

### Driver

|                      |                        |
|----------------------|------------------------|
| Name of Driver       | CHEW KOK YEN,VIVIANE   |
| NRIC No              | S8631335I              |
| Date Of Birth        | 01/11/1986             |
| Occupation           | INDOOR                 |
| Date Of Driving Pass | 19/01/2007             |
| Driving Experience   | 12 YEARS AND 10 MONTHS |

|   |                                      |
|---|--------------------------------------|
| Gender  | FEMALE                               |
| Mobile Number                                       | (LOCAL) +65-94511086                 |
| Fax Number  |                                      |
| Contact Number                                      |                                      |
| EMail Address                                       | NOEMAIL                              |
| Address   | 157C TAMARIND ROAD #05-08 (S) 806107 |
| Postcode  |                                      |
| Was driver an employee of the Insured's Company     | NO                                   |
| If No, Relationship of the Driver with the Insured  | SPOUSE                               |
| 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 | RAINING                  |
| Road Surface       | WET                      |

#### 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)   | 2                                  |
| Passenger 1   | Name: : BENJAMIN<br>Gender: : Male |

#### 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 with attach.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |               |
|-----------------------------|---------------|
| Vehicle Registration Number | SLH360B       |
| Vehicle Make/Model/Colour   | TOYOTA        |
| Details Of Properties       |               |
| Vehicle Category            | PRIVATE CAR   |
| Name of Driver              | LIM GUAN LENG |

|                                     |           |
|-------------------------------------|-----------|
| NRIC/Passport Number                | S7603056A |
| Contact Number                      | 86064358  |
| Address                             |           |
| Postcode                            |           |
| Insurance Company Name              |           |
| Nature Of Damage                    |           |
| No. Of Passenger (Including Driver) | 1         |

## Accident Sketch Plan

### SKETCH PLAN

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6. 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.
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/FIN No.:

# SKETCH PLAN

A - SLR 4755S

B - SLH 360B  
(Toyota Prius)  
(grey color)

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Going down the hill of SLF building, failed to see car in front and knock his back of the car.

INSURER: AIG

VEHICLE: SLR 4755S

DOA: 20/11/2019 @ 5:28hr

CLAIM TYPE: OD claim

WORKSHOP: KFS Motor

## DECLARATION

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

Policyholder's Signature  
Date & Time:

GAARMC SketchPlanForm\_V3

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 20/11/2019  
@ 1750hr

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

Interview form

**AIG ASIA PACIFIC INSURANCE PTE LTD**

**MOTOR ACCIDENT INTERVIEW FORM**

NAME (DRIVER) : CHEW KOK YEN VIVIANE  
VEHICLE NUMBER : SLR 4755 S  
DATE/TIME OF ACCIDENT : 20/11/2019 @ 15:28hrs  
PLACE OF ACCIDENT : The hill of SLF Building  
THIRD PARTY VEHICLE (IF ANY) : SLH 360 B

\*\*\*\*\*

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

From school to home

\_\_\_\_\_

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No

\_\_\_\_\_

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Front to Rear collision

\_\_\_\_\_

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No

\_\_\_\_\_

Wine.

Name:

I Affirmed The Above Information Is Given To My Best Knowledge.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S86313351**

Name: **CHEW KOK YEN, VIVIANE**

Birth Date: **01 Nov 1986**

Issue Date: **19 Jan 2007**

**FOR KFS  
ACCIDENT CLAIM  
USE ONLY**

001473379F



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S86313351**

Name: **CHEW KOK YEN, VIVIANE**

周國妍

Race: **CHINESE**

Date of birth: **01-11-1986**

Country/Place of birth: **SINGAPORE**

Sex: **F**

S86313351



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

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

PASS DATE: **19 Jan 2007**

**FOR KFS  
ACCIDENT CLAIM  
USE ONLY**

Licence No: **S86313351**

NP 428A

3701920

**FOR KFS  
ACCIDENT CLAIM  
USE ONLY**

NRIC No: **S86313351**

Date of issue: **15-02-2017**

Address: **157C TAMARIND ROAD  
#05-08  
SINGAPORE 806107**



## CERTIFICATE OF INSURANCE

### MAZDA AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Wang Hong Heng Melvin (Huang Hongxing Melvin)  
**Period of Insurance** : 16 Aug 2019 To 15 Aug 2020  
**Engine No.** : PE31067310  
**Chassis No.** : JM6CC1071H0111125

**Vehicle No.** : SLR4755S  
**Policy No.** : 1700048944-02  
**Endorsement No.** :  
**Issued Date** : 18 Jul 2019

#### ABOUT THE COVER

**Make/Model** : MAZDA BIANTE  
**Engine Capacity/Tonnage** : 1,998.00 CC  
**Driver Restriction** : NA  
**Person or Classes of Persons Entitled to Drive\*** :  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2017  
**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 Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, 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)

Wang Hong Heng Melvin (Huang Hongxing Melvin) - \$600 (Own Damage)

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

1. Trans Eurokars Pte Ltd. Add: 27A Tanjong Penjuru, Singapore 609042 63310608

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](http://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: HONG LEONG FINANCE 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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503599190

ARF (AP) PTE LTD - MAZDA  
7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX  
SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Manile*

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

SSPD50

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident scene



Accident scene



Accident scene

