

## 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	26/11/2019 12:50
Date Of Accident	26/11/2019 08:15
Exact Location Of Accident	TAN TOCK SENG HOSPITAL MEDICAL DROP OFF EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ1080E
-----------------------------	----------

#### Insured/Policyholder

Name Of Registered Owner	YEW CHEE SENG
NRIC No	S7471313J
Email Address	UNICARTS@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97655509
Alternative Phone No	Others-97655509

#### Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI-1.2 DIG-T CVT ABS 2WD 5DR (A)
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	REPORTING ONLY
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	1700020856-02
Cover Note Number	28/06/2019 - 27/06/2020

#### Driver

Name of Driver	YEW CHEE SENG
NRIC No	S7471313J
Date Of Birth	03/01/1974
Occupation	INDOOR
Date Of Driving Pass	20/06/1994
Driving Experience	25 YEARS AND 5 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-97655509
Fax Number	
Contact Number	OTHERS-97655509
E-Mail Address	UNICARTS@HOTMAIL.COM
Address	BLK 122 MCNAIR RD #06-39
Postcode	S320122
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	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)	1

#### 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 to attached 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	SHA3794Y
Vehicle Make/Model/Colour	HYUNDAI IONIQ
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MR LOW
NRIC/Passport Number	
Contact Number	83398194

Address

Postcode

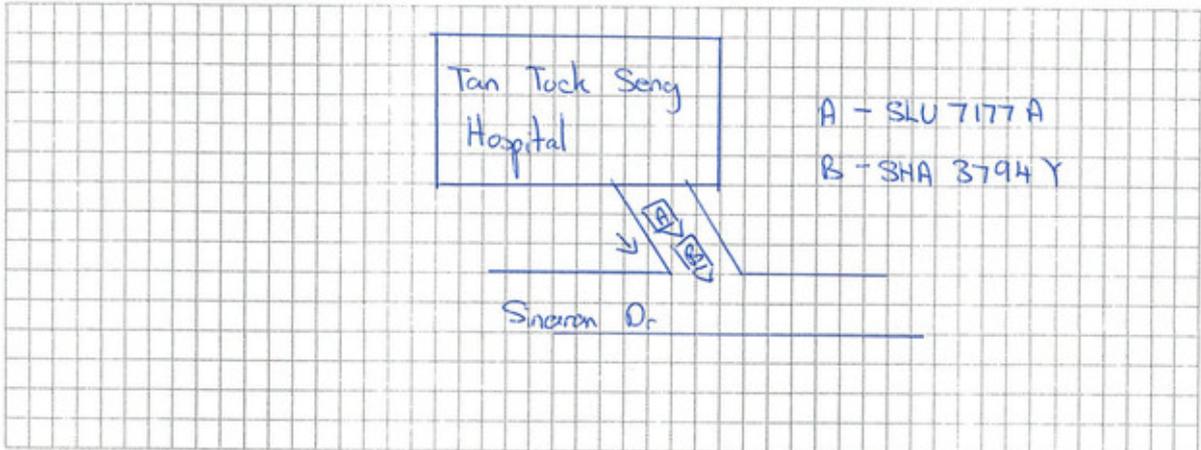
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Was dropping off my neighbour at Tan Tock Seng Hospital drop off point & driving out to Sinaran Dr. There was a taxi in front of me. I checked for on-coming vehicles from my right & slowly drove out once traffic was cleared. Accidentally knocked into the taxi in front as didn't expect the driver to stop there when the traffic was cleared.

**Important:**

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.

- Reporting Only
- Claim OD
- Claim TP
- Claim OD/ TP at other workshop

DECLARATION

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

Policyholder's signature  
Date & Time

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



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

## SKETCH PLAN

### 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. 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.:





## CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder	: Yew Chee Song	Vehicle No.	: SLD108CE
Period of Insurance	: 26 Jun 2019 To 27 Jun 2020	Policy No.	: 1700020656-02
Engine No.	: HRA2415754A	Endorsement No.	:
Chassis No.	: SJNFEA111U1937745	Issued Date	: 23 May 2019

## ABOUT THE COVER

Make/Model	: NISSAN Cashpal 1.2 DIG-Turbo	Sum Insured	: Market Value	First Year of Registration	: 2017
Engine Capacity/Tonnage	: 1,197.00 CC	Off Peak Car	: No	Insuring with COE/PARF	: Yes
Driver Restriction	: NA				

## Person or Classes of Persons Entitled to Drive\*

a) The Policyholder  
 b) Any class driver who is driving on the Policyholder's order or with his/her permission.  
 This Policy will indemnify the Policyholder or any classed driver only if he/she meets the specific age condition.

You have to pay an additional sum of \$3,000 as "Unlicensed Driver Excess" (UEE) if You (or Your Authorised Driver named or unnamed) has less than 1 year's driving experience.

Age Condition : 40 years old and above

Limitation as to use<sup>1</sup>

Use only for social, domestic and leisure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving school, driving test, racing, packaging, liability test or speed testing. The coverage of goods other than contents in connection with any trade or business or use for a purpose in connection with Motor Tolls.

## Limit of Use 1500km - 100km

<sup>1</sup> Limitations detailed hereinafter by Section 9 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 159) and Section 95 of the Road Transport Act, 1967 (Malaysia), shall not be included under these headings.

## EXCESS

Section 1  
 Fire - \$5 Over Damage - \$500 Theft - \$5 Flood Cover - \$5

Section 2  
 Property Damage - \$5

Widescreen : \$100

Named Driver and Excess (where applicable)

Year Over Damage - \$50 (Over Damage)

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

1. TO AutoCare: Add: No. 1, Sakh Lak Yung Road Singapore 420084 42002212  
 2. AutoWork Inc: Add: 19 Ulu Road Singapore 408003 60603668  
 3. TO AutoCare: Add: 26 Leng Kee Road Singapore 150071 67020112 37020212  
 4. Tan Chong Motor Sales: Add: 811 Road Tanah Merah Singapore 540001 64001202 64004002  
 5. Tan Chong Motor Sales: Add: 17 Lorong 8 Tua Pagar Singapore 416014 64570155 64972156

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour customer emergency hotline at +65 338 8200. 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: DBS BANK LTD

We hereby certify that this policy is issued as Certificate of Insurance under the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 159), Part 9 of the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

090010338

TAN CHONG CREDIT PTE LTD (MSP)  
 811 BURTT ROAD ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 540001 AMSP/MOTOR  
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORIZED REPRESENTATIVE

190208

Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7471313J



Name  
YEW CHEE SENG  
姓 名  
葉 傑 生

Sex  
CHINESE

Date of birth  
02-01-1974

Age  
41

Country of origin  
MALAYSIA



2754280



ANCH-S7471313J

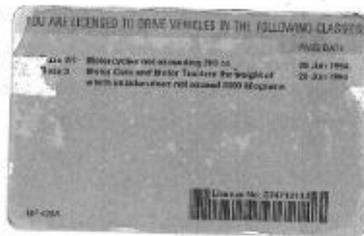


Date of issue  
18-03-2017

Address  
APT 815, 02 MCBAR ROAD  
#08-25  
SINGAPORE 329122



# Driving License



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

