

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 13:02
Date Of Accident	25/11/2019 14:20
Exact Location Of Accident	ROUND ABOUT OUTSIDE SUNTEC CITY TOWER ONE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBQ8860T
Insured/Policyholder	
Name Of Registered Owner	CHEUNG TAK MEI HELEN
NRIC No	S2591950E
Email Address	HELENKHOO@WINGTAIASIA.COM.SG
Mobile Phone No	(LOCAL) +65-96364729
Alternative Phone No	Others-96364729

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200 AVG (R18 LED)
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	1800031424-01
Cover Note Number	02/04/2019 TO 01/04/2020

Driver

Name of Driver	CHEUNG TAK MEI HELEN
NRIC No	S2591950E
Date Of Birth	05/07/1953
Occupation	INDOOR
Date Of Driving Pass	24/11/1990
Driving Experience	29 YEARS AND 0 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96364729
Fax Number	
Contact Number	OTHERS-96364729
E-Mail Address	HELENKHOO@WINGTAIASIA.COM.SG
Address	58 HUA GUAN AVENUE HONG KONG PARK SINGAPORE
Postcode	589154
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 - 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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BUKIT TIMAH N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

refer with attach police report.

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	SHB4724M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN BENG HONG

NRIC/Passport Number	S1448943F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	3
Passenger 1	Name: : passenger Gender: : Female
Passenger 2	Name: : baby girl Gender: : Female

DETAILS OF INJURED PERSON 1

Name	FEMALE PASSENGER
Approximate Age	
Injuries Sustain	HOSPITAL
Injured person in which vehicle?	SHB4724M
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	BABY GIRL
Approximate Age	
Injuries Sustain	HOSPITAL
Injured person in which vehicle?	SHB4724M
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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

Tower
H

A: SBQ 8860T
B: SHB 47244

Surtee city
randakun

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer with attach police report.

DECLARATION

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

Policyholder's Signature
Date & Time:
16/12/19
11:50 am.

Driver's Signature
(If driver is not the policyholder)
Date & Time:
1

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



police report



Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/11/2019 16:41	Vide Report No.: A/20191125/0074	Station Diary No.: 86
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Informant's Particulars

Name of Informant: CHEUNG TAK MEI HELEN			Address: 58 HUA GUAN AVENUE SINGAPORE 589154		
ID Type / ID No.: NRIC NO / S2591950E			Contact No.: Home/Office: Mobile: 96364729		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 66	Date of Birth: 05/07/1953	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: director			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 25/11/2019 14:20	Type of Location: Roundabout
Location: TEMASEK BOULEVARD 8 Temasek Blvd, Taxi stand				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBQ8860T	Car	MERCEDES BENZ	E200 AVG (R18 LED)	Green	Slightly Damaged	0
SHB4724M	Car	HYUNDAI		Yellow	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SBQ8860T	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800031424-01	02/04/2019	01/04/2020



SINGAPORE
POLICE FORCE



T/20191125/2143

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

2 of 2
Report No. T/20191125/2143

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHEUNG TAK MEI HELEN	ID No.	S2591950E
Related Vehicle	SBQ8860T (Car)	Contact No.	96364729
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Tan Beng Hong	ID No.	S1448943F
Related Vehicle	SHB4724M (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25/11/2019 at about 1421hrs, while I was driving along the 2nd lane of the roundabout at the said location. I then wanted to cut to my left lane, after I check it was clear I cut towards my left lane then suddenly a Taxi (SHB4724M) was on my left lane and sideswipe occurred. My vehicle front left sideswipe the taxi right side.

Both of us then alight of the vehicle and check on the damages. There was a passenger and her baby was on board of the taxi and I heard that the baby was injured, as such the ambulance was call.

The ambulance came and convey the baby with the mother away. I then exchange particulars with the taxi driver.

Traffic police was also at scene and took the in car camera SD card from the Taxi driver. I do not have an in car camera.

police report



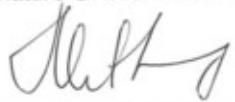
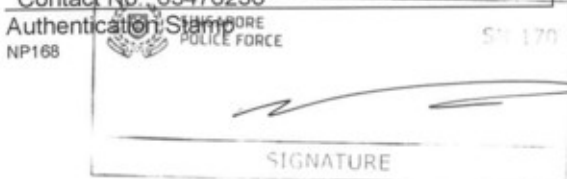
Location Of Origin:
 Mah N.P.C
 ke's Road SINGAPORE 268914
 el No: 1800-4629999

CONTINUATION OF REPORT

Sketch Plan

Informant 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: E / Sgt 2 TEO JIE DONG, MARCUS	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/11/2019 16:41
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt NORAMEERA BINTE MOHAMED HUSSEIN Contact No. 65476236	Classification Of Case:
Authentication Stamp 	

Identification Card

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S2591950E**
 Name: **CHEUNG TAK MEI HELEN**
 Birth Date: **05 Jul 1953**
 Issue Date: **23 Oct 2003**

0009478820

FOR KFS
ACCIDENT CLAIM
USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S2591950E**



 Name: **CHEUNG TAK MEI HELEN**

張德嫻
 Race: **CHINESE**
 Date of Birth: **05-07-1953** Sex: **F**
 Country of Birth: **HONG KONG**

S2591950E

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: **24 Nov 1990**

NP 428A

Licence No: **S2591950E**

FOR KFS
ACCIDENT CLAIM
USE ONLY

2322252



 NRIC No: **S2591950E**



 Blood Group: **A+** Date of issue: **29-08-1994**

Address:
58 HUA GUAN AVENUE
SINGAPORE 2158

certificate of insurance



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : CHEUNG TAK MEI HELEN
Period of Insurance : 02 Apr 2019 To 01 Apr 2020
Engine No. : 27492031389077
Chassis No. : WDD2130422A414806

Vehicle No. : SBQ8860T
Policy No. : 1800031424-01
Endorsement No. :
Issued Date : 07 Mar 2019

ABOUT THE COVER

Make/Model : MERCEDES Benz E200 Sedan Avantgarde
Engine Capacity/Tonnage : 1,991.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
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 2000cc

* 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 - \$800 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CHEUNG TAK MEI HELEN - \$800 (Own Damage)

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

1.Cycle & Carriage Eunus Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818
2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

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 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

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, 1959 (Malaysia).

This Policy will remain in full force and effect until the expiration date stated on the front cover of the policy. If the insured vehicle is damaged or destroyed, the insured must notify the insurer immediately. If the insured vehicle is damaged or destroyed, the insured must notify the insurer immediately. If the insured vehicle is damaged or destroyed, the insured must notify the insurer immediately.

0504612222

CYCLE & CARRIAGE - EUGENE
239 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Janile

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

AIGSGMOBILEAPP

Accident Photo



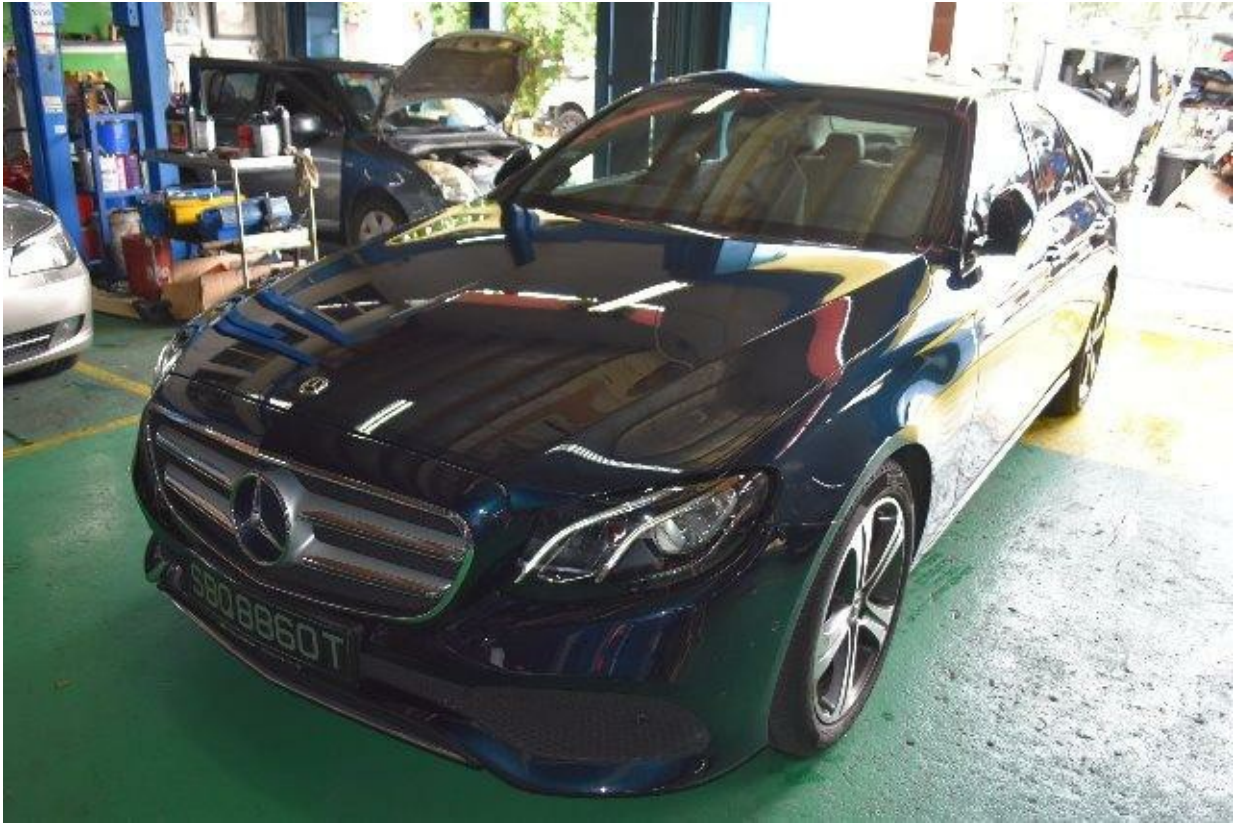
Accident Photo



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