

## 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	28/11/2019 12:31
Date Of Accident	27/11/2019 22:10
Exact Location Of Accident	CROSS JUNCTION OF ALEXANDRA RD & TANGLIN RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ8911L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIM YANKANG (LIN YANKANG)
NRIC No	S8122320C
Email Address	YANKANG.LIM@HPE.COM
Mobile Phone No	(LOCAL) +65-91547896
Alternative Phone No	OTHERS-91547896

### Vehicle Particulars

Manufacturer	NISSAN
Model	ELGRAND-2.5 (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?	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	1700032500-02
Cover Note Number	26/07/2019 - 25/07/2020

### Driver

Name of Driver	LIM YANKANG (LIN YANKANG)
NRIC No	S8122320C
Date Of Birth	22/07/1981
Occupation	INDOOR
Date Of Driving Pass	17/01/2001
Driving Experience	18 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91547896
Fax Number	
Contact Number	OTHERS-91547896
E Mail Address	YANKANG.LIM@HPE.COM

Address	BLK 87 DAWSON RD #40-21
Postcode	S141087
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	CHAIN COLLISION
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	3
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)	3
Passenger 1	NAME: : LEE PEILING GENDER: : FEMALE
Passenger 2	NAME: : HAELYN LIM 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

Refer to attached sketch plan.

### 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	SGM1616R
Vehicle Make/Model/Colour	TOYOTA CAMRY WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN JIAHUI, AUDREY
NRIC/Passport Number	S8302626Z
Contact Number	97708429
Address	
Postcode	

Insurance Company Name AXA INSURANCE PTE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SHA4645M

Vehicle Make/Model/Colour HYUNDAI I40

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

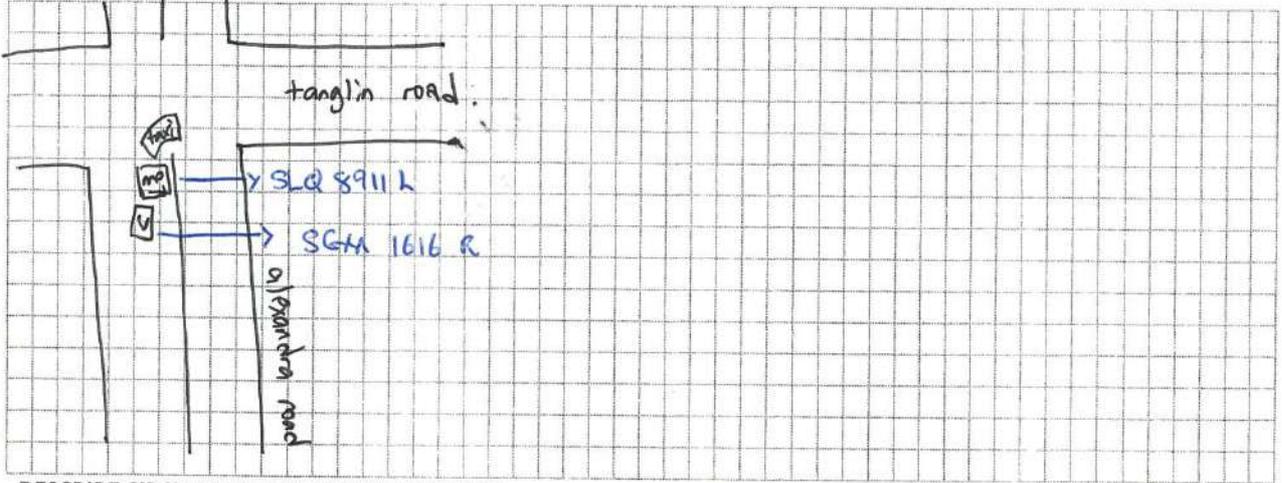
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Taxi in front, and me waiting to turn right.  
 Both cars stationary.  
 Car SGM 1616 bang into rear of my car and my car bang into taxi in front.  
 Date / Time : 1010 pm, 27 NOV 2019

**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.

LIM YAN KAN G

Policyholder's signature  
 Date & Time  
 28 NOV 2019  
 1050am

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



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

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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.

*Ar*

Policyholder's Signature

Date & Time:

28 Nov 2019  
1050 am

*Ar*

Driver's Signature

(If driver is not the policyholder)

Date & Time:

*[Signature]*

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lim Yan Kang (Lim Yan Kang)  
 Period of Insurance : 28 Jul 2018 To 28 Jul 2020  
 Engine No. : QR26687096L  
 Chassis No. : JN1TBAE52Z0002490

Vehicle No. : 8LC0911L  
 Policy No. : 1700030010-00  
 Endorsement No. :  
 Issued Date : 10 Jun 2019

### ABOUT THE COVER

Make/Model : NISSAN ELGRAND EG2  
 Engine Capacity/Tonnage : 2,493.00 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/PARF : No

#### At the Policyholder

Is any other person who is driving the Policyholder's motor or other motor propelled  
 This Policy will insure the Policyholder or any authorized driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$2,800 as "Young/Young Driver Bonus" (YDB/YDBY), up to their Authorized Driver (if used or covered) for every first 3 years of driving experience.

Age Condition : 35 years old and above

#### Limitation as to use\*

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

This Policy does not cover any failure or breach, driving without, driving without, failure to hold a valid licence, the carriage of goods other than samples in connection with any trade or business or use for any purpose or purpose not allowed under Trade.

Limit of Use 1900cc - 1800cc

\* Limitation includes a restriction on the use of the Motor Vehicle (Third Party, Fire and Comprehensive) (A/Cap: 100) and Excess B of the Basic Transport Act, 1987 (Malaysia), and not to be exceeded under these headings.

### EXCESS

#### Section 1

Fire - 50 (Over Damage) - 5000 (Theft) - 50 (Third Party) - 50

#### Section 2

Property Damage - 50

Whichever is higher

#### Named Driver and Excess (per accident)

Lim Yan Kang (Lim Yan Kang) - 5000 (Over Damage)

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

- 1 TO A, 30/01, Add: 101, 101A, 101B, 101C, 101D, 101E, 101F, 101G, 101H, 101I, 101J, 101K, 101L, 101M, 101N, 101O, 101P, 101Q, 101R, 101S, 101T, 101U, 101V, 101W, 101X, 101Y, 101Z, Singapore 400001-400008
- 2 TO A, 30/01, Add: 101, 101A, 101B, 101C, 101D, 101E, 101F, 101G, 101H, 101I, 101J, 101K, 101L, 101M, 101N, 101O, 101P, 101Q, 101R, 101S, 101T, 101U, 101V, 101W, 101X, 101Y, 101Z, Singapore 400001-400008
- 3 To A, 30/01, Add: 101, 101A, 101B, 101C, 101D, 101E, 101F, 101G, 101H, 101I, 101J, 101K, 101L, 101M, 101N, 101O, 101P, 101Q, 101R, 101S, 101T, 101U, 101V, 101W, 101X, 101Y, 101Z, Singapore 400001-400008
- 4 To A, 30/01, Add: 101, 101A, 101B, 101C, 101D, 101E, 101F, 101G, 101H, 101I, 101J, 101K, 101L, 101M, 101N, 101O, 101P, 101Q, 101R, 101S, 101T, 101U, 101V, 101W, 101X, 101Y, 101Z, Singapore 400001-400008

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour service emergency hotline at +65 6333 8200. A list of approved reporting centres can be found in the AIG Mobile App, simply search and download "AIG 50" from the App Store or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

This policy certifies that the policy to which this Certificate is attached is valid to be issued in accordance with the conditions set by the Motor Vehicle Accident Policy Index with Cooper's Motor, A/Cap: 100, Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicle (Third Party, Fire) Rules, 1989 (Malaysia).

0208-0218

TAN CHONG CREDIT PTE LTD - 012  
 01: 600118888 ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 600011  
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*J. Tan*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORIZED REPRESENTATIVE

0208-0218

Identification Card

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S8122320C**



Name  
**LIM YANKANG**  
**(LIN YANKANG)**  
**林 延 康**

Race  
**CHINESE**

Date of birth  
**22-07-1981**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**

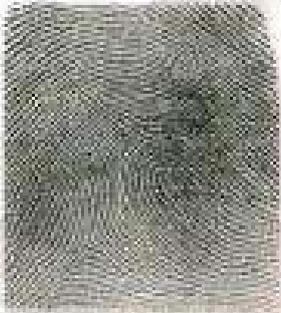


**S8122320C**

5188582



NRIC No. **S8122320C**



Date of issue  
**03-07-2013**

**APT BLK 87 DAWSON ROAD #40-21**  
**SINGAPORE 141087**

NRIC No: **S8122320C** Date: **23/03/2016**

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S 8 1 2 2 3 2 0 C**  
Name: **LIM YANKANG (LIN YANKANG)**

Birth Date: **22 Jul 1981**  
Issue Date: **28 Dec 2002**



Driving License

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

PASS DATE

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

17 Jan 2001



NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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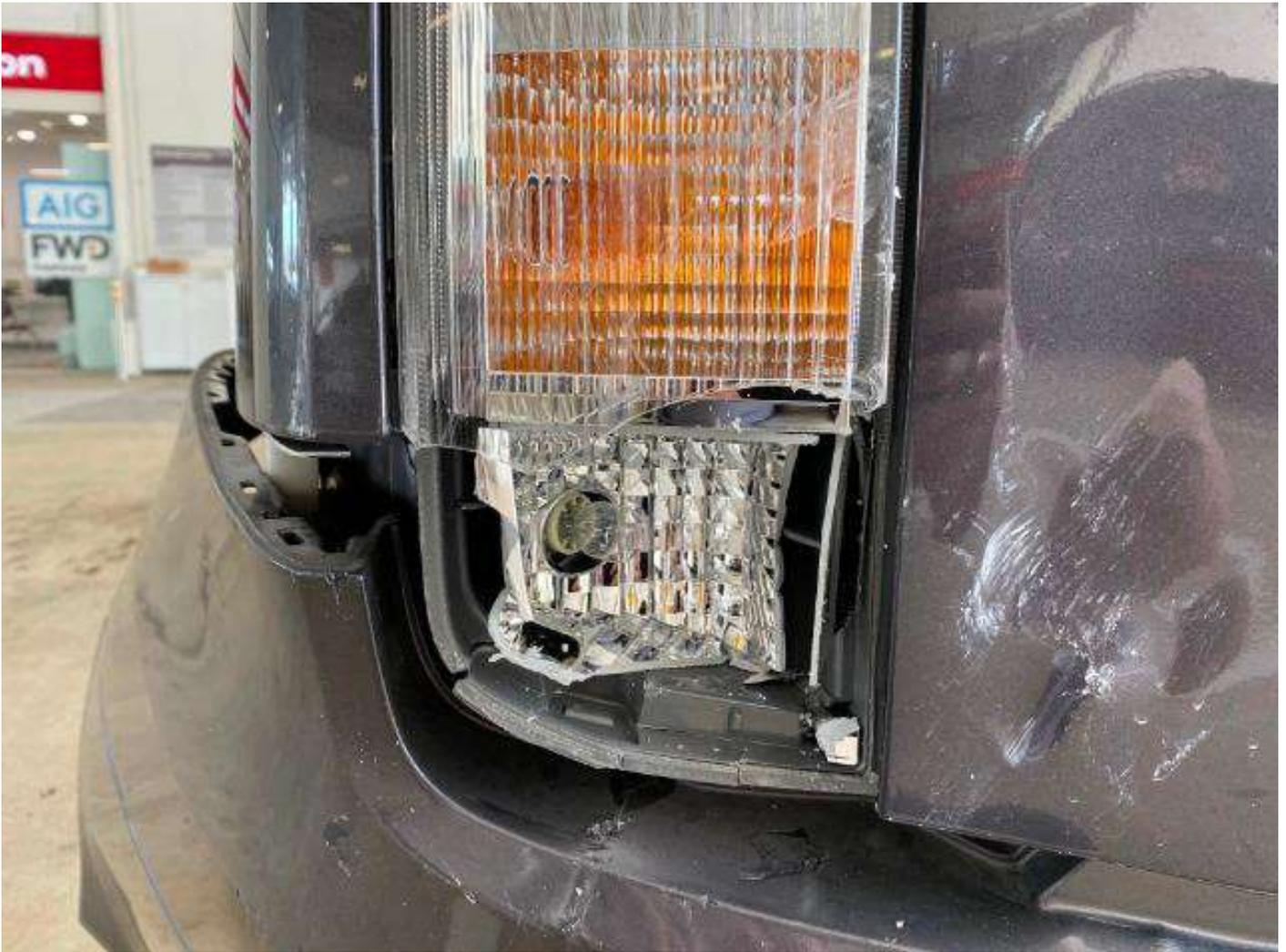
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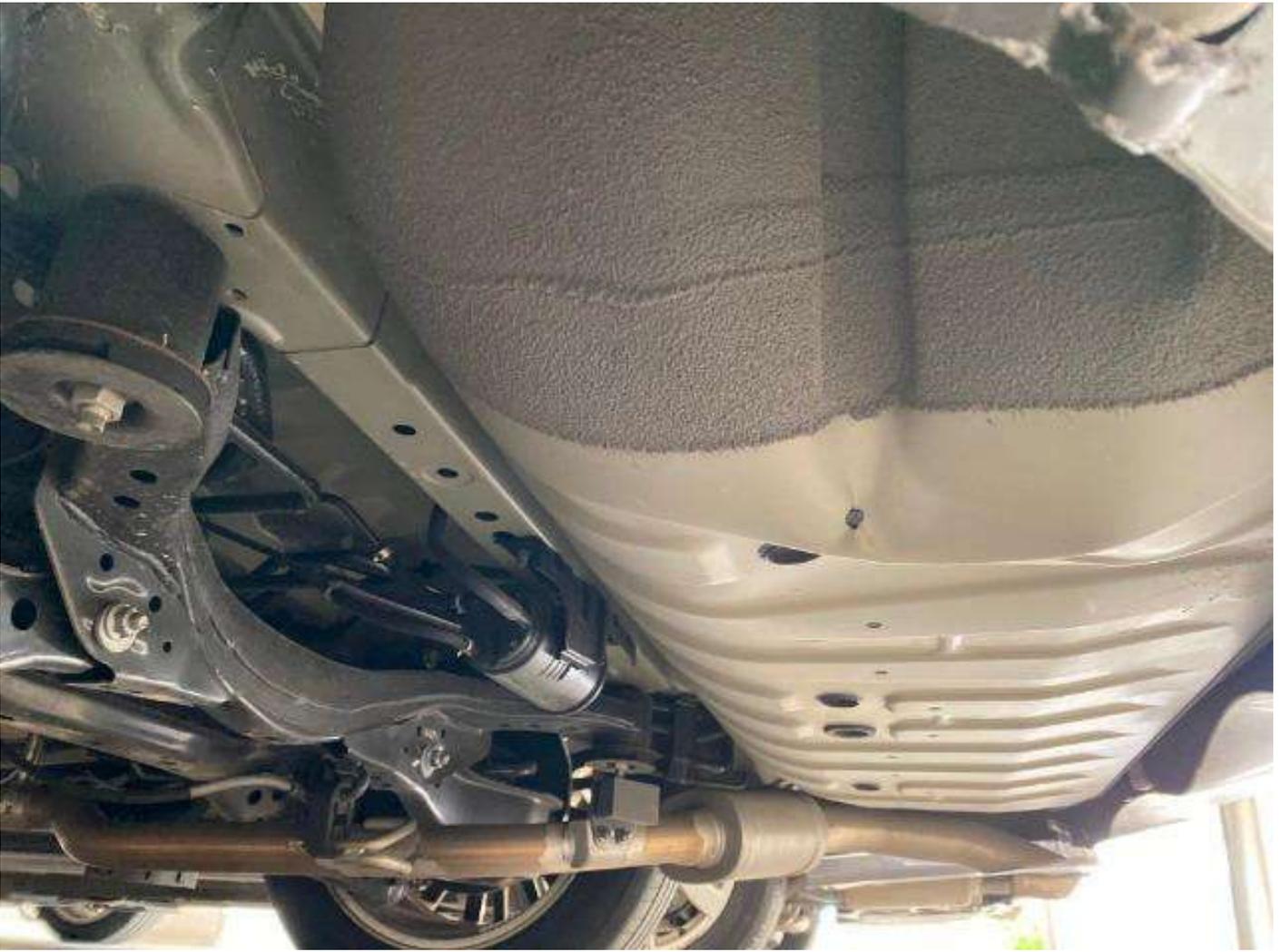
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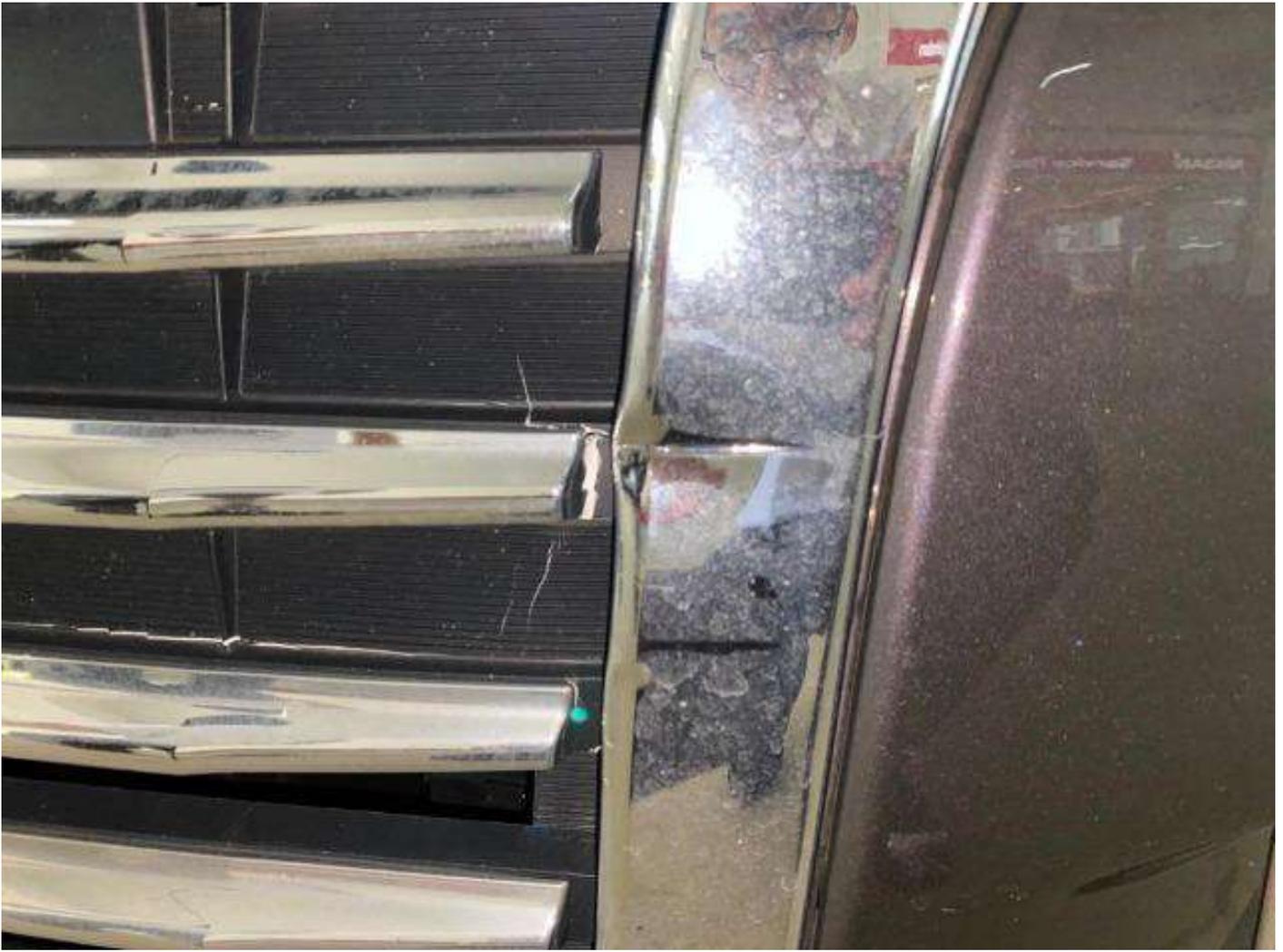
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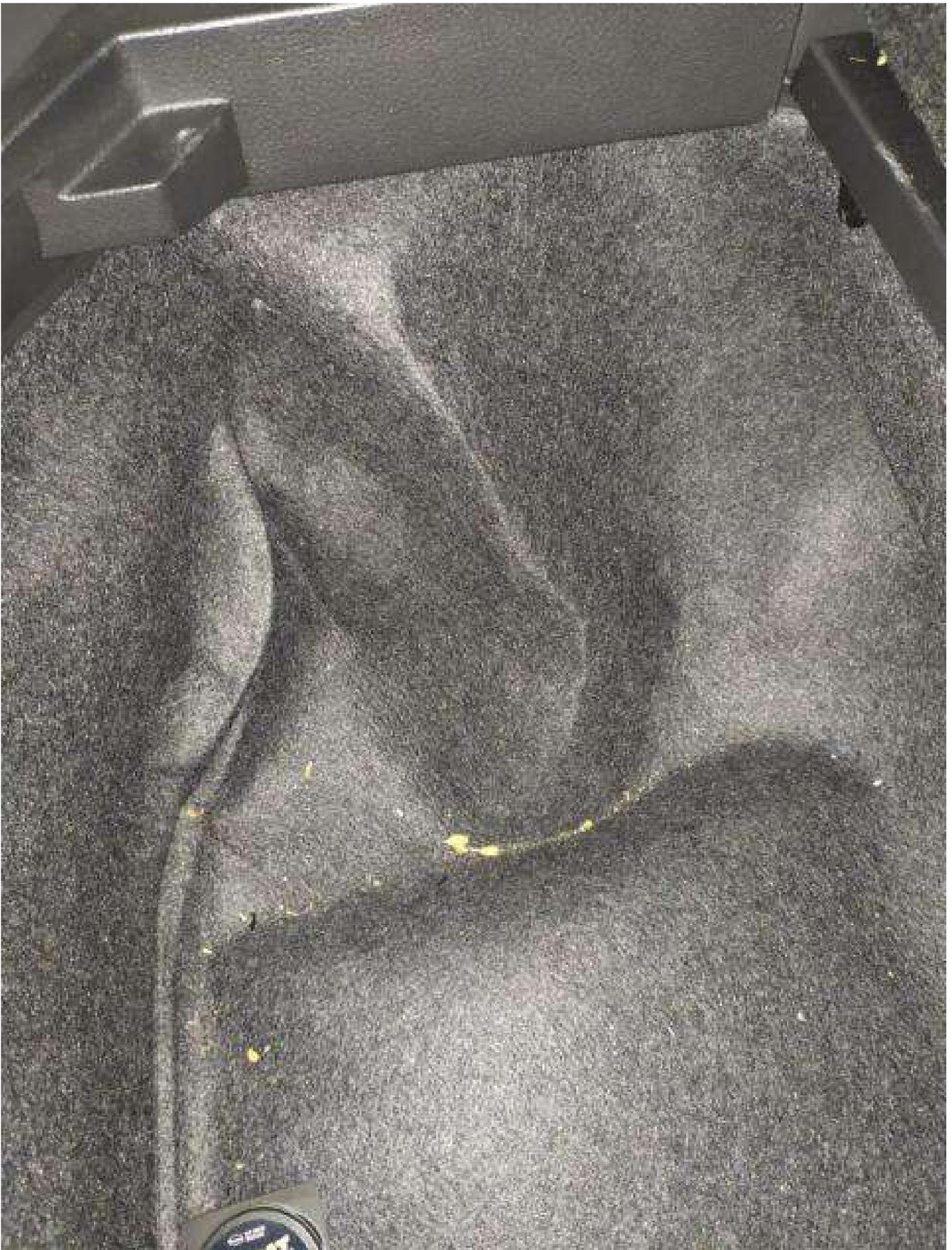
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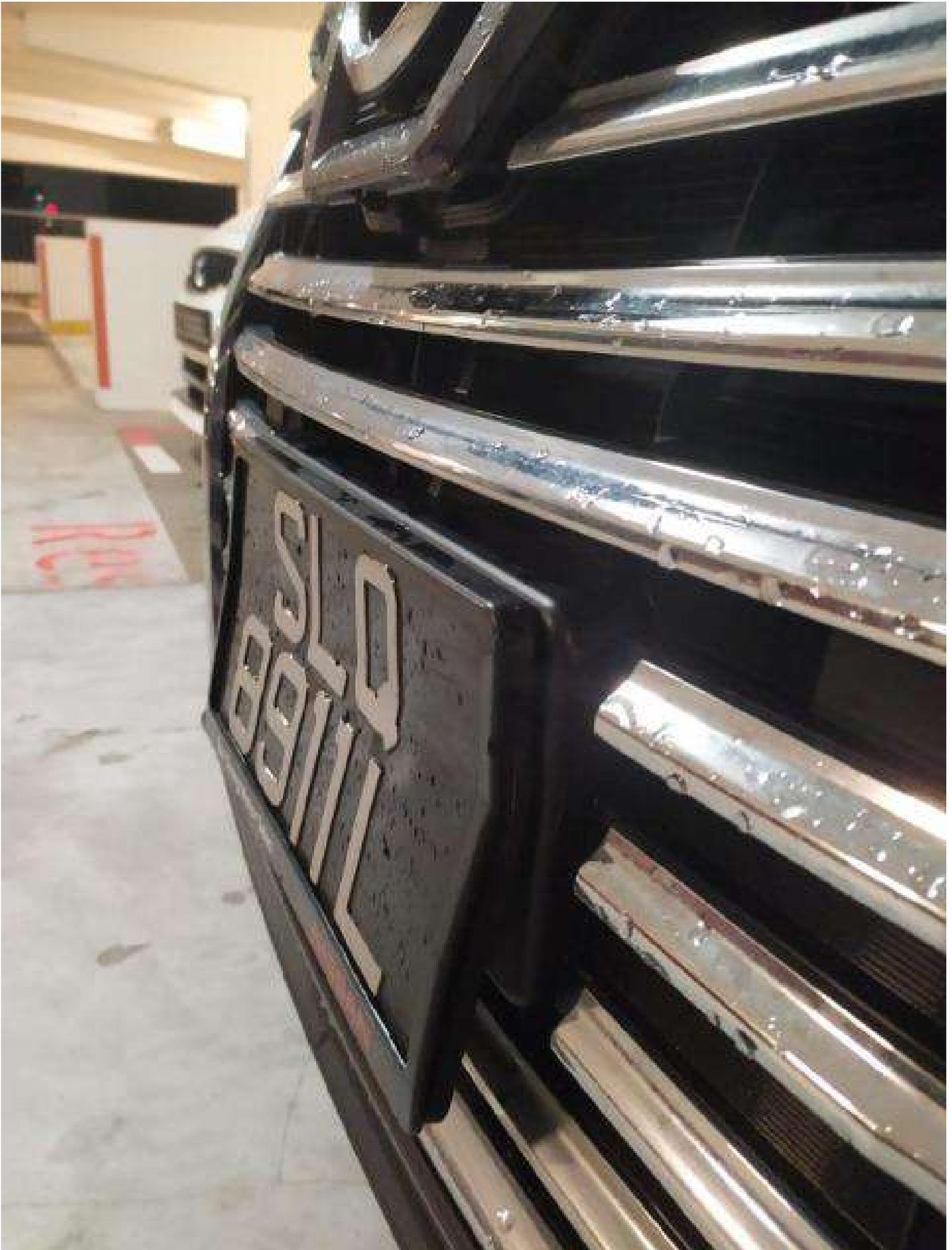
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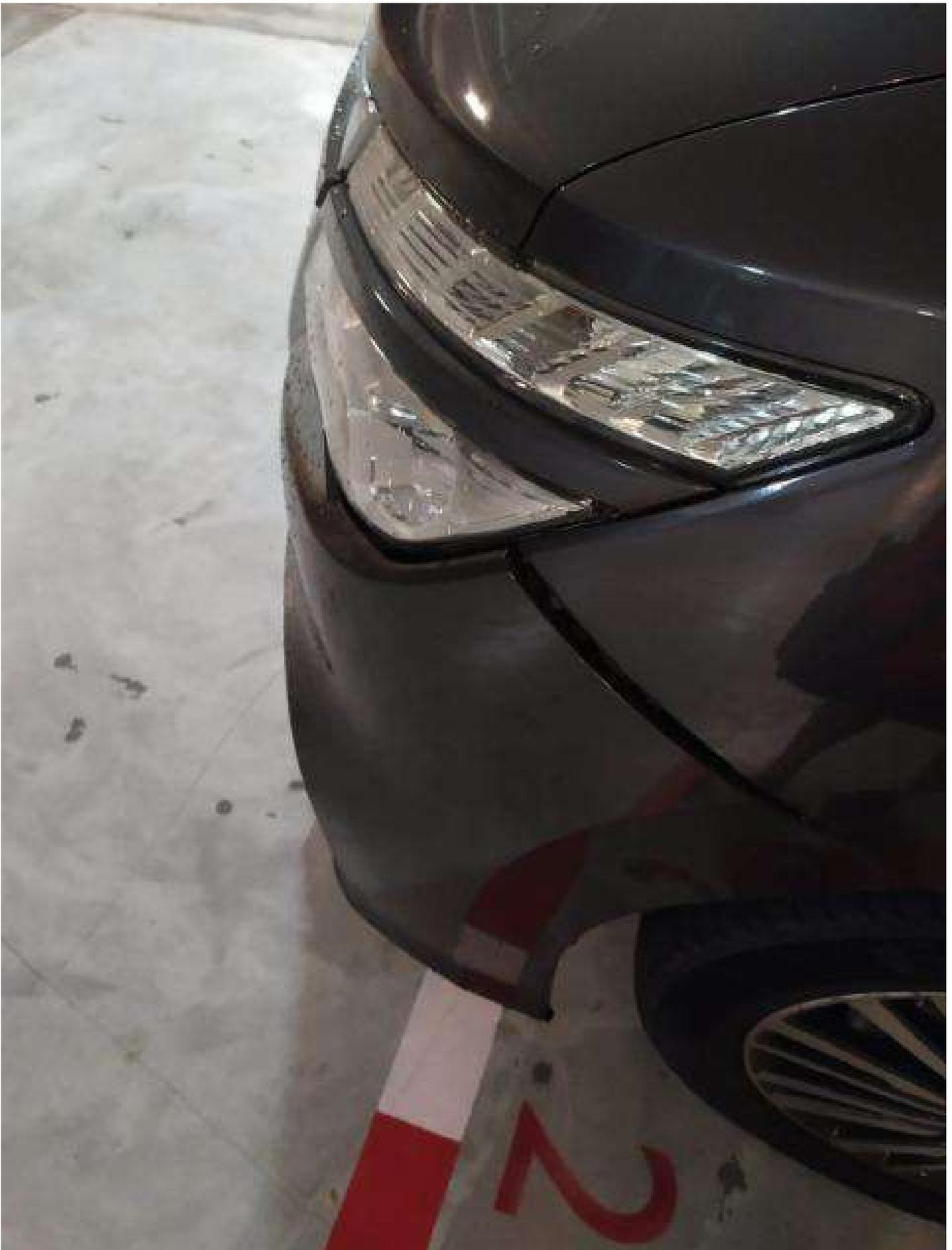
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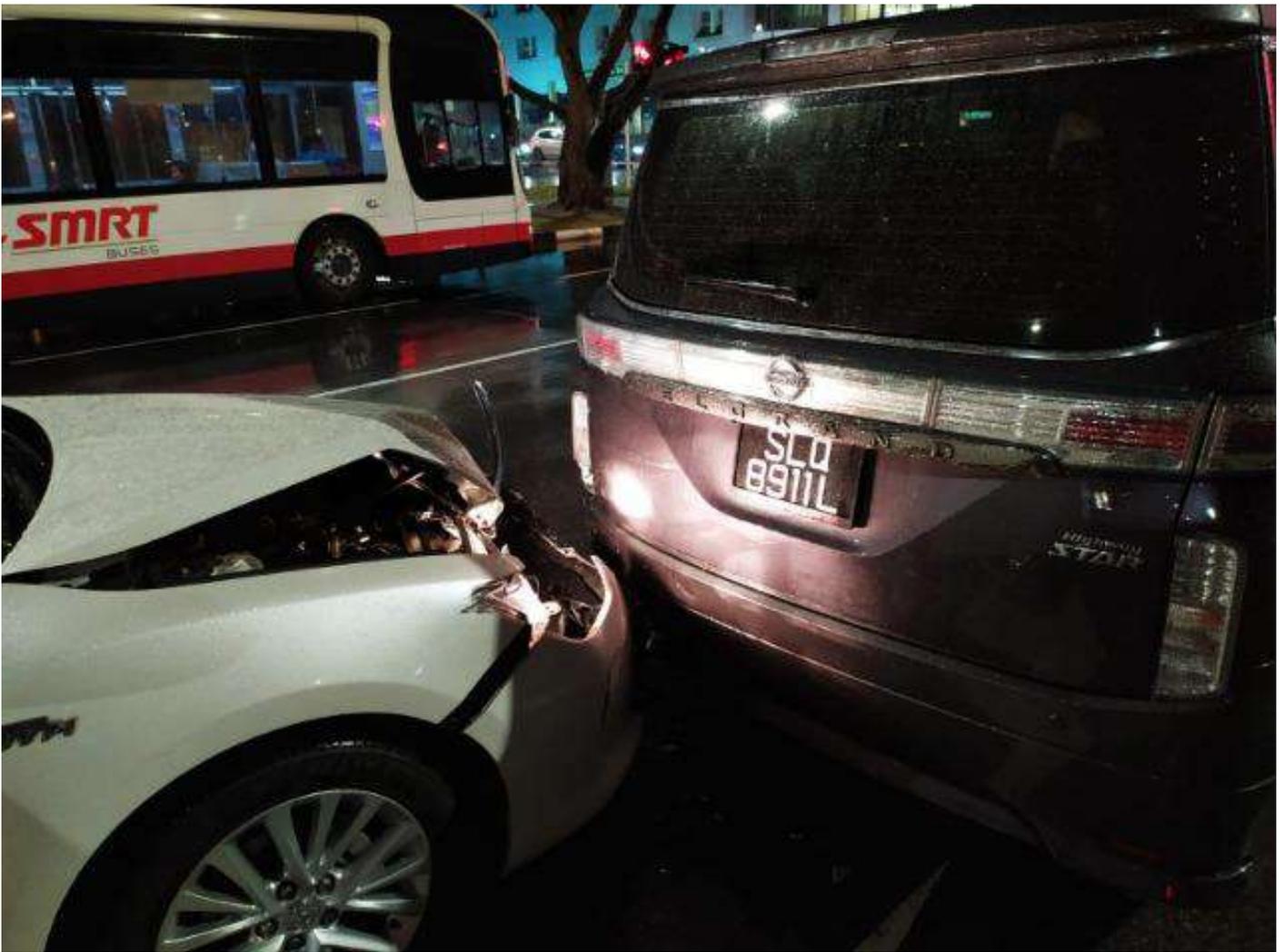
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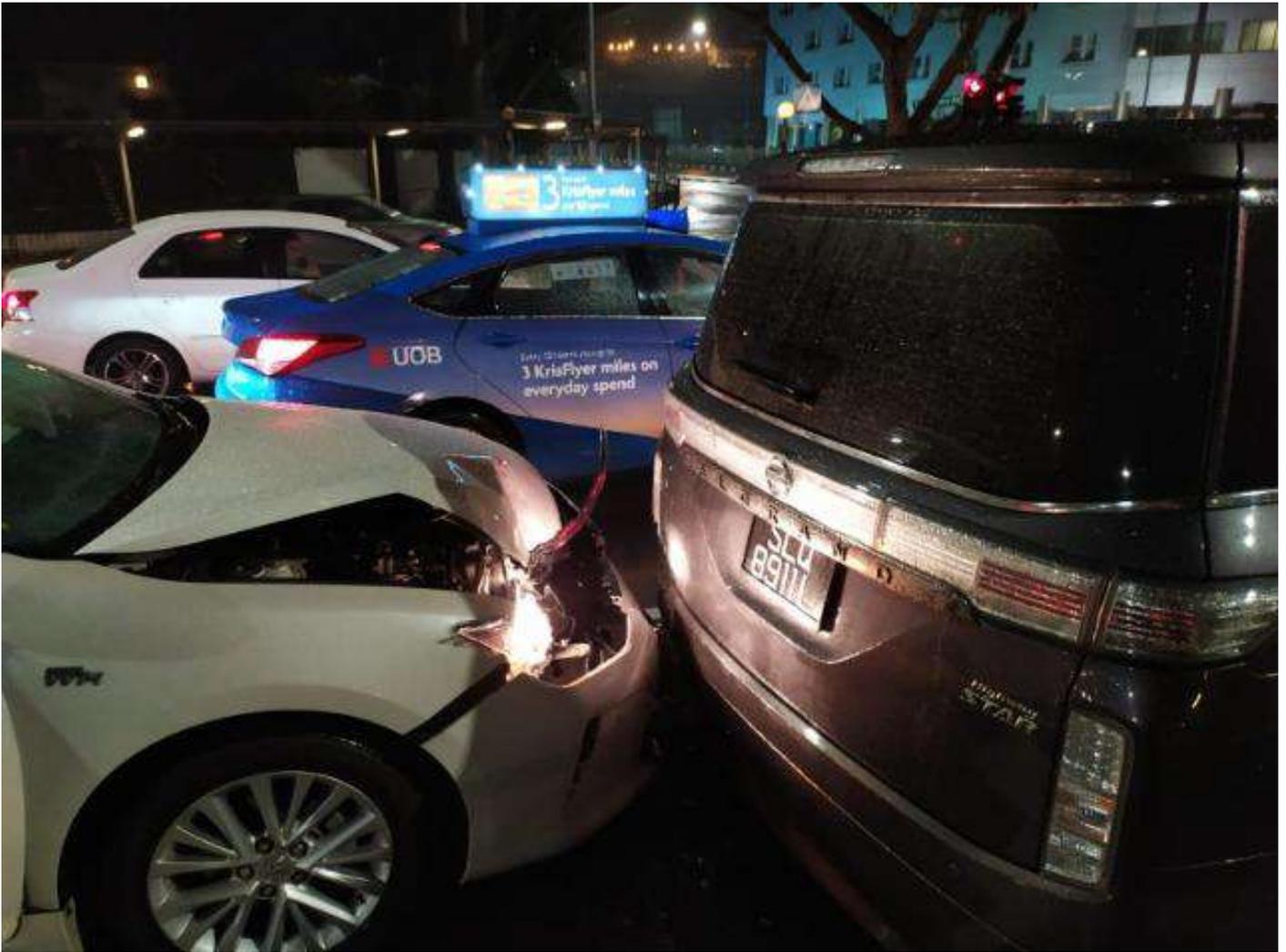
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Accident Photo



**Addendum Sheet**



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE**  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: 566550020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MTLK19157094 Vehicle Registration No: SLQ8911L  
Name (as shown in NRIC) : LIM YANKANG (LIN YANKANG) NRIC/FIN/Passport No : S8122320C  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : BLK 87 DAWSON RD #40-21 Singapore( 141087 )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 91547896  
Email Address : YANKANG.LIM@HPE.COM  
Date of Accident : \_\_\_\_\_ Time of Accident : \_\_\_\_\_  
Place of Accident : CROSS JUNCTION OF ALEXANDRA RD & TANGLIN RD  
Insurance Company : AIG ASIA PACIFIC INSURANCE PTE. LTD.

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend accident date from 28/11/19 to 27/11/19  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

F [Signature]  
Policyholder / Driver's Signature  
Date: \_\_\_\_\_



[Signature]  
Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/FIN No.: \_\_\_\_\_  
Date: \_\_\_\_\_

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0030 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S665500206 / GST Reg. No. : M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MTLK19157094-01 Vehicle Registration No: SLQ8911L
Name(as shown in NRIC) : LIM YANKANG (LIN YANKANG) NRIC/FIN/Passport No : S8122320C
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate
Address : BLK 87 DAWSON RD #40-21 Singapore( 141087 )
Contact (Tel) : Mobile No. : 91547896
Email Address : YANKANG.LIM@HPE.COM
Date of Accident : 27/11/2019 Time of Accident : 22:10
Place of Accident : CROSS JUNCTION OF ALEXANDRA RD & TANGLIN RD
Insurance Company: AIG ASIA PACIFIC INSURANCE PTE. LTD.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend road surface from dry to wet
[Multiple blank lines for additional amendments]

F [Signature]
Policyholder / Driver's Signature
Date:

[Signature] AUTOCLINIC PTE LTD
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: