### SINGAPORE ACCIDENT STATEMENT

## **IMPORTANT NOTICE**

**Date Of Driving Pass** 

**Driving Experience** 

- 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 <u>truthful and accurate</u> 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.
- 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

aforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available	
	ACCIDENT STATEMENT	
Date Of Report	28/11/2019 12:01	
Date Of Accident	27/11/2019 23:25	
Exact Location Of Accident	ECP (AIRPORT TOWARDS CITY) BEFORE LAMP POST 568	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGU8379L	
Insured/Policyholder		
Name Of Registered Owner	TEO PENG BOON	
NRIC No	S1700441G	
Email Address	TEOPENGBOON@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-90067213	
Alternative Phone No	Others-90067213	
Vehicle Particulars		
Manufacturer	ТОУОТА	
Model	VIOS	
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	1900095643	
Cover Note Number		
Driver		
Name of Driver	TEO PENG BOON	
NRIC No	S1700441G	
Date Of Birth	21/10/1965	
Occupation	INDOOR	

26/11/1988

31 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90067213

Fax Number

Contact Number OTHERS-90067213

EMail Address TEOPENGBOON@GMAIL.COM

Address BLK 110 RIVERVALE WALK

#13-10

Postcode 540110
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

NO

3

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)

Passenger 1 Name: : CINDY SONG

Gender: : Female

Passenger 2 Name: : IVAN TEO

Gender: : Male

**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? 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

SLR1046A

Vehicle Make/Model/Colour

Details Of Properties Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

JAMIE KE @THANDA AUNG

S8873901I

83835733

#### Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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)
  - (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.
- 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.

Policyholde

NOV 2019

() 401 hrs

Driver's signature (If driver is not the policyholder)

Date & T2-8:NOV 2019

(201H)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: Poh Kwee Choo

. SKETCH PLAN		
	E(P Airport toward)	ity (Betwee lamp Post 5 bt)
		= - (A) SGU 8379L
>	$M$ $\Box$	= B SLR 104LA
	BN>AD	- B SCKIVAM
3 =		
	(1)0000 700 11	1) note of techant 27/4
	(h) my Traff	Date of Accident 27/4
DESCRIBE CIRCUMSTANCES	11 1 - 1	100
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to de it tom	one college who we we are	dilling, the vimely (B) imply
10 Tob 14 Line	and calliand and my NY	muk (M).
		2
DECLARATION		
I/We declare the foregoing partic	ulars are true in every respect.	
1 78	. **	1/
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time: 2 8 NOV 2019	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No Poh Kwee Choo
AADAMA Seagar Balkara sa a sa a		- SII KINGO CIIOO

CANDENG PROBLEMS OF STREET



## CERTIFICATE OF INSURANCE

#### AUTOVALUE PRIVATE VEHICLE

Name of Policyholder : Teo Peng Boom Period of Insurance

: 28 May 2019 To 27 May 2020

Engine No. : 1NZX545357

Chassis No. : MR053HY9305001434 Vehicle No. Policy No.

: SGU8379L : 1900095643

Endorsement No.

Issued Date

: 17 May 2019

ABOUT THE COVER

Make/Model : TOYOTA VIOS

Engine Capacity/Tonnage: 1,497.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2007 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\* :

a) The Polisyhdider
 b) Any often paragn 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 \$5,000 as "Young and/or inexperianced 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 experiance.

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, recting, space-making, reliability-trial or space-testing, the carriage of goods other (han gamples in connection with about Trace.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 159) and Section 8 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

Windsgreen: \$100

Named Driver and Excess (where applicable)

Tea Peng Boon

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers.

For other Approved Repairing CentravAIG Authorised Repairers, please contact our 24-hour accident emergency holitins at +85.8358.6200. Attamatively, you may refer to AIG websits www.aig.com.ag. ex AIG 56 Mobile App. Strayty yearsh and download \*\In\0000666 of from Times or Beogle Flay.

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

199e hereby certify that the policy to yelloh tribe 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 Provisions of Transport Act; 1987 (Malaysta) and Motor Vehicles (Third Party Risks) Rules, 1996 (Malaysta).

0802263000

SAFE HARBOUR ASSURANCE AGENCY BLK 208 HOUGANG ST 21 #04-207

SINGAPORE 530208

Underwritten by AIG-Asia Pacific Insurance Pts. Ltd.

28 Specifican No. of each 16, 2005 Leading Section 2015 Feb. 105 105 2000 Control Lines Co.

AIG Asia Pacific Insurance Pte. Ltd.

# Accident Photo





**Accident Photo** 



## **CHASSIS NUMBER**

