

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	27/02/2020 14:36
Date Of Accident	09/12/2019 07:00
Exact Location Of Accident	MT ALVERNIA HOSPITAL MSCP 4F LOT 32
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE7098D
Insured/Policyholder	
Name Of Registered Owner	ONG CHING YOUNG KELVIN
NRIC No	S8027972H
Email Address	K.ONGCY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94577924
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	SUBARU
Model	XV-1.6 I-S AWD CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL / LEISURE
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	2100477266-03
Cover Note Number	

Driver

Name of Driver	ONG CHING YOUNG KELVIN
NRIC No	S8027972H
Date Of Birth	12/09/1980
Occupation	INDOOR
Date Of Driving Pass	09/12/2002
Driving Experience	17 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94577924
Fax Number	
Contact Number	OFFICE-NOPHONE
EEmail Address	K.ONGCY@GMAIL.COM

Address	626 UPPER THOMSON ROAD #04-39
Postcode	787130
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	COLLIDED INTO PARKED VEHICLE
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

PLEASE REFER TO THE ATTACHED DOCUMENTS

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	SLS49T
Vehicle Make/Model/Colour	AUDI
Details Of Properties	RIGHT HAND PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	SNG HUI SHAN
NRIC/Passport Number	S8421938Z
Contact Number	96163593
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

[illegible]

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Was making a wide U-turn in the carpark.
- Foot slipped and pressed the acceleration ~~pedal~~ pedal instead of the brake

DECLARATION

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

Anything

Policyholder's Signature
Date & Time:

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

[Handwritten signature]

Reporting Centre Personnel's Signature
Name: DANIEL JUDE
NBIC/EIN NO: 0000000000

Accident Sketch Plan

SKETCH PLAN

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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: DANIEL JUDE
NRIC/FIN NO.: SXXXX 518D

INSURANCE CERT

CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ong Ching Young Kelvin (Wang Jingyang, Kelvin)
Period of Insurance : 29 Jul 2019 To 28 Jul 2020
Engine No. : FB16Y289064
Chassis No. : JF1GP3KC5GG171856

Vehicle No. : SLE7098D
Policy No. : 2100477266-03
Endorsement No. : 000000000288125
Issued Date : 01 Jul 2019

ABOUT THE COVER

Make/Model : SUBARU XV 1.6
Engine Capacity/Tonnage : 1,600.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
 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 "Inexperienced Driver Excess" (IDR) if You are or Your Authorised Driver (named or unnamed) has less than 2 years' 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 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

* Limitations rendered inoperative by Section 6 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 - \$1000 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Ong Ching Young Kelvin (Wang Jingyang, Kelvin) - \$1000 (Own Damage)

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

1. Motor Image Enterprises Pte Ltd Add: 19 Lorong 8 Toa Payoh Singapore 319255-64170100

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 5200. 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: MayBank

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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0500619010

TAN CHONG CREDIT - SUBARU PA

911 BUKIT TIMAH ROAD

SINGAPORE 589622 ANSP-MOTOR

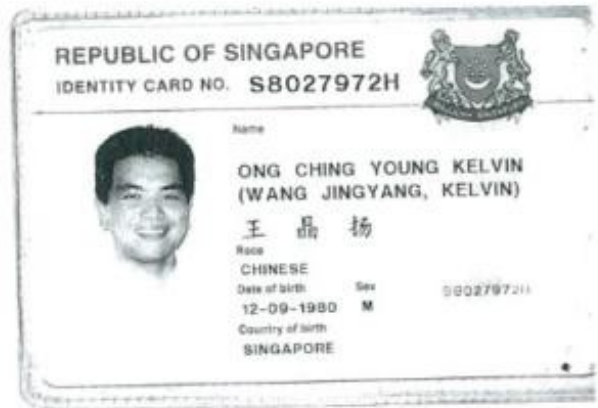
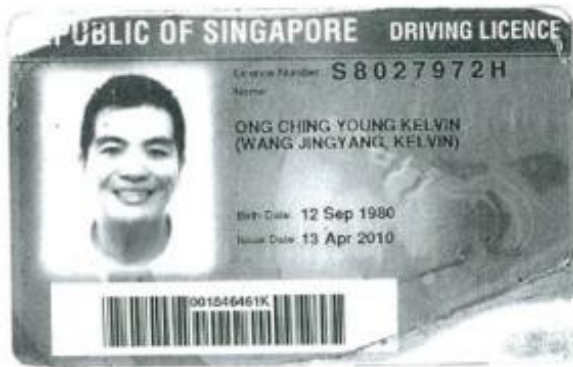
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. Tanik

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

88P040

Identification Card



CROSSBORDERS LLC

Advocates & Solicitors | Commissioner for Oaths | Notary Public

MAIN OFFICE
133 NEW BRIDGE ROAD
#23-03/04/05
CHINATOWN POINT
SINGAPORE 059413

Our Ref: AJ.tk.7083.2020.Revol-PD
Your Ref: SLE7098D

21 FEB 2020

TEL: 6438 1323
FAX: 6438 2313



TO: ONG CHING YOUNG KELVIN
626 Upper Thomson Road
#04-39
Singapore 787130

**BY CERTIFICATE OF
POSTING**

WITHOUT PREJUDICE

cc: AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)
78 Shenton Way
#08-16 AIG Building
Singapore 079120

BY PDX

WITHOUT PREJUDICE

Dear Sirs

RE: CLAIMANT: HONG ZHENG QUAN ALVIN
ACCIDENT INVOLVING VEHICLES NO. SLS49T & SLE7098D ALONG MOUNT
ALVERNIA MSCP LEVEL 4 LOT 32 ON 09.12.2019

We are instructed by the abovenamed to claim damages against you in connection with an accident on 09 December 2019 at about 07:00 hours along Mount Alvernia MSCP L4 lot 32 involving our client's vehicle no. SLS49T and vehicle registration number SLE7098D driven by your employee, servant and/or agent at the material time.

We are instructed that the accident was caused by the negligence of your employee, servant and/or agent in the driving, management and control of vehicle registration number SLE7098D.

As a result of the accident, our client's vehicle registration number SLS49T was damaged and our client has been put to loss and expense, particulars of which are as follows:-

A Damages		
a.	Cost of Repairs	\$ 7,420.38
b.	Vehicle Rental fees (32 days x \$180.00 per day)	\$ 5,760.00
B Disbursements		
a.	LTA Search	\$ 7.49
b.	GIA Report	\$ 15.00
C LEGAL COSTS (AT THIS STAGE)		\$ 963.00
		\$ 14,165.87

CONFIDENTIALITY CAUTION

THIS DOCUMENT IS FOR THE ADDRESSEE(S) ONLY AND MAY CONTAIN CONFIDENTIAL INFORMATION AND/OR MAY BE SUBJECT TO LEGAL PRIVILEGE. IF YOU HAVE RECEIVED THIS IN ERROR, PLEASE CONTACT US IMMEDIATELY.

CROSSBORDERS LLC

A LIMITED LIABILITY CORPORATION, REGISTRATION NUMBER 201305264K
GST REGISTRATION NUMBER 201305264K

Other

We enclose herewith copies of the following documents in support of our client's claim:-

- a) GIA Report lodged by the driver of our client's vehicle no. (SLS49T) with sketch plan;
- b) Result of LTA search on your vehicle registration no. SLE7098D; ✓
- c) Vehicle Rental Agreement from Eevol; ✓
- d) Repair Bill from Revol Carz Garage Pte Ltd; and
- e) Vehicle Owner Particulars of our client's vehicle no. SLS49T. ✓


We have on 12 December 2019 notified your insurers AIG Asia Pacific Insurance Pte Ltd of the accident and pre-repair inspection of our client's vehicle was carried out by your insurer.

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter **within 14 days** of your receipt of this letter, failing which our clients will have no alternative but to commence proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our clients arising out of the accident, you are required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents **within 8 weeks** of your receipt of this letter.

Yours faithfully


CrossBorders LLC
Email: corene@crossbordersllc.com (secretary)

encs

cc: SLS49T ✓

Other



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC4/AIG19021935/Eeb3

20 February, 2020

Ong Ching Young Kelvin (Wang Jingyang Kelvin)

626 Upper Thomson Road, Meadows @ Piers

#04-39

Singapore 787130

Dear Sirs,

**ACCIDENT INVOLVING SLE 7098D AND SLS 49T ON 09/12/2019 ALONG /AT
MOUNT ALVERNIA MSCP LEVEL 4 LOT 32**

We, LKK Auto Consultants Pte Ltd has been appointed to act on the behalf of your insurer, AIG Asia Pacific Insurance Pte Ltd (AIG) to settle a THIRD PARTY claim against you for an accident which happened on the above-mentioned date and location.

Kindly proceed to lodge your GIA report within five (05) working days of receipt of this letter, giving the version of the accident amongst other things related to the accident. The GIA report can be lodged at any of AIG reporting centres. You may refer to your Certificate of Insurance for the list of the reporting centres.

If you have any information to add or any amendments to make, please contact the undersigned within five days from the date of this letter.

Please note that the standing of your insurance policy such as NCD, premium & etc would be affected.

Yours faithfully,

Asher Sng

Claims

Tel : 6841 6051

Fax: 6741 4108

Email : AsherSng@lkkauto.com

c.c. *Claims Manager*
AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)

CROSSBORDERS LLC


Advocates & Solicitors | Commissioner for Oaths | Notary Public

MAIN OFFICE
133 NEW BRIDGE ROAD
#23-03/04/05
CHINATOWN POINT
SINGAPORE 059413

Our Ref: AJ.tk.7083.2020.Revol-PD
Your Ref: SLE7098D

21 FEB 2020

TEL: 6438 1323
FAX: 6438 2313

 **TO: ONG CHING YOUNG KELVIN**
626 Upper Thomson Road
#04-39
Singapore 787130

**BY CERTIFICATE OF
POSTING**

WITHOUT PREJUDICE

cc: AIG Asia Pacific Insurance Pte Ltd
(MOTOR CLAIMS)
78 Shenton Way
#08-16 AIG Building
Singapore 079120

BY PDX

WITHOUT PREJUDICE

Dear Sirs

**ACCIDENT INVOLVING VEHICLES NO. SLS49T & SLE7098D ALONG MOUNT
ALVERNIA MSCP LEVEL 4 LOT 32 ON 09.12.2019**

We act for HONG ZHENG QUAN ALVIN, the owner of motor vehicle no. SLS49T, in his claim for damages as a result of the above accident.

According to our LTA search, you were the owners of motor vehicle no. SLE7098D, at the material time of accident. Please be informed that we are in the process of filing a claim for damages suffered by our clients against your insurers, **AIG ASIA Insurance Singapore Pte Ltd.**

If you were not the driver of vehicle registration no. SLE7098D at the material time of the accident, please **within 14 days from the date of this letter**, let us have full particulars of the driver, namely his/her name, NRIC number and address and let us know if he/she was driving vehicle registration no. SLE7098D in the capacity of your employee, servant or agent and if so, whether he/she was driving vehicle registration no. SLE7098D in the course of his/her employment. If we do not hear from you in this regard by the stipulated date, we shall construe your silence as an admission that you were the driver of vehicle registration no. SLE7098D at the material time of the accident.

Kindly confirm in writing if a Police/GIA report has been lodged by you or your driver and the above accident has been reported to your insurers.

Yours faithfully


Crossborders LLC
Email: corene@crossbordersllc.com (secretary)

cc: SLS49T

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Accident Photo



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