

## 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             | 18/12/2019 16:24                      |
| Date Of Accident           | 17/12/2019 07:50                      |
| Exact Location Of Accident | ALONG UPPER CHANGI ROAD TOWARDS BEDOK |
| Country/State of Loss      | SINGAPORE                             |

### DETAILS OF OWN VEHICLE

|                             |                       |
|-----------------------------|-----------------------|
| Vehicle Registration Number | SKE5605R              |
| <b>Insured/Policyholder</b> |                       |
| Name Of Registered Owner    | ONG MENG YI           |
| NRIC No                     | S0068794D             |
| Email Address               | DORCAS-SF@HOTMAIL.COM |
| Mobile Phone No             | (LOCAL) +65-96934038  |
| Alternative Phone No        | Others-96934038       |

### Vehicle Particulars

|  |                |
|--|----------------|
| Manufacturer   | NISSAN         |
| Model  | SYLPHY-1.5 (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             | 2100293125-07                        |
| Cover Note Number         |                                      |

### Driver

|                      |                        |
|----------------------|------------------------|
| Name of Driver       | ONG MENG YI            |
| NRIC No              | S0068794D              |
| Date Of Birth        | 23/11/1953             |
| Occupation           | INDOOR                 |
| Date Of Driving Pass | 09/02/1979             |
| Driving Experience   | 40 YEARS AND 10 MONTHS |

|   |                       |
|---|-----------------------|
| Gender  | FEMALE                |
| Mobile Number                                       | (LOCAL) +65-96934038  |
| Fax Number  |                       |
| Contact Number                                      | OTHERS-96934038       |
| E-Mail Address                                      | DORCAS-SF@HOTMAIL.COM |
| Address   | 9 BEDOK RIA CRESCENT  |
| Postcode  | 489825                |
| 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 | 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                         | 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

SEE ATTACHED SKETCH PLAN AND PHOTO

#### 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 | SJV1502C    |
| Vehicle Make/Model/Colour   |             |
| Details Of Properties       |             |
| Vehicle Category            | PRIVATE CAR |
| Name of Driver              | ONG KOK HWA |
| NRIC/Passport Number        |             |
| Contact Number              |             |

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# 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:

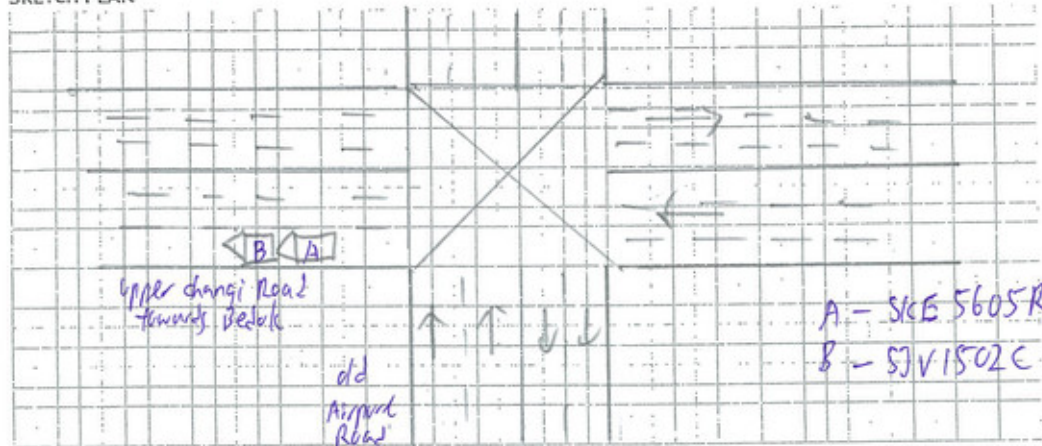
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

AUTOLUTION INDUSTRIAL PTE LTD  
19 UBI ROAD 4  
SINGAPORE 106628  
TEL: 6349 2022 FAX: 6349 7497

Reporting Centre Personnel's Signature

Name: **EMER AIPONS**  
NRIC/IN No.: **GXXXX XX 4L**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17.12.2014, at about 0750, I was travelling on the extreme left lane along upper changi road towards Bedok. Due to the heavy traffic, the front vehicle B stopped suddenly, I could not stop in time and collided to the rear portion of the vehicle B.

DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

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

PRODUCTION INDUSTRIAL PTE LTD  
19 UBI ROAD  
SINGAPORE 108628  
TEL: 6760 4000 FAX: 6760 7490

Reporting Centre Personnel's Signature

Name: *ETIMBE ALFONSO*  
NRIC/FIN No.: *GXXXXXX 4L*





# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ong Meng Yi  
 Period of Insurance : 13 Mar 2019 To 12 Mar 2020  
 Engine No. : HR15331650C  
 Chassis No. : JN1BAAG11Z0151004

Vehicle No. : SKE5605R  
 Policy No. : 2100293125-07  
 Endorsement No. :  
 Issued Date : 23 Jan 2019

### ABOUT THE COVER

Make/Model : NISSAN SYLPHY 1.5  
 Engine Capacity/Tonnage : 1,498.00 CC  
 Driver Restriction : NA  
 Person or Classes of Persons Entitled to Drive\* :

Sum Insured : Market Value  
 Off Peak Car : No

First Year of Registration : 2012  
 Insuring with COE/PARF : 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" ("YIDER") 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 1500cc - 1600cc

\* 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 - \$600 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

#### Named Driver and Excess (where applicable)

Ong Meng Yi - \$600 (Own Damage), Foo Kim Eng - \$600 (Own Damage), Liew Beng Hui - \$600 (Own Damage)

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

- 1. TC AutoClinic Add. No. 1, Sixth Lok Yang Road Singapore 628099 62622212
- 2. Autoklinik Industrial Add. 19 Ubi Road 4 Singapore 408623 64909666
- 3. TC AutoClinic Add. 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
- 4. Tan Chong Motor Sales Add. 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
- 5. Tan Chong Motor Sales Add. 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

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](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: NA

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).

0500610519

TAN CHONG CREDIT PTE LTD  
 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 589622 ANSP-MOTOR  
 Underwritten by AIG Asla Pacific Insurance Pte. Ltd.

AIG Asla Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

78 Shenton Way #07-16 AIG Building S078120 | T: +65 6419 3000 | [www.aig.com.sg](http://www.aig.com.sg)

AIG Asla Pacific Insurance Pte. Ltd.

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**24-HOUR AIG AUTO HOTLINE: +65 6338 6200**

**IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES.**

**What can the 24-hour AIG Auto Emergency Hotline provide for you?**

- Immediate assistance after an accident
- Emergency breakdown service
- Towing service (accident or non-accident related)
- Advice on Motor Claims procedures
- Medical Referral Assistance

**If no one is injured in the accident:**

- You are not required to make any police report.
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s).
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.

**If the accident involves injuries or damage to government property & vehicles, foreign registered vehicles or non-injury hit & run case:**

- Report the accident to the police, providing full details of the circumstances of the accident.
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s), if applicable.
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.

**What should I do in the event of an accident?**

- Keep calm and move your car to a safe place.
- Do not admit or discuss fault or blame with the other party(ies).
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.
- Submit Writ/Summons/Correspondences from third party(ies) to AIG immediately.

**LOSS OF USE CAR REPLACEMENT BENEFIT**

**Applicable only if this benefit is included in your motor insurance. Please refer to your Policy Schedule for details. Policy terms and conditions apply. Please call our customer service hotline number (65) 6419-3000 for assistance.**

The Certificate of Insurance (CI) should be produced without demand when collecting the Rental Car and the Rental Car Company reserves the right to verify the identity of the holder. The CI is the property of AIG and its use is subject to the terms and conditions contained in the Loss of Use Endorsement under the policy issued to the policyholder.

**Steps to activate Loss of Use Car Replacement Benefit and Important Information**

1. To activate your loss of use car replacement, please contact the Rental Car Company (listed below) after filing/reporting your accident claim.
2. Your rental car will be made available within 5 working hours of activation with the Rental Car Company.
3. At the time of collection of the Rental Car, the original insurance policy and schedule issued by AIG, a copy of the Accident Report from Tan Chong Motor Sales must be produced.
4. The number of days is based on the period your vehicle is in the repair workshop unless the number of days of loss of use entitlement is stated in the Policy.
5. Rental cars are strictly for use in Singapore only.
6. Extension of rental beyond repair period approved by AIG surveyor will be chargeable by the Rental Car Company on per day basis.
7. Upgrade of Rental Car is available upon request subject to additional charges by the Rental Car Company.

**Rental Car Company: DownTown Travel Services Pte Ltd**

**Activation Hotline: 63341700**

**19 Lorong 8 Toa Payoh Singapore 319255**

**Monday to Friday: 9am to 6pm Saturday (Half Day): 9am to 3pm**

\*The Rental Car Company's Terms & Conditions apply (i.e., refundable security deposit, excess liability for the Rental Car, Collision Damage Waiver, etc).

**IMPORTANT NOTICE**

If you sell your motor vehicle, this Notice is **IMPORTANT** and **MUST** be complied with. Policyholders are hereby warned that under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.99), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

The Policyholder is further warned that on the sale of a motor vehicle, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.88).

This Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agrees to cover the new owner, they will issue a new Certificate of Insurance in the new owner's name. The premium chargeable may vary according to the new owner's profile.

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**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **S0068794D**  
Name: **ONG MENG YI**

Birth Date: **23 Nov 1953**  
Issue Date: **08 Jan 2003**




000095709E

**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 | 09 Feb 1979 |

**Fuel Up to the Power of 2!**



Expiry date 31 Jan 2006. Terms & Conditions Apply.


Licence No: **S0068794D**




NP 428A



1390323



NRIC No. S0068794D



Blood Group: A+      Date of issue: 30-10-1993

Address:  
9 BEDOK RIA CRESCENT  
SINGAPORE 1648

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REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0068794D



Name

ONG MENG YI



王孟儀

Race

CHINESE

Date of Birth

23-11-1953

Sex

F

Country of Birth

SINGAPORE



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo

