SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 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.
- nort to the in ont to the ort at the

Action of Accident 27/12/2019 13:35 Exact Location Of Accident SLIP RD ENTERING HOLLAND ROAD (NEAR THE ESTORIL) Exact Location Of Accident SLIP RD ENTERING HOLLAND ROAD (NEAR THE ESTORIL) Exact Location Of Accident SLIP RD ENTERING HOLLAND ROAD (NEAR THE ESTORIL) Exact Location Number SLIK832BC Insured/Policyholder Idense Of Registered Owner NG CHEONG GAY CALVIN SIS20092H Idensil Address CALVINNGCG@GMAIL.COM Idensil Address CALVINNGCG@GMAIL.COM Idensil Address CALVINNGCG@GMAIL.COM Idensil Address CALVINNGCG@GMAIL.COM Idensil Address CT200H-1.8 (A) Idensil Addr	7. By the lodgement of this report to the insurers, you hereby conseaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available		
Action of Accident 27/12/2019 13:35 Exact Location Of Accident SLIP RD ENTERING HOLLAND ROAD (NEAR THE ESTORIL) Strate Location Of Accident SLIP RD ENTERING HOLLAND ROAD (NEAR THE ESTORIL) SINGAPORE PETAILS OF OWN VEHICLE		ACCIDENT STATEMENT		
Exact Location Of Accident Country/State of Loss SINGAPORE DETAILS OF OWN VEHICLE SLK8328C Insured/Policyholder SLK8328C Insured/Policyholder SIRIC NO S1520092H SIMBIA SERGE SERG	Date Of Report	28/12/2019 10:47		
SINGAPORE DETAILS OF OWN VEHICLE Vehicle Registration Number SLK8328C Vehicle Registration Number NG CHEONG GAY CALVIN VAME OF Registered Owner NG CHEONG GAY CALVIN VAME OF Registered Owner NG CHEONG GAY CALVIN VAME OF REGISTER OWNER NG COMPANDE NG (LOCAL) +65-98286318 Vehicle Particulars Vehicle Particulars Vehicle Particulars Vehicle Particulars Very ou claiming under your own insurance policy or repair to your vehicle? Vehicle Category PRIVATE CAR Vehicle Category PRIVATE CAR Vehicle Company Vame of Insurance Company Very Of Coverage COMPANDE NG NG GAY CALVIN Very Of Coverage COMPANDE NG NG GAY CALVIN Very Of Coverage COMPANDE NG NG GAY CALVIN Very Of Coverage COMPANDE NG NG CHEONG GAY CALVIN Very Of Coverage NG COMPANDE NG COVERNOR NG GAY CALVIN Very Of Coverage NG CHEONG GAY CALVIN Very Office of Cheong G	Date Of Accident	27/12/2019 13:35		
The second secon	Exact Location Of Accident	SLIP RD ENTERING HOLLAND ROAD (NEAR THE ESTORIL)		
SLK8328C Insured/Policyholder Name Of Registered Owner Name Of Insurance Company Name Of Insurance Company Name Of Insurance Company No Policy Number Number No Po	Country/State of Loss	SINGAPORE		
Insured/Policyholder Iden of Registered Owner Iden of Driver Iden of Registered Owner Iden of Re	DETAILS OF OWN VEHICLE			
Name Of Registered Owner NG CHEONG GAY CALVIN SIFECOMOPH SIRIC NO SIRIC N	Vehicle Registration Number	SLK8328C		
SIRIC No SIR	Insured/Policyholder			
Email Address CALVINNGCG@GMAIL.COM (LOCAL) +65-98286318 CITEDRATE Phone No CITEDRATE Phone CITEDRATE Phone No CITEDRATE Phone C	Name Of Registered Owner	NG CHEONG GAY CALVIN		
Mobile Phone No (LOCAL) +65-98286318 Meternative Phone No Office-98286318 Meternative Phone No Office-9828	NRIC No	S1520092H		
Alternative Phone No Vehicle Particulars Vanufacturer Vanufacturer Vanufacturer Vanufacturer Vare you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Vehicle Category Vanuer of Insurance Company Vanuer of Coverage CoMPREHENSIVE Fleet Policy No Policy Number Cover Note Number Veriver Vanue of Driver Vanuer of Dri	Email Address	CALVINNGCG@GMAIL.COM		
Wehicle Particulars Manufacturer Model CT200H-1.8 (A) Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Wehicle Category PRIVATE CAR Manurance Company Manurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. Cype Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number Driver Manue of Driver NG CHEONG GAY CALVIN SI520092H	Mobile Phone No	(LOCAL) +65-98286318		
Manufacturer Model CT200H-1.8 (A) CT200H-1.8	Alternative Phone No	Office-98286318		
Model CT200H-1.8 (A) Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR PRIVATE CAR Name of Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Relet Policy NO Policy Number Cover Note Number Cover Note Number Driver Name of Driver NG CHEONG GAY CALVIN SI520092H	Vehicle Particulars			
Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR Insurance Company Vame of Insurance Company Vame of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Cleet Policy NO 2100498332 Cover Note Number Cover Note Number Cover Note Number Driver Name of Driver NG CHEONG GAY CALVIN ST520092H	Manufacturer	LEXUS		
Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Yehicle Category PRIVATE CAR PRIVATE CAR AIG ASIA PACIFIC INSURANCE PTE. LTD. Yepe Of Coverage Coverage Cover Note Number Cover Note Number Driver Name of Driver NG CHEONG GAY CALVIN S1520092H	Model	CT200H-1.8 (A)		
or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR PRIVATE CAR Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number Poriver Name of Driver NG CHEONG GAY CALVIN NRIC No S1520092H	Exact Purpose for which vehicle was being used at time of accident			
Rehicle Category PRIVATE CAR	Are you claiming under your own insurance policy for repair to your vehicle?	YES		
Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Fleet Policy NO Policy Number 2100498332 Cover Note Number Driver Name of Driver NG CHEONG GAY CALVIN NRIC No S1520092H	If No, Please state action to be taken			
Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. Cype Of Coverage COMPREHENSIVE NO 2100498332 Cover Note Number Oriver Name of Driver NG CHEONG GAY CALVIN NRIC No S1520092H	Vehicle Category	PRIVATE CAR		
COMPREHENSIVE Fleet Policy NO Policy Number 2100498332 Cover Note Number Oriver Name of Driver NRIC No S1520092H COMPREHENSIVE NO	Insurance Company			
Fleet Policy Policy Number 2100498332 Cover Note Number Driver Name of Driver NRIC No S1520092H	Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.		
Policy Number 2100498332 Cover Note Number Driver Name of Driver NG CHEONG GAY CALVIN NRIC No S1520092H	Type Of Coverage	COMPREHENSIVE		
Cover Note Number Driver Name of Driver NRIC No S1520092H	Fleet Policy	NO		
Driver Name of Driver NG CHEONG GAY CALVIN NRIC No S1520092H	Policy Number	2100498332		
Name of Driver NG CHEONG GAY CALVIN NRIC No S1520092H	Cover Note Number			
NRIC No S1520092H	Driver			
	Name of Driver	NG CHEONG GAY CALVIN		
Date Of Birth 27/07/1962	NRIC No	S1520092H		
	Date Of Birth	27/07/1962		

INDOOR

26/08/1982

37 YEARS AND 4 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-98286318

Fax Number

Contact Number OFFICE-98286318

EMail Address CALVINNGCG@GMAIL.COM

61 MOUNT SINAI DRIVE #11-02 Address

Postcode 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 DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

NO

NO

1

NO

NO

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)

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 NO Was there any video captured by Car Camera? NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFB923E

Vehicle Make/Model/Colour LEXUS (CT200)

Details Of Properties MINOR SCRATCHES TO REAR RIGHT OF VEHILCE

PRIVATE CAR Vehicle Category Name of Driver JASLINE HENG

NRIC/Passport Number

Contact Number 97588228 Address Postcode

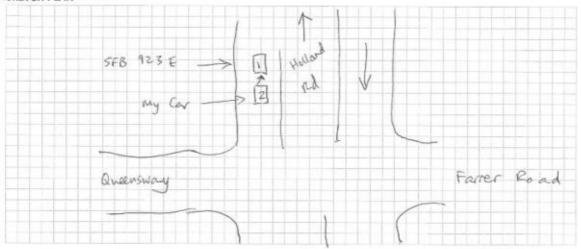
Insurance Company Name AIG Asia Pacific Insurance Pte. Ltd.

Nature Of Damage

No. Of Passenger (Including Driver) 2

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The	car in front of mine Jammed his brokes suddenly.	
	braked but contacted his right year end lightly	
	a only minor scratches to his car.	
	left front end of my car was damaged inclu	ding
	e fender, bonnet and left headlamp.	23
	ed of report.	

DECLARATION

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

Cally 28/12/19

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyhoider)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SKETCH PLAN

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.
- 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.
- 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.
- 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.
- 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:
 - 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:
 - 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.

Callyly 28/12/14

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 :

AIG

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: Ng Cheong Gory Calvin		
VEHICLE NUMBER	5LK 8328 C		
DATE/TIME OF ACCIDENT	:_ 27 Dec 19		
PLACE OF ACCIDENT	: Holland Road (New The Estovil)		
THIRD PARTY VEHICLE (IF ANY)	:_ SFB 923 E		
**********	安徽省大学公司大学大学的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作的工作,由于中华的工作。由于中华的工作,也可以由于中华的工作,也可以由于中,由于中华的工作,也可以由于中,由于中华的工作,也可以由于中,由于中华的工作,也可以由于中,由于中华的工作,也可以由于中华的工作,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于中,也可以由于他们也可以可以由于他们也可以由于他们也可以由于他们也可以也可以由于他们也可以由于他们也可以可以由于他们也可以由于他们也可以也可以也可以也可以也可以也可以也可以也可以也可以也可以也可以也可以也可以也		
WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT? Sin Ming to Home			
DID YOU DRINK ANY ALCOHOLIC THE ACCIDENT? IF YES, DID TH ANALYSER TEST ON YOU? IF YES,	C DRINKS BEFORE YOU DRIVE ON THE DAY OF HE TRAFFIC POLICE CONDUCT ANY BREATHE-, WHAT IS THE RESULT?		
TO ALL VEHICLES INVOLVED?	on and the extensiveness of the damages or right of other vehicle de damaged including left headlamp.		
WERE YOU OR YOUR PASSENGE WERE YOU TAKEN TO THE TRAFF	ER/S INJURED? IF INJURED, WHICH HOSPITAL? FIC POLICE FOR INVESTIGATION?		
Callyly Ng Cheong Gay Calvin Name:			

I Affirmed The Above Information Is Given To My Best Knowledge,

AIG Asia Pacific Insurance Pte. Ltd. AIG Building 78 Shenton Way #07-16 Singapore 079120 Tel: 6419 3000



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Ng Cheong Gay Calvin Period of Insurance

: 20 Jan 2019 To 19 Jan 2020

Engine No.

: 2ZR6486593

Chassis No.

: JTHKD5BH902248263

Vehicle No.

: SLK8328C

Policy No.

: 2100498332-02

Endorsement No. **Issued Date**

: 18 Jan 2019

ABOUT THE COVER

Make/Model

: LEXUS CT 200H

Engine Capacity/Tonnage : 1,798.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2017

Insuring with COE/PARF : Yes

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 person who is driving on the Policyholder's order or with his/her personalizer.
This Policy will indemnify the Policyholder or any authorised driver only if he/afte meets the opening age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexpensenced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than years' driving expensence.

Age Condition

: All Age Condition

Limitation as to use* :

Lee only for social, deniestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, criving tuition, driving feet, racing, pron-making, reliability brief or speed-lesting, the carriage of goods other than samples in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional -

* Limitations randored inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cep. 188) and Section 95 of the Road Transport Act, 1987 (Melicysia), 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 - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

Ng Cheong Gay Calvin - \$800 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be cented out by one of our Authorised Repairers, Within the first 3 years of the first registration of the Vehicle in Singapora. You have the option of having the accident repairs cented out at the Sole Agent's workshop.

For solver Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotiline at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.com.sg or AIG SQ Michile App. Simply search and download *AIG SG* from Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

Www hereby certify that the golicy to which this Gerthosks of insurance relates is issued in accompanion with the provisions of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Party Risks and Companisation) Act (Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189). Part IV of the Motor Vehicles (Third Risks and Cap. 189).

0503982000

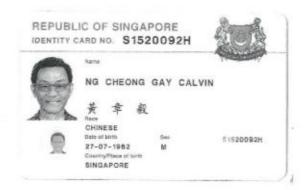
KHC HOLDINGS PTE, LTO.

389A BALESTIER ROAD

SINGAPORE 329796

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE Tout KING





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

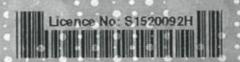
PASS DATE

Class 3

Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg

26 Aug 1982

NP 428A







Licence Number: S 1 5 2 0 0 9 2 H

NG CHEONG GAY CALVIN

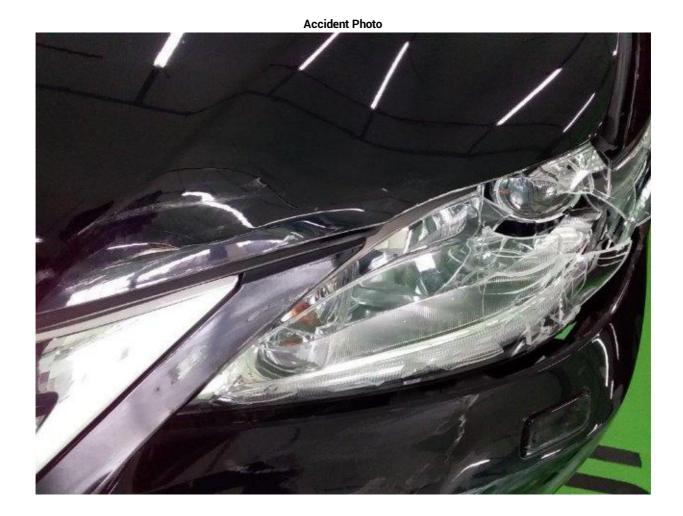
Birth Date 27 Jul 1962
Issue Date: 31 May 2004

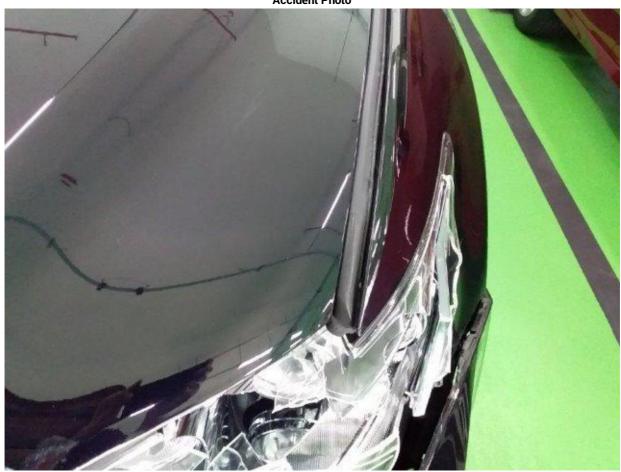












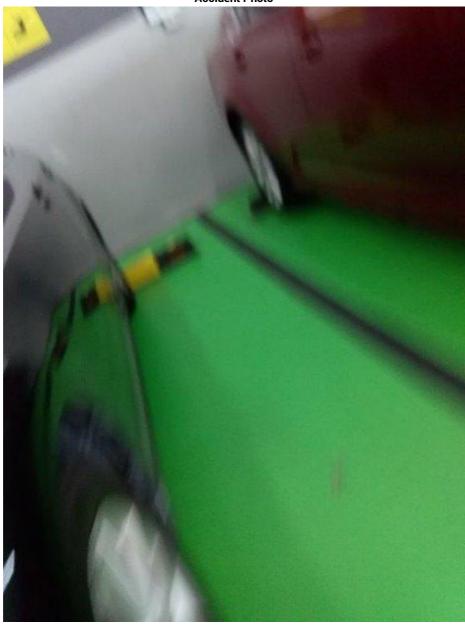












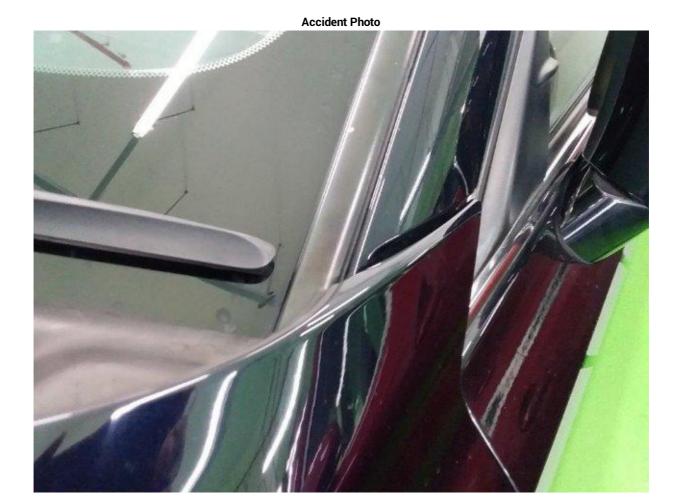














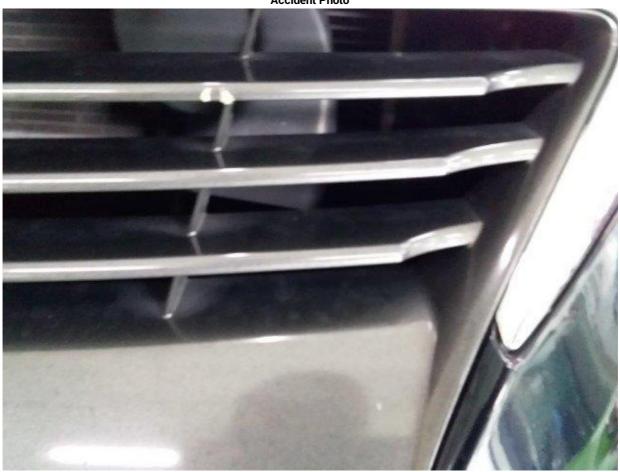
















Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo

