

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	20/01/2020 18:08
Date Of Accident	19/01/2020 18:00
Exact Location Of Accident	CHANGI AIRPORT TERMINAL 1 ARRIVED PICK UP @DOOR 11
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC5266Y
Insured/Policyholder	
Name Of Registered Owner	TAN KHENG BENG
NRIC No	S6809660Z
Email Address	KAREN LUM@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96506186
Alternative Phone No	Office-96506186

Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER-2.0 I-L CVT AWD SR (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	1800079322-01
Cover Note Number	

Driver

Name of Driver	LUM KAH PECK
NRIC No	S7002553A
Date Of Birth	21/01/1970
Occupation	INDOOR
Date Of Driving Pass	29/10/1996
Driving Experience	23 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96331490
Fax Number	
Contact Number	
E-Mail Address	KARENLUM@YAHOO.COM
Address	APT BLK 181 STIRLING ROAD #11-216
Postcode	140181
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	Name: : HAZEL TAN 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

PLEASE REFER TO 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	SLL1193P
Vehicle Make/Model/Colour	MITSUBISHI
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	TAN POH KEAT
NRIC/Passport Number	S1561428E
Contact Number	90118625
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

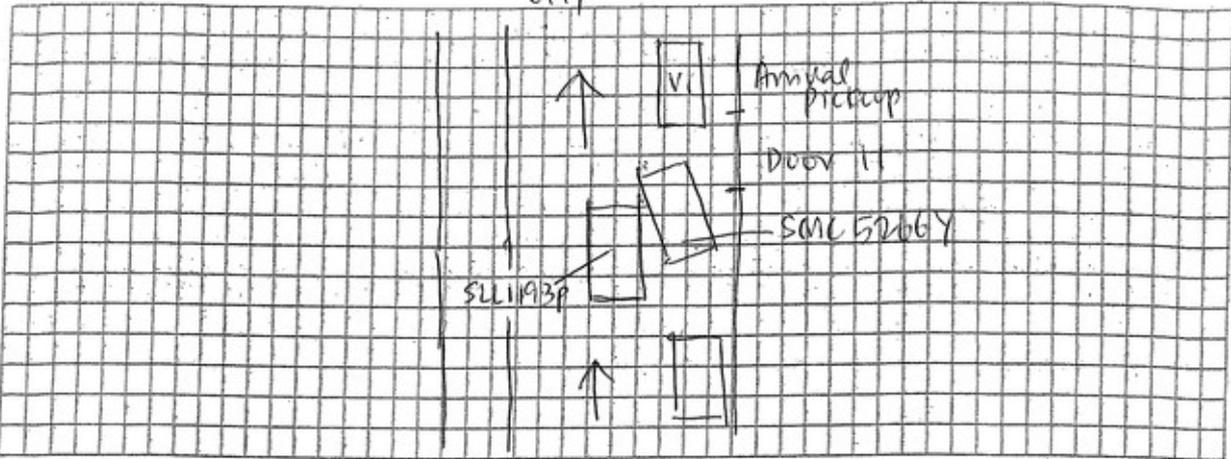
SINGAPORE ACCIDENT STATEMENT

OD Recovery

Accident Date & Time: 19/1/2020 6pm		
Accident Location: Changi Airport Terminal 1 Arrival pickup (door 11)		
Vehicle Number: SMC 5266 Y	Make/Model: Subaru Forester	
Policy Holder Name: Tan Kheng Beng		
NRIC/ROC: S68096607	Mobile: 96506186	
Email: karenlum@yahoo.com		
Insurance Company: AIG		
Policy Number: 1800079322-01	Policy Period: 6/7/19 - 5/7/2020	
Policy Coverage: Comprehensive (✓)	Third Party ()	Third Party Fire & Theft ()
State Action Taken: Claim Own Policy (✓)	Claim Third Party ()	Reporting Only ()
Driver Name: Lum Kah Peck		
NRIC: S700253A	Mobile: 96331490	
Date Of Birth: 21/1/1970	Driving Pass Date: 8/10/2003-1996	
Gender: Male () Female (✓)	Occupation: Indoor () Outdoor () N/A	
Address: B1K 181 Stirling Road #11-216 S (140181)		
Is driver an employee of the insured's company: Yes () No (✓)		
If No, Relationship of the driver with the insured:		
Owner () Spouse (✓) Friend () Relative () Children () Sibling () Hirer ()		
Weather Conditions: Clear (✓) Raining () Others ()		
Road Surface: Dry (✓) Wet () Others ()		
Was any foreign vehicle involved in this accident? Yes () No (✓)		
Was anybody injured in the Accident? Yes () No (✓)		
Was there any video captured by Car Camera? Yes (✓) No ()		
Number of Passenger (Including Driver): 2		
1) Hazel Tan (2)	3)	4)
Was the accident reported to the police? Yes () No (✓) "attach Police Report, if any"		
3 rd Party Name: Tan Poh Keat		
Vehicle Number: SLL 1193 P	Make & Model: Mitsubishi	
NRIC: S1561428E	Mobile No: 90118625	
Witness Details (if any):		
NAME: Hazel Tan	NRIC: T0700540C	Mobile No: 94504462
Other remark: if any		

SKETCH PLAN

CITY



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was slowly exiting from the pick up area and the ~~vehicle~~ vehicle SL1193P crashed into my front left. Rear window cleaned when checked and SL1193P was traveling fast and did not stop when I tried to make my way out. There was a vehicle ahead of me so I had to move out slowly.

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.

<input checked="" type="checkbox"/>	- Reporting Only
<input checked="" type="checkbox"/>	- Claim OD
<input type="checkbox"/>	- Claim TP
<input type="checkbox"/>	- Claim OD/ TP at other workshop

DECLARATION

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

Policyholder's signature
Date & Time

[Signature]
Driver's Signature
(if driver not the policyholder)
Date & Time 20/11/2020

[Signature]
Reporting Centre Personnel's Signature
Name: Dennis Leona
Nric/Fin No.



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:

Kam
20/11/2010

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

Denisa Hoang

Reporting Centre Personnel's Signature
Name: *Denisa Hoang*
NRIC/FIN No.:



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7002553A



Name
LUM KAH PECK

林嘉壁

Race
CHINESE

Date of Birth
21-01-1970

Sex
F

Country of Birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7002553A**

Name
LUM KAH PECK

Birth Date: **21 Jan 1970**

Issue Date: **05 Nov 2003**




For Accident Claim use only

1200255



NRIC No. **S7002553A**



Blood Group: **O+** Date of issue: **18-09-1993**

APT BLK 181 STIRLING ROAD #11-218
SINGAPORE 140181
NRIC No: **S7002553A** Date: **08-05-2003** No: **4673936**

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Oct 1996

Licence No: **S7002553A**



NP 428A



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tan Kheng Beng
Period of Insurance : 06 Jul 2019 To 05 Jul 2020
Engine No. : FB20YE18551
Chassis No. : JF1S5JC5JG111071

Vehicle No. : SMC5266Y
Policy No. : 1800079322-01
Endorsement No. :
Issued Date : 19 Jun 2019

ABOUT THE COVER

Make/Model : SUBARU Forester 2.0i-L
Engine Capacity/Tonnage : 1,995.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
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 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.

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 : 40 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 8 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 - \$800 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Tan Kheng Beng - \$800 (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 6200. 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: DBS BANK LTD

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, 1959 (Malaysia).

0500619210

TAN CHONG CREDIT SUBARU-JAN
911 BUKIT TIMAH ROAD
SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Manile

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSPIC

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



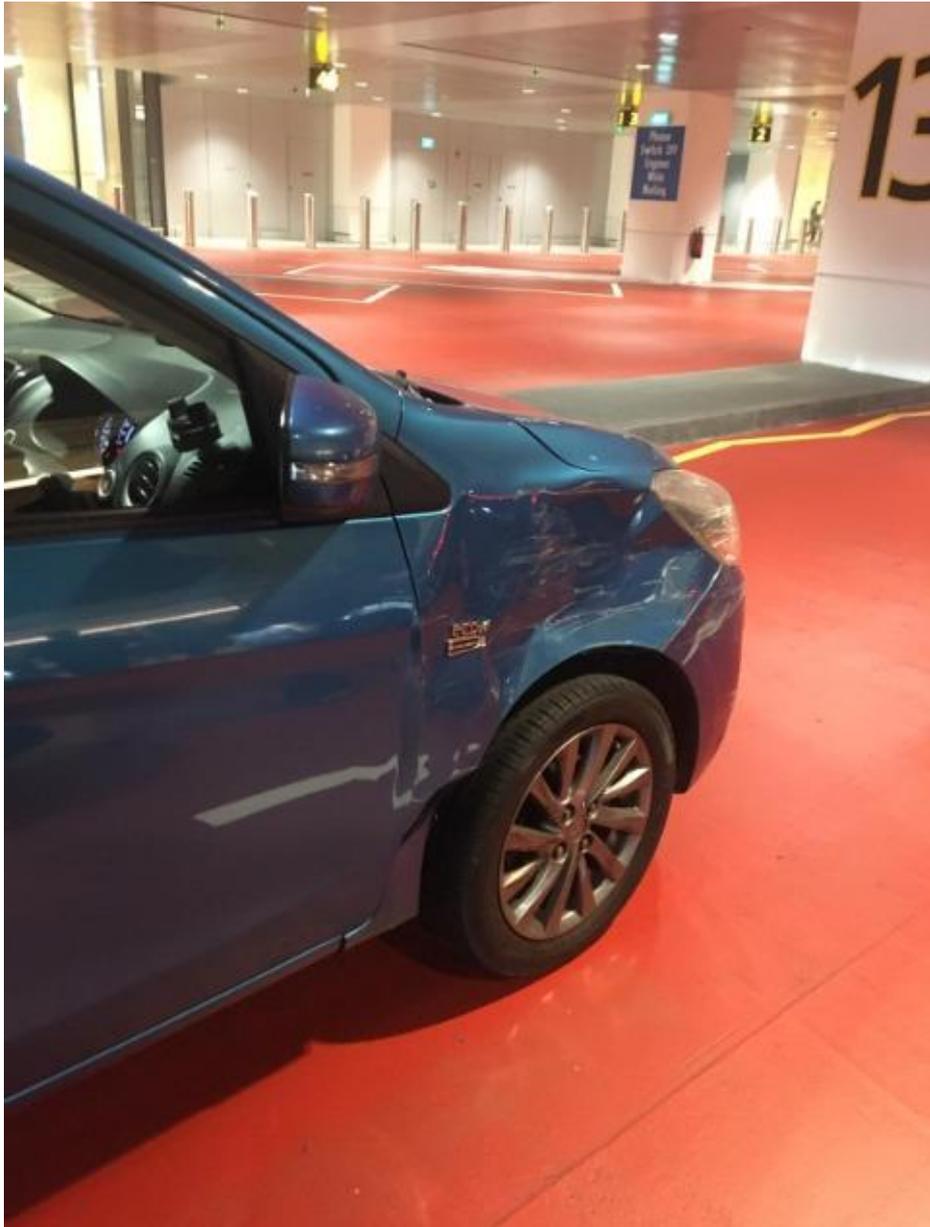
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License



Identification Card



Land Transport Authority



VOCATIONAL LICENCE

Licence No : 81561428E

Name : TAN POH KEAT

Please visit www.lta.gov.sg to check the status of this vocational licence