## SINGAPORE ACCIDENT STATEMENT

## **IMPORTANT NOTICE**

**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.

7. By the lodgement of this report to the insurers, you hereby conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	21/01/2020 12:30
Date Of Accident	20/01/2020 14:35
Exact Location Of Accident	TPE BEF LORONG HALUS EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMH8028Y
Insured/Policyholder	
Name Of Registered Owner	SU HAI LOON
NRIC No	S1308794F
Email Address	GOHLF@ACPL.COM.SG
Mobile Phone No	(LOCAL) +65-83398228
Alternative Phone No	Home-83398228
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ECLIPSE CROSS-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	1900002313
Cover Note Number	
Driver	
Name of Driver	GOH LUAN FONG
NRIC No	S1203384B
Date Of Birth	10/07/1956
Occupation	INDOOR

22/12/1976

43 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-83398228

Fax Number

**Contact Number** 

EMail Address GOHLF@ACPL.COM.SG

Address BLK 941 TAMPINES AVENUE 5

#10-233 SINGAPORE

Postcode 520941
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 COLLISION - CHANGE/CROSS LANE

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

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

## **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### **Circumstances of Accident**

WHILE I WAS TRAVELLING STRAIGHT ALONG TPE. SUDDEN I FELT AN IMPACT ON MY LEFT SIDE. AFTER I DROVE TO PARK AHEAD TO CLEAR OTHER VEHICLES PASSING BY. ALIGHTING FROM MY CAR TO INSPECT AND REVEALED THAT FROM THE FRONT LEFT SIDE UNTIL THE REAR HAVE DAMAGED. THE VEHICLE "B" SMR5626M DRIVER SAID THAT HE NEEDED TO REPORT BACK TO HIS RENTAL COMPANY. BOTH OF US DRIVER WERE NOT INJURED FROM THE ACCIDENT.

## 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 SMR5626M

Vehicle Make/Model/Colour HYUNDAI IONIQ WHITE

**Details Of Properties** 

Vehicle Category PRIVATE HIRE

Name of Driver NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

KOH BEE KUAN S6811694E

93685059

### SKETCH PLAN

### **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
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- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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:

21/01/2020 @ 1/30489.

GIARMC SketchPlanForm\_V3

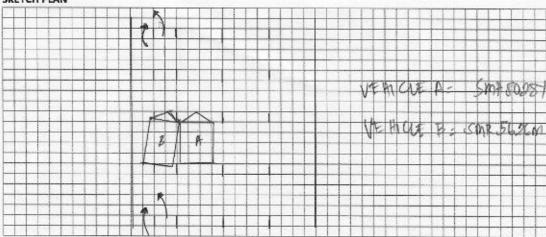
Driver's Signature (If driver is not the policyholder) Date & Time:

2191 Ign 2020 @1130HRs. Reporting Centre Personner's Signature

Name:

NRIC/FIN No.:

## SKETCH PLAN



## **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

WHILE I WAS TRAVELLING SIRA-1GHT	ALONG TPE, SUDDEN.
I FELT AN IMPACT ON MELETT	SUDE, AFTER I DROVE
TO PARK AHEAD - TO CLEAR	
84. mg	
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BOTH OF US DELVER WERE NOT	
ACCIDENT.	
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We will also the second of the	
	N.

# DECLARATION

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

Policyholder's Signature

Date & Time:

H | O + | 90 20 @ 1/304Ps . Date & Time:

GIARMC SketchPlanForm\_V3

2181 JAN 2020

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



# CERTIFICATE OF INSURANCE

# CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Su Hai Loon

Period of Insurance

: 10 Jan 2019 To 09 Jan 2021

Engine No.

: 4B40GA0612

Chassis No.

: JMAXTGK1WJZ004584

Vehicle No.

: SMH8028Y : 1900002313

Policy No.

Endorsement No.

Issued Date

: 28 Jan 2019

## ABOUT THE COVER

Make/Model

: MITSUBISHI Eclipse Cross 1.5

Engine Capacity/Tonnage : 1,499.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019

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 permission.
 This Policy will indemnify the Policyholder or any authorised driver only if helphe meets the specified ege condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") # You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 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 him or reward, chiving bution, driving test, resing, 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 inoporative by Section 8 of the Motor Vehicles (Third-Party Risks and Companies) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Miskyela), are not to be included under these headings.

#### EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Thaft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Su Hai Loon - \$800 (Own Damage)

# APPROVED REPORTING CENTRES/AUTHORISED REPAIRES (FOR CLAIMS RELATED REPAIRS

1.Cycle & Cerriage Authorised Service Centre (For accident reporting & windscreen dalm only). Add: 600 Sin Wing Ave Singspore 575733 89328000 2.Cycle & Cerriage Authorised Service Centre (For accident reporting & windscrean claim only). Add: 20 Leng Kee Rd Singspore 168094 64703888 3.Cycle & Centriage Authorised Service Centre (For accident reporting & windscrean claim only). Add: 300 Ubl Rd 3 Singspore 409950 67461000 4.Cycle & Centrege Body & Paint Centre. Add: 209 Pandan Gardens Singspore 609339 65684601.

For other Approved Reporting CentreviAlG Authorised Repairers, please contact our 24-hour accident emergency hotins at +65 6338 6200. Alternatively, you may refer to AIG website www.eig.com.ag 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 Street Provisions of the Motor Vehicles (Third Party Risks) and Motor Vehicles (Third Party Risks) Rules, 1968 (Malaysia).

0504623206

FULCOMICP2 • JN

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408817

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Prile

AIG Asia Pacific Insurance Pts. Ltd. AUTHORISED REPRESENTATIVE

100

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1203384B



GOH LUAN FONG



10-07-1956 SINGAPORE

FOR C&C USE ON

REPUBLIC

Nome Number: S1203384B

GOH LUAN FONG

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1308794F





SU HAI LOON

CHINESE

15-04-1958 SINGAPORE

FOR C&C USE ONLY



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

FOR C&C USE ONLY



S1203384B

APT BLK 941 TAMPINES AVENUE 5 #10-233 GAPORE 520941





FOR C&C USE ONLY

02-02-1984

APT BLK 941 TAMPINES AVENUE 5 #10 - 233 SINGAPORE 520841 NEBC NO: \$1308784F Date: 07 - 06-

Date: 07-06-2000 No: 3779366

1646884

# **Accident Photo**

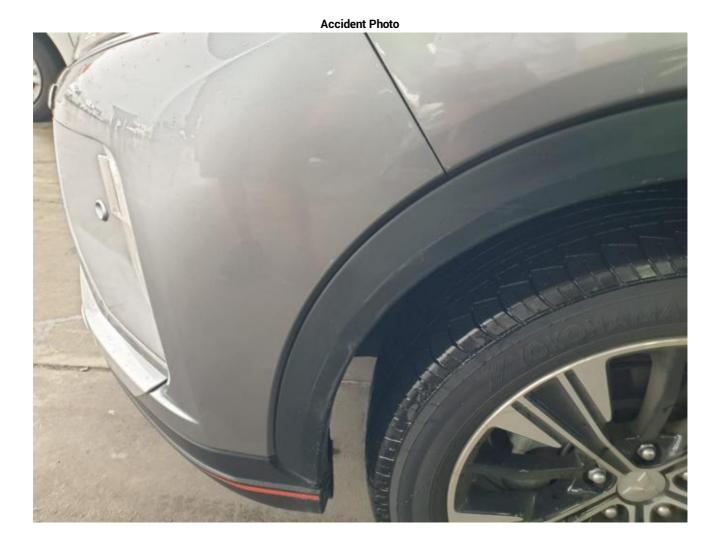


# **Accident Photo**



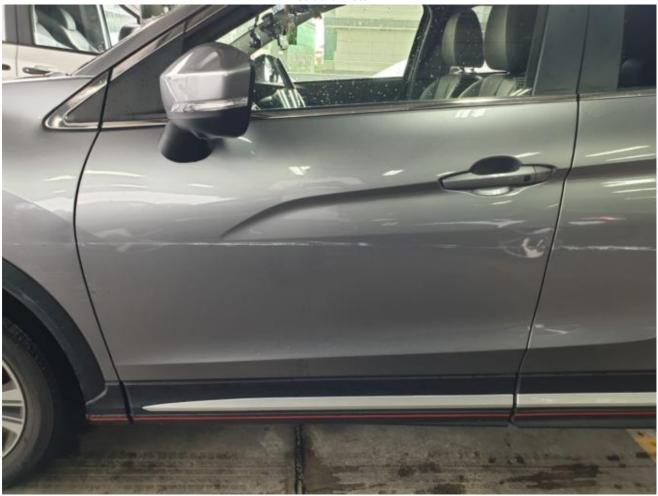












# **Accident Photo**







