MMIE20019948 / Motor Image Enterprises Pte Ltd - Toa Payoh ENTRY DATE & TIME: 13/02/2020 14:41

SUBMITTED BY: Daniel A Jude

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 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 consent to the archiving of this report at the centre and to copies of the report being made available

	ACCIDENT STATEMENT
Date Of Report	13/02/2020 14:41
Date Of Accident	13/02/2020 14.41
Exact Location Of Accident	JOO CHIAT ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLW6695S
-	2FM00302
Insured/Policyholder	
Name Of Registered Owner	TAN LAY SEE
NRIC No	S1578156D
Email Address	HOOSIERDOME@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96489283
Alternative Phone No	Office-NOPHONE
Vehicle Particulars	
Manufacturer	SUBARU
Model	XV-2.0 I-S EYESIGHT AWD CVT (A)
Exact Purpose for which vehicle was being used at ime of accident	PERSONAL / LEISURE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f 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.
Гуре Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800020283-01
Cover Note Number	
Driver	
Name of Driver	TOH SZE CHIN
NRIC No	S1578173D
Date Of Birth	17/06/1963

INDOOR

27/07/1981

38 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97828875

Fax Number

Contact Number

EMail Address HOOSIERDOME@GMAIL.COM

Address APT BLK 426 SERANGOON AVENUE 1 #03-209

Postcode 550426

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

insurance company of briver's own verticle

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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?

Was any injured conveyed to hospital by

ambulance?

NO YES

NO

NO

Was any other material or property damaged?

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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO ATTACHED DOCUMENTS AND VIDEO FOOTAGE

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJT5522D

Vehicle Make/Model/Colour TOYOTA ALTIS LIGHT BLUE

Details Of Properties FRONT PORTION

Vehicle Category PRIVATE CAR

Name of Driver KENNY

NRIC/Passport Number

Contact Number

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN		
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	REVERSED BACKWARDS	
	+ + + -	
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	at a parking lot on the	
a call to my wif	e. After I realized th	at man wife had
	phone in the car, I re	
get out of the	parking lot. There	were no vehicle
behind me whe	n' I stopped the car	, and I had
	the location for less-	
or so.		
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to bump into the	e front of SITSI	22D.
* Pleasen Fofor	to the video footage	attached
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	* VEH A: SLW 669	5 S
	* VEH B ! SOT 55	
	* 1011 13 . 30 30	
		Ω
DECLARATION I/We declare the foregoing particular		
	- West and	MM
Policyholder's Signature	X Driver's Signature	Reporting Centre Description
Date & Time:	(If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: DANIEL JUDE NRIC/FIN NO.: SXXXX 51 810

SKETCH PLAN

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- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. 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)

Sofas-a

Date & Time:

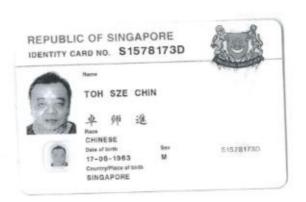
Reporting Centre Personnel's Signature Name: DONIEC JUDE

NRICETN NO.: SXXXX 518D











CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tan Lay See

 Period of Insurance
 : 27 Feb 2019 To 26 Feb 2020

 Engine No.
 : FB20YC30929

Chassis No.

: JF1GT7KL5JG027810

Vehicle No.

: SLW6695S

Policy No.

: 1800020283-01

Endorsement No. Issued Date

: 10 Jan 2019

ABOUT THE COVER

Make/Model

: SUBARU XV 2.0I

Engine Capacity/Tonnage: 1,995.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2018 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 he/ahe meets the specified age condition.

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

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 hitre or reward, driving fusion, driving pass, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with factor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 85 of the Road Transport Act, 1967 (Melaysia), 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

Named Driver and Excess (whore applicable)

Tan Lay See - \$800 (Own Damage)

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

1.Motor Image Enterprises Pte Ltd. Add: 19 Lorong fl Yea Payoh Singapore 319255 54170100

For other Approved Reporting Centres/AIG Authorised Repairses, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.ag or AIG SQ Mobile App. Simply search and download "AIG SQ" from Tunes or Google Play.

IMPORTANT NOTES

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

If 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 (Mislaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500019230

TAN CHONG CREDIT SUBARU-FLK

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

































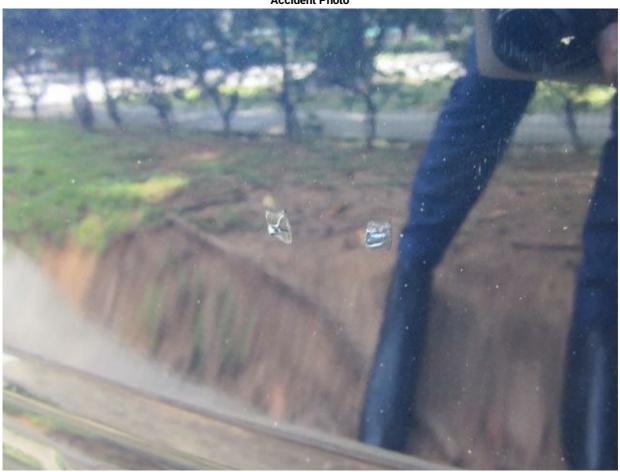


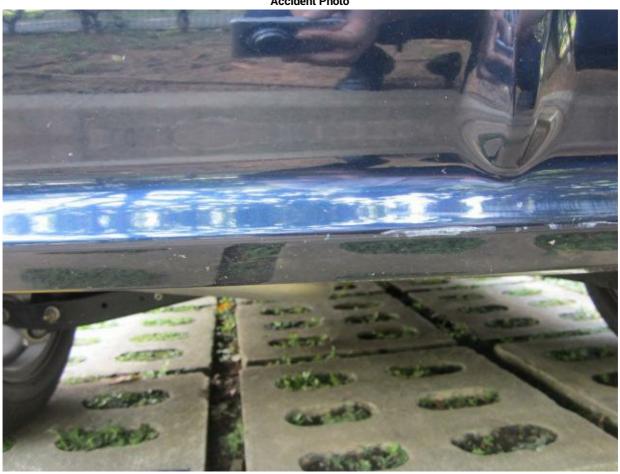




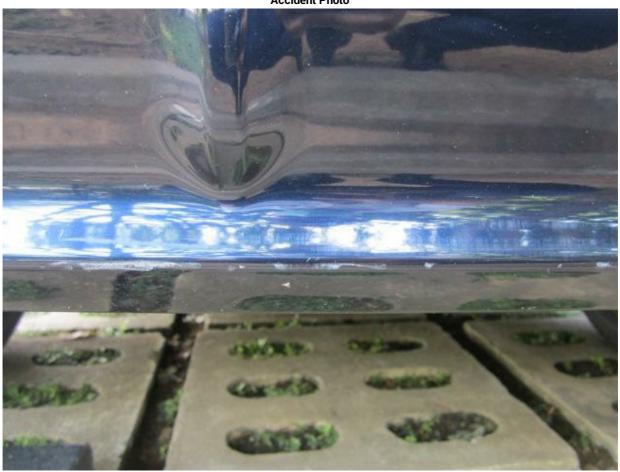








Accident Photo





Accident Photo















