

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	21/03/2020 14:19
Date Of Accident	20/03/2020 16:45
Exact Location Of Accident	T-JUNCTION ON SEMBAWANG ROAD & MANDAI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC2977Y
Insured/Policyholder	
Name Of Registered Owner	TONG BEE CONSTRUCTION PTE LTD
Co Reg No	199004298Z
Email Address	GOHCHANGHEE@GMAIL.COM
Mobile Phone No	
Alternative Phone No	Office-96758058

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	TRAVELING TO DINNER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If 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.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700039955-02
Cover Note Number	

Driver

Name of Driver	GOH CHANG HEE
NRIC No	S9313571G
Date Of Birth	13/04/1993
Occupation	OUTDOOR
Date Of Driving Pass	03/09/2013
Driving Experience	6 YEARS AND 6 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96758058
Fax Number	
Contact Number	
E-Mail Address	GOHCHANGHEE@GMAIL.COM
Address	42 SPRING SIDE DRIVE
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
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?	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

REFER ATTCHMENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Sketch Plan

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**.
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. 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:

21/03/2020
12:13

For:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

21/03/2020
12:13

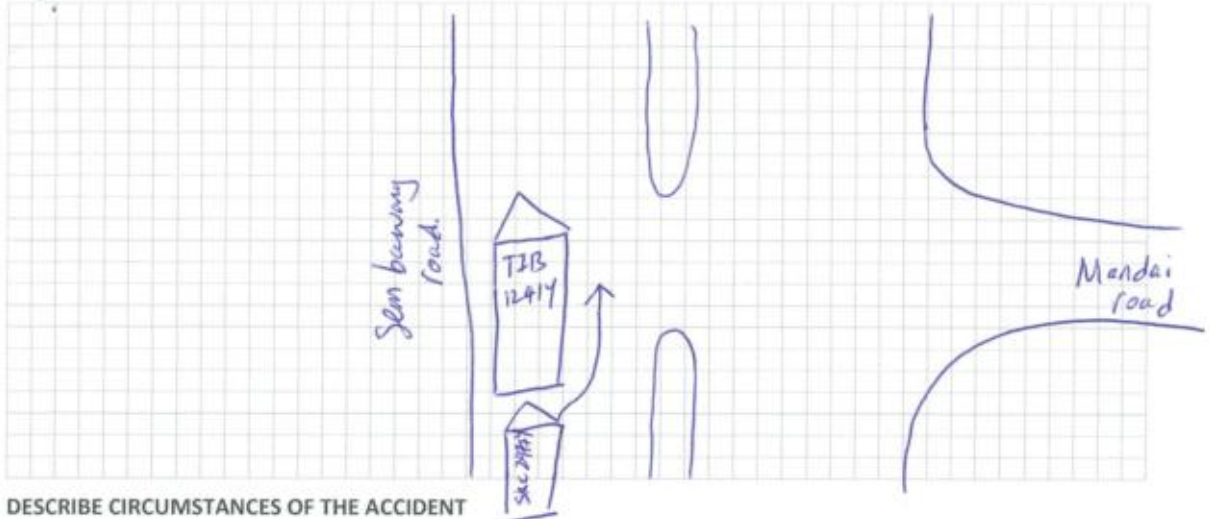
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Name: NG CHW SEN
NRIC/FIN No.: S800985C

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/05/2020 4:30pm, I was in Stc 29774, driving along Sembawang road (city bound). Driving on lane 3 and As I approach Mandai road Junction, I attempt to overtake bus (TIB 12414)

It was then that my sd mirror hit the bus.

DECLARATION

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

Policyholder's Signature
 Date & Time: 21/05/2020 12:13

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 21/05/2020 12:13

Reporting Centre Personnel's Signature
 Name: NG CHIN JEN
 NRIC/FIN No.: S802955C

GIARMC SketchPlanForm_V3

Common Statement



AIG Asia Pacific Insurance Pte. Ltd.
78 Shenton Way
#07-16
AIG Building
Singapore 079120
Co.Reg.No.201009404M

Policy/Reference No. 1700039955-02

04 Jul 2019

Tong Bee Construction Pte Ltd
37 Tannery Lane
#07-01 Tannery House
SINGAPORE 347790

Dear Tong Bee Construction Pte Ltd

Your Policy Has Been Renewed

We are pleased to inform you that your CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE has been renewed and details of your policy are below:

Policy number : 1700039955-02
Effective date : 10 Aug 2019
Expiry date : 09 Aug 2020

It is important that you review the enclosed policy documents to verify that all the information in these documents is accurate. If you wish to update us on any changes, please contact us.

For More Information

If you require more information about your policy, please contact our customer service representatives Monday through Friday between 9am to 5pm at +65 6419 3000. Alternatively, you can send us an email at www.aig.sg.

Thank you for your support. We look forward to serving you in all your general insurance needs.

Yours sincerely

Bucha Manik
Head of Individual Personal Insurance

PS: You can now enjoy round-the-clock access to selected AIG products and services with our easy-to-use Apple or Android smartphone app. Purchase new policies, renew your policies, access claims support or receive emergency assistance for motor and travel, anytime, 24-hours a day. Your AIG Mobile App can be downloaded for free at iTunes or Google Play.

Product underwritten by AIG Asia Pacific Insurance Pte. Ltd. Copyright © 2016 AIG Asia Pacific Insurance Pte. Ltd.

1922563748/AC4

Common Statement



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Tong Bee Construction Pte Ltd
Period of Insurance : 10 Aug 2019 To 09 Aug 2020
Engine No. : 4A91AN2493
Chassis No. : JMYSRCY2ABU001785

Vehicle No. : SKC2977Y
Policy No. : 1700039955-02
Endorsement No. :
Issued Date : 04 Jul 2019

ABOUT THE COVER

Make/Model : MITSUBISHI LANCER EX 1.5 MIVEC GLS
Engine Capacity/Tonnage : 1,499.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2011
Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

Any person who is driving on the Policyholder's order or with their 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" ("YIDR") 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), 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

1. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159024 64708888

3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408550 67461000

4. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65584501

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: OCBC Bank Ltd

I/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).

0500722050

C&C FULCO-CORPORATE
 22 UBI ROAD 4 FULCO BUILDING
 SINGAPORE 408617 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Mobile

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSCNFY

7B Shenton Way #07-16 AIG Building, S079120 | T: +65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.

Common Statement



POLICY SCHEDULE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Policy No. : 1700039955-02

Period of Insurance : 10 Aug 2019 to 09 Aug 2020

Issued Date : 04 Jul 2019

ABOUT THE POLICYHOLDER

Name of Policyholder : Tong Bee Construction Pte Ltd
 Address : 37 Tannery Lane
 #07-01 Tannery House
 SINGAPORE 347790
 Occupation/Nature of Business : Construction

ABOUT THE VEHICLE

Registration No. : SKC2977Y Engine Capacity/Tonnage : 1,499.00 CC
 Chassis No. : JMYSRCY2ABU001785 Engine No. : 4A91AN2493
 Seating Capacity : 5 First Year of Registration : 2011 Body Type : Sedan
 Make/Model : MITSUBISHI LANCER EX 1.5 MIVEC GLS
 Hire Purchase Company/Employer's Loan : OCBC Bank Ltd

ABOUT THE COVER

Sum Insured : Market Value Off Peak Car : No
 Driver Restriction : NA Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive :

Any person who is driving on the Policyholder's order or with their 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" ("YIDR") 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.

Other Key Policy Benefits :

Act of God, Fixture and Accessories (Cosmetic) - \$5000, Dealer + AIG Authorized Workshops, PA Insured - \$100000, Loss of Use 1500cc - 1600cc, PA to Authorised Driver / Unnamed Passengers - \$10000, Strike, Riots and Civil Commotions, Solar Film - \$1150, In-Car Camera Excess Waiver

EXCESS

Section 1
 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0
 Section 2
 Property Damage - \$0
 Windscreen : \$100

PREMIUM

Premium	: \$	1,210.30
GST (7%)	: \$	84.72
Total	: \$	1,295.02

Your Premium includes the following discount(s):
 Loyalty Discount - 5.00%, No Claim Discount - 50%

**TAX INVOICE**

GST REGISTRATION NO. : 201009404M

Tong Bee Construction Pte Ltd 37 Tannery Lane #07-01 Tannery House SINGAPORE 347790	TAX INVOICE NO. : D19RN1493679
	DATE : 04 Jul 2019

PARTICULARS	AMOUNT
PREMIUM ON CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE	\$1,210.30
AIG Asia Pacific Insurance Pte. Ltd. POLICY NO.: 1700039955-02 ENDT_NO.: GST (7%)	\$84.72
TOTAL DUE	\$1,295.02
	E.&O.E

IF PAYMENT HAS ALREADY BEEN MADE, PLEASE IGNORE THIS TAX INVOICE.**X Tear along dotted line and attach with your cheque payment X**

Please return the Remittance Advice to us with your crossed cheque made payable to AIG Asia Pacific Insurance Pte. Ltd. and quote your Policy No. on the back of your cheque.

REMITTANCE ADVICE	
Tax Invoice No. : D19RN1493679	Date : 04 Jul 2019
Amount Due : \$1,295.02	
Policyholder : Tong Bee Construction Pte Ltd 37 Tannery Lane #07-01 Tannery House SINGAPORE 347790	
Policy No. : 1700039955-02	

0500722050

C&C FULCO-CORPORATE

SSCNFY

Common Statement



ACKNOWLEDGEMENT RECEIPT

GST REGISTRATION NO. : 201009404M

Tong Bee Construction Pte Ltd

37 Tannery Lane
#07-01 Tannery House
SINGAPORE 347790

ORIGINAL

ACKNOWLEDGEMENT RECEIPT

RECEIPT NO. : D19RN1493679

POLICY NO. : 1700039955-02

DATE : 04 Jul 2019

This is to acknowledge receipt of the following:

PARTICULARS	AMOUNT
CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE Certificate of Insurance/ Policy No.: 1700039955-02 Paid By : Cheque OCBC LTD 165892-03 \$1,295.02	 \$1,295.02
TOTAL	\$1,295.02

E.&O.E

This receipt is not valid unless cheque/draft is cleared for payment.

0500722050

C&C FULCO-CORPORATE

SSCNFY

78 Shenton Way #07-15 AIG Building 5079120 | T+65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Co. Ltd.

100236374BUCA

Driving License



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9313571G



Name

GOH CHANG HEE

吴昌禧

Race

CHINESE

Date of birth

13-04-1993

Sex

M

Country of birth

SINGAPORE

S9313571G

FOR C&C USE ONLY



4206038

NRIC No. S9313571G



FOR C&C USE ONLY

Date of issue

16-04-2008

42 SPRINGSIDE DRIVE
SINGAPORE 786939

NRIC No: S9313571G

Date: 27/09/2015

Common Statement

Accident Statement

☒ Mitsubishi ☐ Kia ☐ Citroen ☐ Others (Please tick accordingly)

Motor Accident Repair Basic Information

Date of Accident: 20 / 03 / 2020
Time of Accident (24hr format): 1645
Exact Location of Accident: Intersection T-junction on Sembawang road & mambis road.

Own Vehicle Details

Vehicle Registration Number: SKC 29774
INSURED/ POLICY HOLDER (OWN VEHICLE)
Name of Registered Owner: ☐ Individual ☒ Company
Tony Bee Construction PTE LTD
ID of Registered Owner: ☒ Co. Reg. No. ☐ NRIC No. ☐ Passport No. / FIN
199004298Z

Vehicle Particulars (Own Vehicle)

Model: Mitsubishi Lancer.
Exact purpose for which vehicle was being used at the time of accident: Traveling to dinner.
Are you claiming under your own Ins. Policy: ☐ Yes ☐ 3rd Party ☒ Reporting Only
Vehicle Category: ☒ Private Car / ☐ Comm Veh / ☐ Goods Veh / ☐ Motor Trade / ☐ Government

Insurance Company (Own Vehicle)

Insurance Company: AIG
Type of Coverage: ☒ Comprehensive ☐ Third Party / ☐ Third Party Fire and / or Theft
Fleet Policy: ☐ Yes ☒ No
Policy Number / Cover Note Number: 170003 9955-02

Driver

Name of Driver: Goh Chang Hui
ID of Driver: ☐ Co. Reg. No. ☒ NRIC No. ☐ Passport No. / FIN
393135716
Date of Birth: 13 / 04 / 1993
Occupation: Indoor / ☒ Outdoor
Driving Pass Date: 03 / 09 / 2013
Gender: ☒ Male ☐ Female ☐ Not Specified
Mobile Phone No.: 9675 8058
Office / Home / Other Numbers: —
Home Address: 42 Spring Side Drive
Email Address: geh.chang.hui@gmail.com
Was Driver an employee of the Insured's Company: ☐ Yes ☒ No Reason: Son of employer.
Does the driver own any other vehicle? ☒ No ☐ Yes
If YES, please indicate driver's own car vehicle number and insurance
Vehicle No: Insurance:

OWNER/ DRIVER'S SIGNATURE: 

Common Statement

General Information Of The Accident	
Type Of Accident	
Weather Condition	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Raining <input type="checkbox"/> Other If Others, please state the condition:
Road Surface	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Raining <input type="checkbox"/> Other If Others, please state the condition:
Other Information	
Was anybody injured in the accident?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Was any injured conveyed to hospital by ambulance?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Was any foreign vehicle involved in the accident?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Foreign Vehicle Registration Number	
Foreign Vehicle Category	
Number of vehicles involved in the accident	2
Was there any witness? (Name, Phone, Email)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Was there any other vehicle or property damaged?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Was there any video captured by Car Camera?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Was the accident reported to the police?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Click here if not in the above list
Was notice of intended Prosecution given?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, against whom?
I have been approached by unknown person(s) soliciting/offering accident claims assistance	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Number of Passengers (Including Driver)	1
Passenger (Name and Gender)	
Circumstances of Accident	
Refer attachment	

Third Party Vehicle Detail			
Details of Other Vehicle / Property			
Vehicle Registration No.	TIB 1241 Y		
Vehicle Make/ Model/ Colour	SMRT Bus		
Details of Property Damaged in Accident	Paint works damaged.		
Vehicle Category	Bus		
Name Of Driver	CHEN RI HUI		
Driver's NRIC	<input type="checkbox"/> Co. Reg. No. <input type="checkbox"/> NRIC No. <input checked="" type="checkbox"/> Passport No. / FIN	G 249 88 29 K	
Contact Number	9038 7672		
Name of Insurance Company			
Nature of Damage			
Damages to Other Vehicles & Property (Other than Vehicles A & B)	Vehicle Regn No. or Details of Property	Name of the Driver	Contact Number

Details of Injured Person	
Name	
Injury Sustained	
Injured person is on which vehicle?	
Were seat belts worn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

OWNER/ DRIVER'S SIGNATURE: *[Signature]*

Common Statement

1) Number of Passengers in Vehicle A (Including driver)?

Passenger 1	
Name :	Goh Chong Hee
Gender :	<input checked="" type="radio"/> M / <input type="radio"/> F

Passenger 2	
Name :	
Gender :	M / F

Passenger 3	
Name :	
Gender :	M / F

Passenger 4	
Name :	
Gender :	M / F

Passenger 5	
Name :	
Gender :	M / F

Passenger 6	
Name :	
Gender :	M / F

Passenger 7	
Name :	
Gender :	M / F

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

