SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

	ACCIDENT STATEMENT
Date Of Report	26/03/2020 10:28
Date Of Accident	25/03/2020 23:25
Exact Location Of Accident	RIVER VALLEY ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMJ9818S
Insured/Policyholder	
Name Of Registered Owner	YONG LI LING
NRIC No	S7676246E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83339916
Alternative Phone No	Office-83339916
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	A180 PROGRESSIVE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
f 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	1900035947-01
Cover Note Number	
Driver	
Name of Driver	YONG LI LING
NRIC No	S7676246E
Date Of Birth	11/04/1976
Occupation	INDOOR
	15/02/2003

17 YEARS AND 1 MONTH

Gender FEMALE

Mobile Number (LOCAL) +65-83339916

Fax Number

Contact Number OFFICE-83339916

EMail Address NOEMAIL

Address BLK 9 KIM TIAN ROAD #29-13

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

nourones Compony of Drivar's Own Vahiala

Insurance Company of Driver's Own Vehicle

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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?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED

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 SH5549R

Vehicle Make/Model/Colour RENAULT RED

Details Of Properties

Vehicle Category TAXI

Name of Driver WONG CHEE WEI
NRIC/Passport Number SXXXX390G

Contact Number

Address Postcode Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

2

SKETCH PLAN

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- 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.
- 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
- 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.

Policyholder's Signature

Date & Time

Driver's Signature

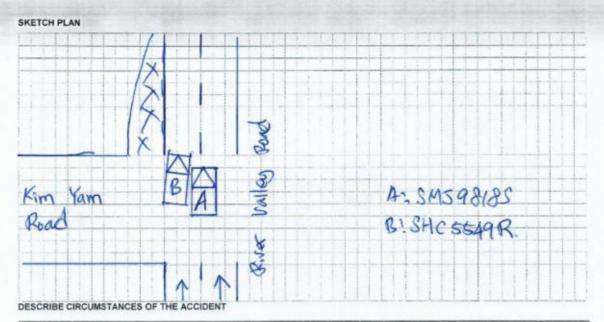
(If driver is not the policyholder)

Date & Time

Customer Service Centre - Pandan Loop Reporting Centre Personnel's

Go Chee Han DID: 6771 4336 HP: 9181 7717 Email : cheehan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd

Name:



Whole changing to the lest lane, car "B" Suddenly come into my lane and brushed to my car.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature Date & Time

Driver's Signature (If driver is not the policyholder)

Date & Time

Go Chee Han

DID: 6771 4336 HP: 9181 7717

Email: cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Reporting Centre Personnel's Name:



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Chassis No.

: WDD1770842J053209

Vehicle No.

: SMJ9818S : 1900035947-01

Policy No. Endorsement No.

Issued Date

: 05 Feb 2020

ABOUT THE COVER

MERCEDES Benz A180 Progressive

Driver Restriction : NA

Engine Capacity/Tonnage : 1,332.00 CC

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 Potognoider
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/sha meets the specified age zandson.

You have to pay an additional outh of \$3,000 as "Inexperienced Driver Excess" ("DR") if You are or Your Authorised Driver (named or unnamed) has less then 2 years' driving experience.

Age Condition

: 35 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 sover use for their or execut, orining tuston, orining fast, racing, pace-making, misability 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 fator Triady.

Loss of Use 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 185), Section 95 of the Road Transport Act, 1907 (Mataysia) and Road Transport (Amendment) Act 2015, are not to be included under these headings.

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

Windscreen: \$100

Named Driver and Excess (where applicable)

YONG LI LING - \$600 (Own Damage), \$800 (Flood Cover)

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

1 Cycle & Carriago Euros Service Center (For accident reporting only). Add: 330 Util Road 3 Singapure 40850 52001818 2 Cycle & Carriago Plandan Loop Service Center - Body Care & Repair: Add: 168 Panetan Loop Singapore 128376 52081818

For other Approved Reporting Centres(A)G Authorised Repairons, please contact our 24-hour accident emergency hottine at +65 8338 8290. Alternatively, you may refer to A/G website www.eig.eg.cr A/G S/G Mobile App. Simply search and download: A/G S/G from it unes or Google Play.

IMPORTANT NOTES

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

IWe hereby centry that the policy to which the Certificate of Insurance refaces 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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Ruses, 1966 (Malaysia).

0504512201

CYCLE & CARRIAGE - ALC

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.





Licence Number: \$7676246E

YONG LI LING

Birth Date: 11 Apr 1976

Issue Date: 15 Feb 2003



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

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms PASS DATE 15 Feb 2003

FOR C&C USE ONLY

NP 428A



































Accident Photo

