

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	06/04/2020 11:14
Date Of Accident	05/04/2020 11:00
Exact Location Of Accident	ANG MO KIO AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGA3332J
Insured/Policyholder	
Name Of Registered Owner	CHEAH BAO YI
NRIC No	S8308180E
Email Address	CHEAH2403@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91124200
Alternative Phone No	Office-NOPHONE

Vehicle Particulars	
Manufacturer	TOYOTA
Model	LEXUS CT200H AUTO STANDARD
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	1900114145
Cover Note Number	

Driver	
Name of Driver	WONG HAN CHUNG
NRIC No	S7614529F
Date Of Birth	10/05/1976
Occupation	INDOOR
Date Of Driving Pass	10/02/1998
Driving Experience	22 YEARS AND 1 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-81001680
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	APT BLK 450 CLEMENTI AVENUE 3 #03-283
Postcode	120450
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 - 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)	2
Passenger 1	Name: : CHEAH BAO YI 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 THE SKETCH PLAN

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	SKQ5601M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	NG TECK SENG
NRIC/Passport Number	S0209020A
Contact Number	92304663
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

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: 6/4

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

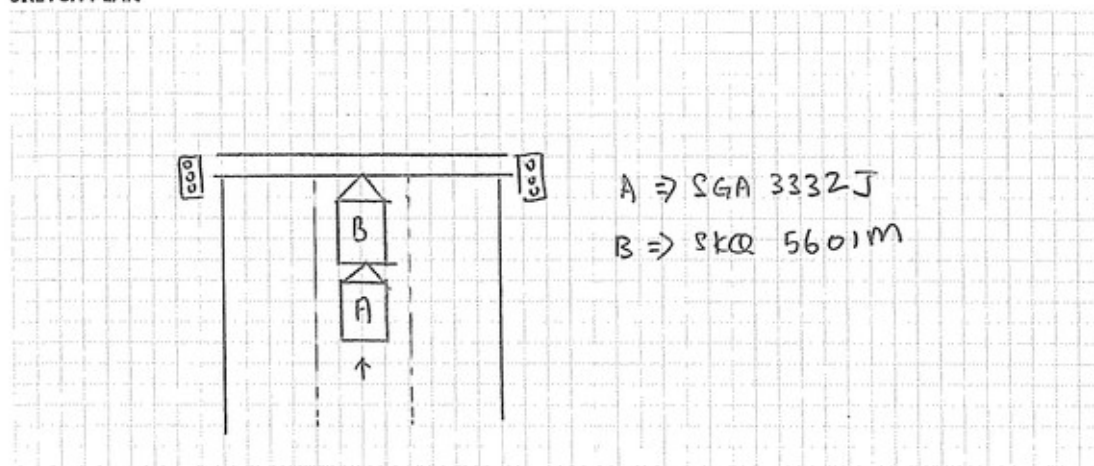
Date & Time: 6/4

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

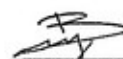



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: SGA 3332J	ACCIDENT DATE & TIME: 5/4/2020 Ard - 11-11.15am
CONTACT NUMBER: 81001680, 91124200	E-MAIL ADDRESS: cheah2403@gmail.com
LOCATION: along Ang Mo Kio Ave 5	
<p>On 5/4/2020 abt 11-11.15am, while driving along Ang Mo Kio Ave 5 there is a traffic light and the light turn red suddenly and we brake ^{braked} immediately but the car skipped. We drive at a normal speed 50km/hr.</p> <p>We banged the vertical veh in front of us (SKQ 5601M) and cos the front car to moved forward.</p>	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION	
Please state:	
<input checked="" type="checkbox"/> Claim Own Policy () Claim Third Party () Claim OD/TP at other workshop () Reporting Only	

DECLARATION

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


 Policyholder's Signature
 Date & Time: 6/4


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 6/4


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



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Cheah Bao Yi (Xie Baoyi)
Period of Insurance : 13 Jul 2019 To 12 Jul 2020
Engine No. : 2ZRR284703
Chassis No. : JTHKD5BH302026401

Vehicle No. : SGA3332J
Policy No. : 1900114145
Endorsement No. :
Issued Date : 08 Jul 2019

ABOUT THE COVER

Make/Model : LEXUS CT 200H
Engine Capacity/Tonnage : 1,798.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2011
Insuring with COE/PAF : Yes

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/she meets the specified age condition.

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 : 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 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 Optional

* 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)

Cheah Bao Yi (Xie Baoyi) - \$800 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)
Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
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: ASIA CARZ HOLDING PTE 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).

0693376 000

LIM LAY KOON

3 TAMPINES GRANDE #04-53 AIA TAMPINES

SINGAPORE 528799 SP-LM

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSP.7

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