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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	08/04/2020 13:29
Date Of Accident	08/04/2020 11:00
Exact Location Of Accident	JCT OF MARINA BLVD & SHEERES AVE (ROCHOR AVE)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMS184Z
Insured/Policyholder	
Name Of Registered Owner	HO CHIA MING, IVAN LEONARD
NRIC No	S7107102B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96458603
Alternative Phone No	Office-96458603
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180
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	2070005876
Cover Note Number	
Driver	
Name of Driver	HO CHIA MING, IVAN LEONARD
NRIC No	S7107102B
Date Of Birth	02/03/1971

INDOOR

31/07/1995

24 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96458603

Fax Number

Contact Number OFFICE-96458603

EMail Address NOEMAIL

Address 7 WEST COAST WALK #07-13

Postcode 127159
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 SIDE SWIPE
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

1

NO

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

I WAS DRIVING ALONG MARINA BOULEVARD WHEN CAR B (SJF9626K) WAS ENGAGING A LEFT TURN AND HIT MY CAR BUMPER (ON THE RIGHT SIDE BEHIND) AND PANEL. CAR B WAS TRYING TO TURN INTO SHEARES AVE.

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 Witness 1

Name HUSAINI BIN ABU

Phone Number 94264987

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJF9626K

Vehicle Make/Model/Colour TOYOTA BLACK

Details Of Properties Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

MOHAMED FADIL BIN MOHAMED ZAIN

S8851976J

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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
- 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")
- all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, (b) 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:
 - (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, STIL HOUSE

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time Of 104/2050

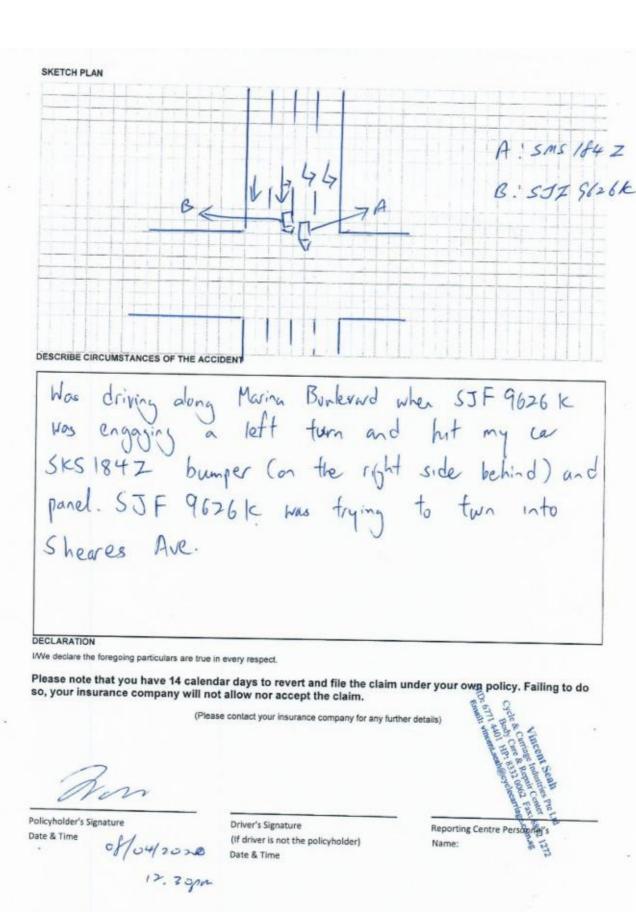
Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name:





CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Engine No.

Name of Policyholder : HO CHIA MING, IVAN LEONARD : 06 Feb 2020 To 05 Feb 2021

: 27491031802407 Chassis No. : WDD2050402R511886

Vehicle No. Policy No.

: SMS184Z : 2070005876

Endorsement No. Issued Date

: 13 Feb 2020

ABOUT THE COVER

Make/Model

: MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE

Engine Capacity/Tonnage : 1,595.00 CC

Driver Restriction : NA Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2020 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

so The Policyholder

b) Any other person who is driving on the Policyholder's order or with higher permission.

This Policy will indemnify the Policyholder or any authorised driver only if heliahe 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 unserted) has less than 2 years' driving experience.

Age Condition

: 40 years old and above

Limitation as to use* :

Live neity for social, domestic and pleasure purposes and for the Policyhoden's business.

This Policy does not cover use for him or reveal, driving tustion, driving test, racing, pace-making, milability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose is connection with Matter Trade.

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Companisation) Act (Cop. 189), Section 95 of the Road Transport Act, 1967 (Melaysia) and Road Transport (American Section **EXCESS**

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

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

HO CHA MING, IVAN LEONARD - \$800 (Own Damage), \$800 (Flood Cover)

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

1. Cycle & Carriage Euros Service Conter (For accident reporting crisy) Add: 330 Ubi Road 3 Singacore 408650 82061818
2 Cycle & Carriage Plandan Loop Service Carter - Body Care & Repeir Add: 188 Pandan Loop Singapore 125378 62061818

for other: Approved Reporting ContrestAtG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 8338 6200. Alternatively, you may refer to AtG website serve signag or NG 9G Models App. Simply search and download "AtG 9G" from iTunes or Google Play.

MPORTANT NOTES

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

s benefity that the policy to which this Conflicte of insurance retains is lasted in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cop. 188), Part IV of State (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

4512211

ILE & CARRIAGE - CHRLAW

ALEXANDRA ROAD **GAPORE 159930**

enwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

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

PASS DATE

Diess 3 Motor Care and Motor Tractors the weight of which unladen does not exceed 2500 kilogram 27 Jul 1995

FOR C&C USE ONLY

NP 428A



FOR COCUSE ONE MAINS, IVAN

Description of the County of t

































Driving License



Driving License

