

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 ability.
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 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	27/04/2015 11:19
Date Of Accident	23/04/2015 18:30
Exact Location Of Accident	JUNCT OF ORCHARD RD AND HENDY RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ2709X
Insured/Policyholder	
Name Of Registered Owner	LISA WIDJAJA @ KWAN SIOE TJU
NRIC No	S2206847D
Email Address	WIDJAJA_LISA@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96708154
Alternative Phone No	Office-62208158

Vehicle Particulars

Manufacturer	LEXUS
Model	IS250C-2.5 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Third Party
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	2100238128
Cover Note Number	

Driver

Name of Driver	LISA WIDJAJA @ KWAN SIOE TJU
NRIC No	S2206847D
Date Of Birth	07/08/1972
Occupation	Indoor
Date Of Driving Pass	29/12/2000
Driving Experience	14 Years And 3 Months
Gender	Female
Mobile Number	(Local) +65-96708154
Fax Number	
Contact Number	Office-62208158
Email Address	WIDJAJA_LISA@YAHOO.COM

Address	3 MOULMEIN RISE #03-03
Postcode	308144
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	Unknown - LEFT REAR SIDE HIT MY RIGH FRONT SIDE
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	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

PLEASE REFER AS ATTACHED

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5995K
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	ONG TECK KIAN
NRIC/Passport Number	S1588755I
Contact Number	98208016
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

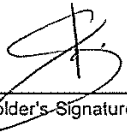
Name	
Phone Number	
Email Address	

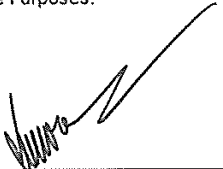
Accident Sketch Plan Pg.1

SKETCH PLAN

IMPORTANT NOTICE

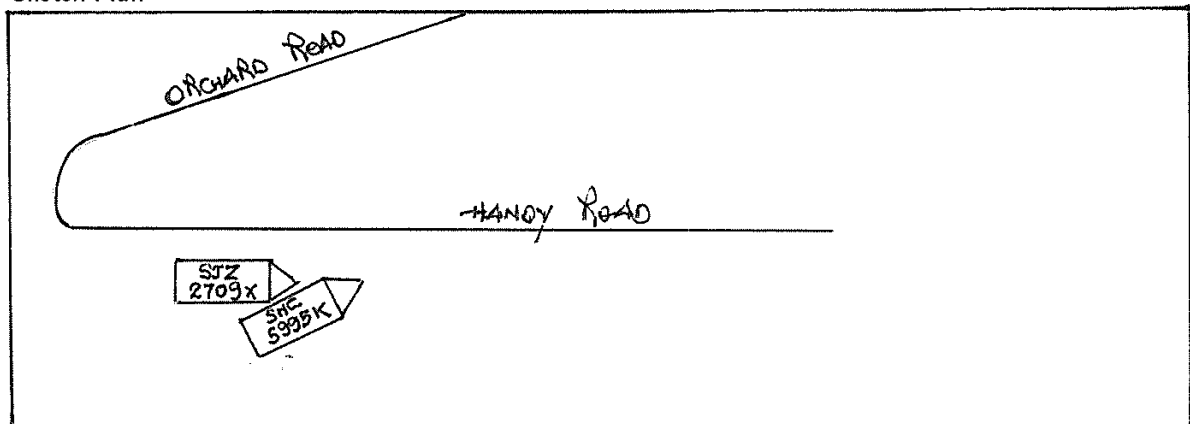
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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.


Policyholder's Signature / Date & Time


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

Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan Pg.1

Describe Circumstances of the Accident

I was going straight after turning left from Orchard Rd and suddenly vehicle, SHC 5995K accelerate to cut into my lane from my right to alight his passengers. In doing so, his vehicle grazed against the right front portion of my car.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Lisa Widjaja.
 VEHICLE NUMBER : SJZ 2709X.
 DATE/TIME OF ACCIDENT : 23/4/2015, 6.30pm.
 PLACE OF ACCIDENT : Junction of Orchard Rd and Hندی Rd.
 THIRD PARTY VEHICLE (IF ANY) : SHC 5995K.

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Raffles Quay (my office) to Plaza Singapura.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Left rear side hit right front side.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

N/A.

Name: Lisa Widjaja.

I Affirmed The Above Information Is Given To My Best Knowledge.

HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

CHARTIS

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

LEXUS AUTO PROTECTOR

CERTIFICATE NO. 2100238128-02000

(The below excess is subject to GST)

OWN DAMAGE EXCESS S\$2000.00 (1)

WINDSCREEN EXCESS S\$100.00

(Windscreen excess is waived if the repair is done at Borneo Motor's Workshop.)

SUM INSURED Market Value

INSURING WITH COE/PARF Yes

SJZ2709X

Lisa Widjaja @ Kwan Sioe Tju

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT
OF INSURANCE FOR THE PURPOSES OF THE ACT

20 Feb 2013

4) DATE OF EXPIRY OF INSURANCE

19 Feb 2014

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

SUBJECT TO AGE CONDITION: All Age Condition

a) The Insured.

The Insured may also drive a motor car not belonging to him or hired (under a hire purchase agreement or otherwise) to him or his employer or partner.

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

This policy will indemnify the Insured or any authorised driver only if he/she meets the age conditions.

An "Elderly, Young and/or Inexperienced Driver Excess" ("EYIDR") of an additional sum of S\$3,000.00 in addition to the Policy Excess applies to You and an Authorised Driver (named or unnamed) if You are or the said

Authorised Driver is above the age of 65, below the age of 23 and/or has less than 2-year's driving experience.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business.

The Policy does not cover use for hire or rewards, tuition, driving test, racing, pacemaking, reliability trial speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

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

1. Borneo Motors (S) P.L. - 24 Leng Kee (Tel: 66311500)
2. Ethoz - 22 Tampines Street 92 (Tel: 66547777)
3. Sin Yew Hup - 4 Woodlands Rd (Tel: 67600819)
4. ComfortDelGro Engrg - 205 Braddell Rd (Tel: 63837466)
5. Kan Fook Sing Motor - 61 Defu Lane (Tel: 67479560)
6. Ban Choon Motor - 3 Pioneer Rd (Tel: 62641191)
7. Shu Fatt - 1009 Bl Merah Lane (Tel: 62730119)
8. Nova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892)
9. Progressive Automotive Pte Ltd - 3022A Ubi Rd 1 (Tel: 67415336)
10. Ready Autocare - 10 AMK AutoPoint (Tel: 96606551/64810304)
11. Lai Huat Meng Kee Motors - 21 Sin Ming Ind. (Tel: 64538110)

LOSS OF USE Loss of Use 15 Days (1800 - 2000cc) - Refer to policy wordings for details

* NAMED DRIVER NA

HIRE PURCHASE COMPANY: OCBC Bank Ltd
EMPLOYER'S LOAN

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 14 Jan 2013

Chartis Singapore Insurance Pte. Ltd.

030211-353
AON SINGAPORE PTE LTD-LTHK
60 ANSON ROAD
#08-01 MAPLETREE ANSON
SINGAPORE 079914

AUTHORISED REPRESENTATIVE

ORIGINAL

AONJAS.

CHARTIS Building, 78 Shenton Way #07-16 Singapore 079120

Chartis Singapore Insurance Pte. Ltd.

Ca. Reg. No. 201009-0014

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2206847D



Name
LISA WIDJAJA
@KWAN SIOE TJU
关秀珠

Race
CHINESE

Date of birth
07-08-1972

Sex
F

Country of birth
INDONESIA

S2206847D

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
S2206847D

Name
LISA WIDJAJA

Birth Date
07 Aug 1972

Issue Date
16 Dec 2002

000007216D

3733007



NRIC No. S2206847D



Date of issue
24-06-2005


Address
3 MOULMEIN RISE
#03-03
SINGAPORE 308144

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Dec 2000

NP 428A

Licence No. S2206847D

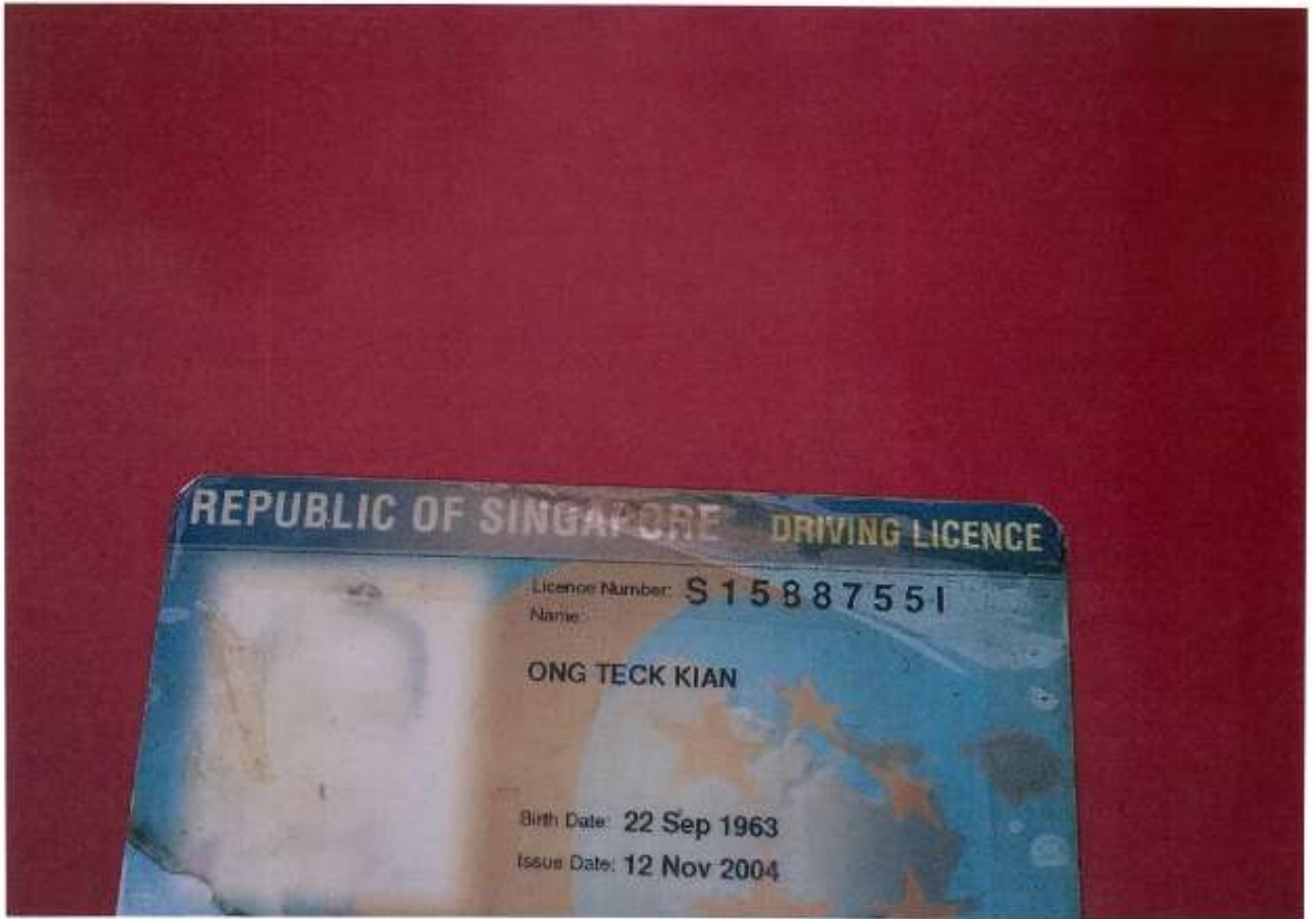




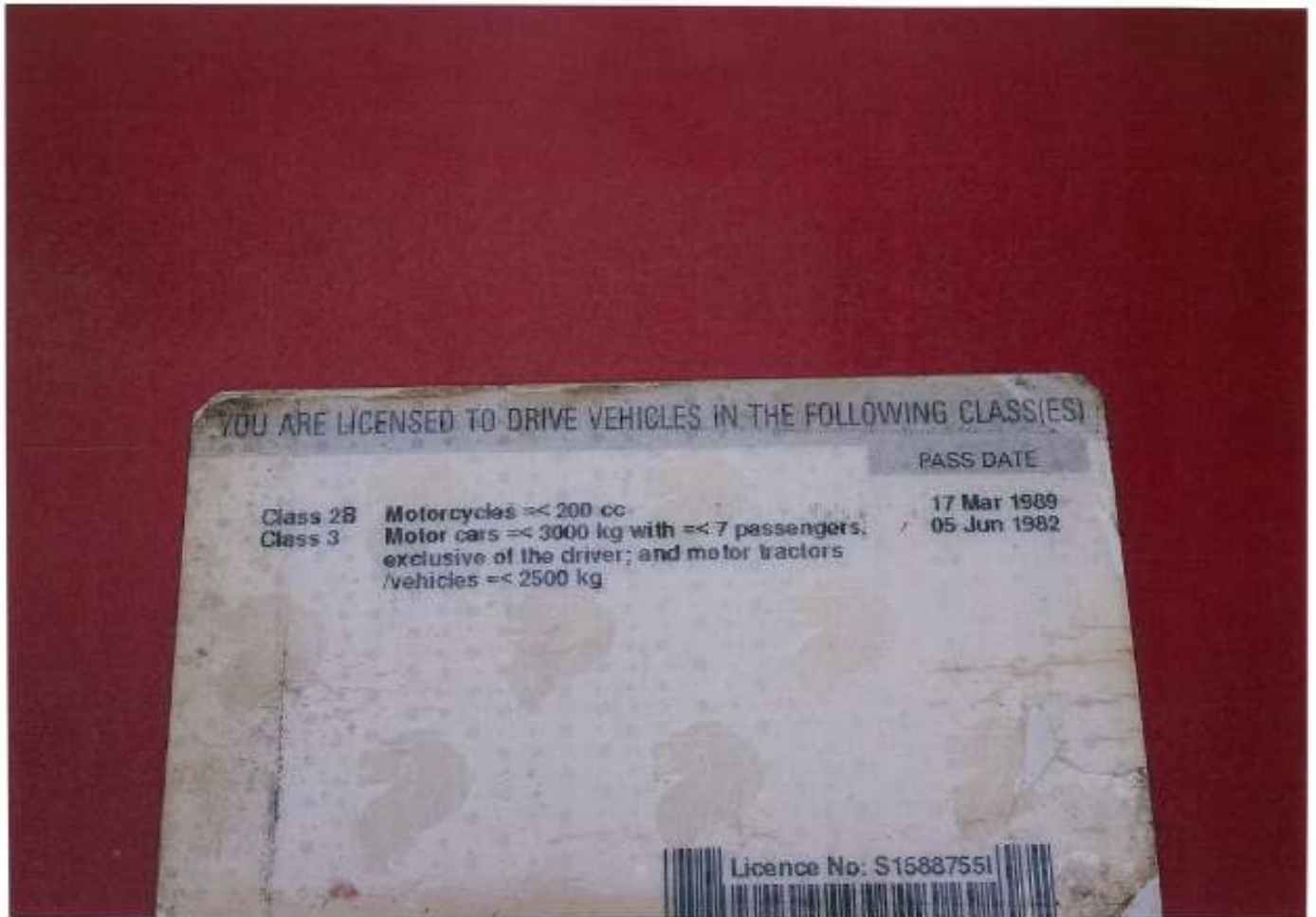


TP Vehicle





TP Vehicle



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

