

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	06/04/2017 17:45
Date Of Accident	05/04/2017 18:40
Exact Location Of Accident	CHANGI INTERNATIONAL APT T3 CROWN PLAZA HOTEL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCR333J
Insured/Policyholder	
Name Of Registered Owner	TAN SEK CHENG NANCY
NRIC No	S1496890C
Email Address	ZITAU@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96644393
Alternative Phone No	Office-96644393

Vehicle Particulars

Manufacturer	LEXUS
Model	RX270-2.7 (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	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	2100317509
Cover Note Number	

Driver

Name of Driver	TAN SEK CHENG NANCY
NRIC No	S1496890C
Date Of Birth	11/09/1961
Occupation	INDOOR
Date Of Driving Pass	03/10/1979
Driving Experience	37 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96644393
Fax Number	
Contact Number	OFFICE-96644393
EMail Address	ZITAU@SINGNET.COM.SG
Address	16 COUNTRYSIDE VIEW

Postcode	789732
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 - REAR PORTION
Weather Conditions	CLOUDY
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
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2

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

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	SHD178E
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT PORTION
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Accident 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 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.

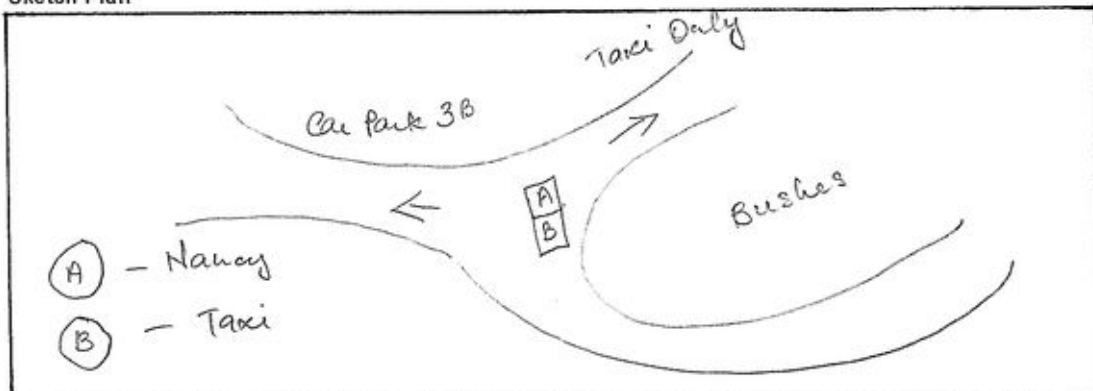
[Signature]

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

At about 18:40 hrs, my husband and I were on our way to pick up our son who was returning from his overseas trip at Changi International Airport Terminal 3. We came from RCP and we missed the entrance to Terminal 3 so we continue to drive all the way to Terminal 1 and on the left hand side it indicated T3 and hotel entrance. We took this route that lead us to Car park 3 B. As it was a curve ramp down, the directions was not clear so we missed the entrance slightly. We stop our car and look at the rear mirror while my hubby turn to look behind to ensure that there was no car. I engage my gear to "R" but was not even moving and all of a sudden, there was a bang from behind. I came out of the vehicle so is my husband. We stood and look at the taxi driver who was shocked and in a daze. He engage his gear and reverse his vehicle creating a huge and loud noise to disengage his taxi. He got out of the vehicle asking why my car was stopped there. I told him I missed the turn to the car park. The rest as you say is taking photos and exchanging numbers. He introduce himself as Bu Lok.

Declaration

I/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) : Tan Sok Cheng Naway
VEHICLE NUMBER : SCR 888 J
DATE/TIME OF ACCIDENT : 05/04/17 @ 1840 hrs
PLACE OF ACCIDENT : Changi Airport T3
THIRD PARTY VEHICLE (IF ANY) : SHD178E

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

30 Teban Gardens Crescent to Changi
International Airport T3.

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?

My vehicle back bumper and taxi front
bumper.

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

No.

Naway Tan Tan
Name:

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



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

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. 2100317509-04000

(The below excess is subject to GDT)

OWN DAMAGE EXCESS S\$800.00 (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

- 1) VEHICLE REGISTRATION NO. SCR333J
2) NAME OF INSURED Tan Sok Cheng Nancy
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 10 Oct 2016
4) DATE OF EXPIRY OF INSURANCE 9 Oct 2017
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

SUBJECT TO AGE CONDITION: All Age Condition

a) The Insured.

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.

A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the

Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said

Authorised Driver is below the age of 23 and/or has less than 2 years' 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 / LEXUS AUTHORISED REPAIRERS

1. Borneo Motors (S) Pte Ltd - 2 Pandan Crescent (Tel: 6631 1388)

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

2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63637118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)

4. Ethos - 30 Bukit Batok Crest (Tel: 66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only

6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64536110)

8. Moya Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)

10. SME Motor - 1 Kaki Bukit Ave 6 Bldg D (Tel: 67476106)

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

* NAMED DRIVER NA

HIRE PURCHASE COMPANY DBS 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 7 Oct 2016

AIG Asia Pacific Insurance Pte. Ltd.

030211-353
INCHCAPE AUTO LEXUS-LTHK
33 LENG KEE ROAD
SINGAPORE 159102


AUTHORISED REPRESENTATIVE

ORIGINAL

SPALC

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1496890C



Name

TAN SOK CHENG NANCY

董雪貞

Race
CHINESE

Date of Birth
11-09-1961

Sex
F

Country of Birth
SINGAPORE



2977605

NRIC No. S1496890C



Blood Group
A+

Date of issue
28-08-1997

Address

RECYCLED PAPER

SINGAPORE 790000

NRIC No. S1496890C

Date: 19-01-1998

No. 2452569



Reporting only

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

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	03 Oct 1979

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



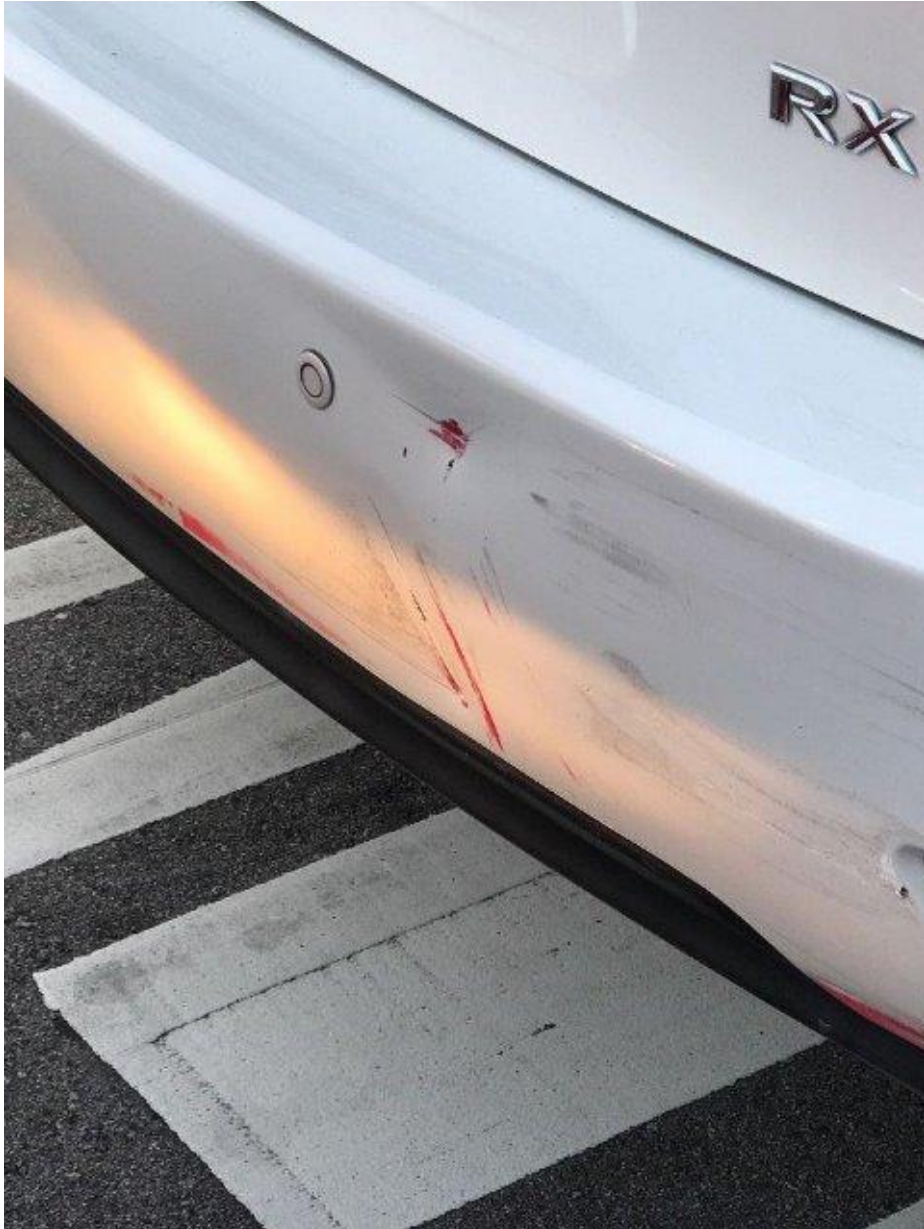
Accident Photo



Accident Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo

