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# SINGAPORE ACCIDENT STATEMENT

# IMPORTANT NOTICE

Contact Number

EMail Address

- 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.
- Information provided must be as truthful and accurate as possible. Any wiful 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.

SWANNERS BOOK STORY	ACCIDENT STATEMENT				
Date Of Report	25/06/2020 18:29				
Date Of Accident	25/06/2020 13:00				
Exact Location Of Accident	CARPARK NO:UWJM13 (BLK 601A JURONG WEST ST 62)				
Country/State of Loss	SINGAPORE				
Children and Children and Children	DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SGG6442Z				
Insured/Policyholder					
Name Of Registered Owner	TANG WAI CHENG				
NRIC No	SXXXX998F				
Email Address	HANCARREPAIRS@GMAIL.COM				
Mobile Phone No	(LOCAL) +65-91125673				
Alternative Phone No	OTHERS-91125673				
Vehicle Particulars					
Manufacturer	NISSAN				
Model	SUNNY				
Exact Purpose for which vehicle was being us- time of accident	ed at CAR WAS PARKED				
Are you claiming under your own insurance po for repair to your vehicle?	olicy 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	THIRD PARTY FIRE AND/OR THEFT				
Fleet Policy	NO				
Policy Number	2100507272-03				
Cover Note Number					
Driver					
Name of Driver	CHIU WAI LEONG (ZHAO WEILING)				
NRIC No	SXXXX581F				
Date Of Birth	30/10/1990				
Occupation	INDOOR				
Date Of Driving Pass	08/02/2010				
Driving Experience	10 YEARS AND 4 MONTHS				
Gender	MALE				
Mobile Number	(LOCAL) +65-91125673				
Fax Number					

OTHERS-91125673

HANCARREPAIRS@GMAIL.COM

Address

BLK 788E WOODLANDS CRESCENT

#04-210

Postcode

735788

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

5

NO

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver)

0

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 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

SKT6933H

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

ANG

NRIC/Passport Number

SXXXX530Z

Contact Number

98380883

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

SFJ8297C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

SKN7255D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 4**

Vehicle Registration Number

SHD6467G

Vehicle Make/Model/Colour

Details Of Properties

morning with the parties

TAXI

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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.
- 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
  - (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.

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

Date & Time:

NRIC/FIN NO.:

Policyholder's Signature Date & Time:

ETCH PLAN	CONTRACTOR OF STREET		F VIEWS TOWNSHIPS		0.00	r.
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(B) SKT6933	W.		7 1 1	777	7 18	
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Policyholder's Date & Time

(If driver is not the policyholder) Date & Time:

KOSLI MAHOY Name: NRIC: FIN No.:

PERSONAL PARTICULAR	RS
Date of Accident: 25 / 06 /2020 Time of A	Accident: 13 00 (24Hrs)
vehicle No: SGG6442Z Vehicle N	NakeModel: NISSan Sunny-
	ni3 CBIK 60114 Jurang West Street 62)
Owner's Name/NFIC: Tang Wai Cheng /	
Driver's Name/NRIC: Chiu Wai Leong Ch	ao Welliang) 159041581F
Driver's Contact: 91125673 Insurar	
Driver's Email Address: hancarrepairs @ 9	
Relationship between Owner & Driver: Spouse/Children/I	
Exact Purpose for which the vehicle was being use Private Use //Work Purpose  Weather Condition & Road Conditions?  Clear & Dry / Raining & Wet / After-Rain & Wet / Occupation	
Indoor / Outdoor	
Any Injuries? (IMC of 3 Days or more, police repo	
Yes No If Yes, which police station?	
The Other Party (Vehicle B) Details Driver's Name/IC: Ang / 368055307)	Vehicle No: SKD SKT6933H
Insurance Company:	Driver's Contact: 98380883
(if more than 2 vehicles involved, please indica	O SKN 7255 D SHD 6467 G

Contact:

Contact:

\* If no proper document are produced, IDAC should not file the report

\* Information will be discarded after one week.

Independent Witness (If Any):

Other Vehicle (Vehicle C) :

Preferred Workshop (If Any): \_\_\_



# CERTIFICATE OF INSURANCE

# PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

Name of Policyholder

: Tang Wai Cheng

Period of Insurance

: 19 May 2020 To 18 May 2021

Engine No.

: QG16410850

Chassis No.

: JNICFAN16Z0101381

: SGG6442Z

: 2100507272-03

Policy No.

Endorsement No. Issued Date

; 08 May 2020

## ABOUT THE COVER

Make/Model

: NISSAN SUNNY 1.6

Engine Capacity/Tonnage : 1,597.00 CC

Sum Insured : Market Value

First Year of Registration : 2006

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

Any person other than the Policyholder who is driving on the Policyholder's order or with his/her permission. This Policy will indemnify any authorised driver other than the Policyholder only if he/she meets the specified age condition.

Age Condition

: All Age Condition

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 hise or reward, driving tuition, driving test, racing, pace-making, reliability stat or speed-testing, the carnage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

\* 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 - S0 Theft - S0

Section 2

Property Damage - \$0

Windscreen: NA

Named Driver and Excess (where applicable)

Tang Wai Cheng, Chiu Kai Wai, Chiu Wai Leong

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims retated repairs)
Any accident repairs to the Cyblicite can be carried out at the repaire of Your choice (unless specifically excluded by Us).
For Approved Reporting Centres/AIG Authorised Repairers, please contract our 24-hour accident emergency hottine at +65 5338 6200. Alternatively, you may refer to AIG website www.aig.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: NA

IWe 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, 1969 (Malaysia).

LEE KOON MOW NELSON

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

SINGAPORE 528799 SP-TINAANG

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Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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