

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 | 01/07/2020 09:58 |
| Date Of Accident | 30/06/2020 12:00 |
| Exact Location Of Accident | OLD UPPER THOMSON ROADUPPER THOMSON ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|------------------------------|
| Vehicle Registration Number | SKC4878L |
| Insured/Policyholder | |
| Name Of Registered Owner | DUSOL BEATURY NOVENA PTE LTD |
| Co Reg No | 200613580c |
| Email Address | IVY.CHEN@INMARCH.CO |
| Mobile Phone No | |
| Alternative Phone No | Office-81989112 |

Vehicle Particulars

| | |
|------------------------------------------------------------------------------|----------------|
| Manufacturer | BMW |
| Model | 523I |
| Exact Purpose for which vehicle was being used at time of accident | Company use |
| 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 | 1800100056-01 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | CHEN BINJUE |
| NRIC No | S8260522C |
| Date Of Birth | 25/12/1982 |
| Occupation | INDOOR |
| Date Of Driving Pass | 25/01/2008 |
| Driving Experience | 12 YEARS AND 5 MONTHS |

| | |
|-----------------------------------------------------|------------------------------------|
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-81989112 |
| Fax Number | |
| Contact Number | |
| E-Mail Address | NOEMAIL |
| Address | BLK 76 UPPER SERANGOON VIEW #16-61 |
| Postcode | 533880 |
| Was driver an employee of the Insured's Company | YES |
| If No, Relationship of the Driver with the Insured | |
| 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 |
| 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) | 1 |

Details of Police Action

| | |
|-------------------------------------------|------------------------------------------------------------------------------------------|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678 |
| Police Station Address | ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

Please refer to Police Report: T/20200630/2080

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 | SHD3177M |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |

| | |
|-------------------------------------|-----------------------|
| Vehicle Category | TAXI |
| Name of Driver | LOOI KIEN WOH STEPHEN |
| NRIC/Passport Number | S8163579Z |
| Contact Number | 92378278 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE


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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 made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

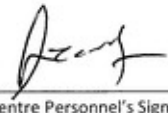
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


Policyholder's Signature
Date & Time:

1/7/2020


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

1/7/2020


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

1/7/2020

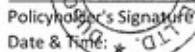
Vch A - Skc 40

Vch B - SHD 311

Vch B - SHD 3117m.

Please refer to Police Report .

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



Date & Time: *

1/7/2020

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

Date & Time:

Date & Time: 1/7/2020

Reporting Centre Personnel's Signature

Name: **Tracia Leong**

NRIC/FIN No.: -

DATE/FIN No.: 1/7/2020

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8260522C



Name

CHEN BINJUE

陈斌珏

Race

CHINESE

Date of birth

25-12-1982

Sex

F

Country of birth

CHINA

S8260522C



9034936

NRIC No. S8260522C



Nationality

CHINESE

Date of issue

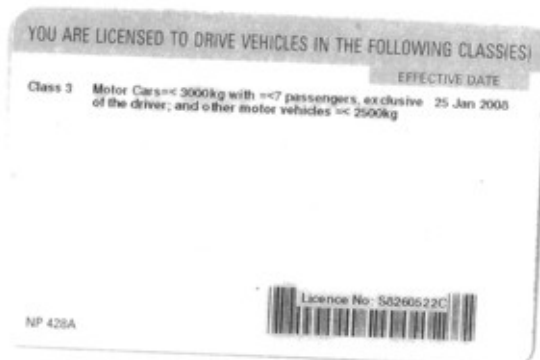
04-06-2009

APT BLK 78 UPPER SERANGOON VIEW #16-01
SINGAPORE S33880

NRIC No. S8260522C

Date: 11/02/2019

Driving License





**SINGAPORE
POLICE FORCE**



T/20200630/2080

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

1 of 3

Report No. T/20200630/2080

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--------------------------------------------|------------------|---------------------------|
| Date/Time Report Made: 30/06/2020 19:03 | Vide Report No.: | Station Diary No.: 111 |
|--------------------------------------------|------------------|---------------------------|

Informant's Particulars

| | | | | |
|------------------------------------------|------------|------------------------------|------------------------------------------------------------------------|----------------------------|
| Name of Informant: CHEN BINJUE | | | Address: APT BLK 76 UPPER SERANGOON VIEW #16-61 SINGAPORE 533880 | |
| ID Type / ID No.: NRIC NO / S8260522C | | | Contact No.: Home/Office: Mobile: 81989112 | |
| Nationality: CHINESE | | | Email: yuviachen@gmail.com | |
| Sex: Female | Age: 37 | Date of Birth: 25/12/1982 | Type of Informant: Driver | |
| Race: Chinese | | | Language: English | Institution / School Name: |
| Occupation: MANAGER | | | Driving Licence Information: Class: 3 Date of Expiry: | |

General Information of the Accident

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------|--------------------------------------------|-------------------------------------|
| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 30/06/2020 12:00 | Type of Location: X-Junction |
| Location: Junction of Road 1 and Road 2 OLD UPPER THOMSON ROAD UPPER THOMSON ROAD toward the direction of Tagore Industrial Avenue. | | | | |
| Weather: Sunny | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: Two Way | | Traffic Control: Traffic Light - Working | | Traffic Volume: Light |
| Type of Collision: Side To Side | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|---------|-------|-------|------------------|-----------------|
| SHD3177M | Taxi | HYUNDAI | | Blue | Slightly Damaged | 0 |
| SKC4878L | Car | BMW | 523i | Black | Slightly Damaged | 0 |

Details of Person Involved

| | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |



**SINGAPORE
POLICE FORCE**



T/20200630/2080

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

2 of 3

Report No. T/20200630/2080

CONTINUATION OF REPORT

| | | | | |
|-----------------------------------|-----------------------|--|----------------------------------------|-----------------------------------|
| Driver | | | | |
| Name | LOOI KIEN WOH STEPHEN | | ID No. | S8163579Z |
| Related Vehicle | SHD3177M (Taxi) | | Contact No. | 92378278 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | | Degree of Injury | NIL |
| Driver | | | | |
| Name | CHEN BINJUE | | ID No. | S8260522C |
| Related Vehicle | SKC4878L (Car) | | Contact No. | 81989112 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | | Degree of Injury | NIL |

Brief Details.

On 30/06/2020 at about 12pm. I was driving vehicle "SKC4878L" along Upper Thomson Road. The said vehicle belonged to my boss. I had then stopped the vehicle before the stopping line at the junction of Old Upper Thomson Road as it was "Red" light. My vehicle was in lane 2. There was a total of 4 lane. 1st lane was for making right turn. The 2nd and 3rd lane were for going straight. The 4th lane was for going straight and turning left. There was a taxi "SHD3177M" stopped at the left side of my vehicle. Once the traffic light turned "Green" in colour, I started to move off. Before I could reach the centre of the said junction, I heard a scratching sound coming from the left side of my vehicle. I turned my head to the left and saw the said taxi beside my vehicle. I noticed that the left side mirror of my vehicle was facing inward toward me. I then saw the right side mirror of the said taxi damaged. The mirror of the taxi was hanging at the side. After I had passed the junction, I had stopped my vehicle at the 1st lane which was the extreme right lane. Both driver alighted to check. No one was injured at that point of time. There was scratches on the cover of my vehicle left side mirror. The damaged of the taxi was the right side mirror hanging out. Had spoken and the taxi driver claimed that I did not drive straight which was untrue.



**SINGAPORE
POLICE FORCE**



T/20200630/2080

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

3 of 3

Report No. T/20200630/2080

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
A /
Sr Staff Sgt KHOO CHOON HUA

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
30/06/2020 19:03

Classification Of Case:



Insurance Certificate



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : DUSOL BEATURY NOVENA PTE.LTD.
Period of Insurance : 01 Sep 2019 To 31 Aug 2020
Engine No. : 09297738N52B25AF
Chassis No. : WBAFP32000C866104

Vehicle No. : SKC4878L
Policy No. : 1800100056-01
Endorsement No. :
Issued Date : 28 Aug 2019

ABOUT THE COVER

Make/Model : BMW 523i 2.5 [Sedan]
Engine Capacity/Tonnage : 2,497.00 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/PARF : Yes

* Any person who is driving on the Policyholder's order or with their 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 "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

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 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 - \$1000 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CHU KAUNG HO - \$1000 (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

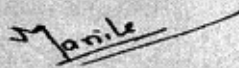
Hire Purchase Company/Employer's Loan: NA

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).

0503013000

WOO RACK SHON
78 SHENTON WAY #07-16 AIG BUILDING
SINGAPORE 079120 SP-TW-ACE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSPSAA

Chassis Number



Accident Photo



Accident Photo



Accident Photo

