SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass Driving Experience

- 1. 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.
- 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.
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7. By the lodgement of this report to the insurers, you hereby conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	20/07/2020 16:11
Date Of Accident	19/07/2020 11:30
Exact Location Of Accident	306 BEDOK ROAD (LAU LIN MEE POK)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJR8458Y
Insured/Policyholder	
Name Of Registered Owner	CHAN KIM YING
NRIC No	S0091164Z
Email Address	KIMYING@THYESHAN.COM
Mobile Phone No	(LOCAL) +65-97522382
Alternative Phone No	Others-97522382
Vehicle Particulars	
Manufacturer	LEXUS
Model	GS450H
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	1900255228
Cover Note Number	
Driver	
Name of Driver	CHAN KIM YING
NRIC No	S0091164Z
Date Of Birth	21/03/1949

INDOOR 17/02/1972

48 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97522382

Fax Number

Contact Number OTHERS-97522382

EMail Address KIMYING@THYESHAN.COM

Address 76 BURGHLEY DRIVE

Postcode 559038

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 COLLIDED INTO PARKED VEHICLE

2

NO

NO

YES

NO

2

NO

NO

NO

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : MR LIM

Gender: : Male

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

REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKA250J

Vehicle Make/Model/Colour

Was there any audio recorded?

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver JORDAN ONG

NRIC/Passport Number Contact Number

82002762

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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.
- 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:
 - 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:

2 0 1111 2020

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

Date & Time:

2 0 JUL 2020

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jenny Lim

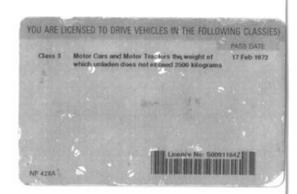
SKETCH PLAN Stationary SKA 250J STR 250J I instended to park my car at this lot 306 Bedok Road	Narrow road
Lay Lin Mee Pok	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
On 19/7/2020 Sunday 1(30hrs: intending to parallel-park at left of 3d Bedok Road my right rear stationary SKA 2507.	I reversed my SJR 8458Y t parking lot of side road hit at the rear right of
DECLARATION I/We declare the foregoing particulars are true in every respect.	\sim
Policyholder's Signature Date & Time: 20/7/2020 Date & Time: 20/7/2020 Date & Time: 20/7/2020 Date & Time: 20/7/2020 1600 hrs.	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: Jenny Lim

Identification Card











Address

wir

POLICY SCHEDULE

AUTOPLUS PRIVATE VEHICLE

: 1900255228 Policy No.

Period of Insurance s.08 Dec 2019 to 04 Dec 2020

Issued Date : 05 Dec 2019

ABOUT THE POLICYHOLDER

Name of Policyholder

: Chan Kim Ying

: 76 Burghley Drive SINGAPORE 559038

Occupation/Nature of Business: Manager/Director/Management

ABOUT THE VEHICLE

Registration No. SJR8458Y

: JTHBS1BL405002027

First Year of Registration : 2012 *

Engine No. **Body Type**

Engine Capacity/Tonnage: 3,456.00 CC : 2GR8757034

: Sedan

: LEXUS NEW GS450H Make/Model

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

ABOUT THE COVER

Seating Capacity: 5

: Market Value Sum Insured

Off Peak Car

Driver Restriction : NA Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive :

Chassis No.

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 (noting experience).

Age Condition

: All Age Condition

Limitation as to use

Other Key Policy Benefits :

ers- \$10000, PA Insured-\$50000, Key Act of God, Dealer (First 3 years from original registration) + AIG Authorised Workshops, Welver Registerment Cover-\$800, Strike, Riots and Civil Commotions, Loss of Use 1500cc - 1600cc Op

EXCESS

Section 1 Fire - \$0 Own Damage - \$1300 Theft - \$0 Flood Cover - \$1300

Windscreen: \$100

Named Driver Chan Kim Ying - \$1300 (Own Damage), \$1300 (Flood Cover)

PREMIUM

Premium : \$ GST (7%) :\$ 1,198.14 83.87

Total

1,282.01

Your Premium includes the following discount(s):

:\$

Safe Driver Discount - 5.00%, Leyelty Discount - 10.00%, No Claim Discount - 50%

10/2

Accident Photo



Accident Photo









Chassis Number

