### SINGAPORE ACCIDENT STATEMENT

#### **IMPORTANT NOTICE**

**Date Of Driving Pass** 

**Driving Experience** 

- 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 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.
- nort to the inont to the ort at the

7. By the lodgement of this report to the insurers, you hereby conseaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	03/08/2020 11:37		
Date Of Accident	03/08/2020 10:30		
Exact Location Of Accident	BARTLEY ROAD & MOUNT VERNON ROAD		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SJM4930C		
Insured/Policyholder			
Name Of Registered Owner	TAN SIAM HUAY		
NRIC No	S1547083F		
Email Address	NOEMAIL		
Mobile Phone No	(LOCAL) +65-98009586		
Alternative Phone No	Others-98009586		
Vehicle Particulars			
Manufacturer	VOLKSWAGEN		
Model	BEETLE-1.6 (A)		
Exact Purpose for which vehicle was being used at time of accident			
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	2100113633-11		
Cover Note Number			
Driver			
Name of Driver	DERICK WONG JUN JIE		
NRIC No	S9531049D		
Date Of Birth	26/08/1995		
Occupation	INDOOR		

23/06/2017

3 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-92999091

Fax Number

**Contact Number** 

EMail Address NOEMAIL

Address 15 TAMPINES CENTRAL 7 #07-11 S(528771)

Postcode

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

e.iiio;e

Insurance Company of Driver's Own Vehicle -

-

**General Information of the Accident** 

Type Of Accident COLLISION - HEAD ON COLLISION

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?

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

Passenger 1 Name: : CHERYL-ANN

Gender: : Female

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

**Circumstances of Accident** 

REFER TO THE 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

SLZ1986U

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver SIM KIM HUA

NRIC/Passport Number Contact Number

S7217236A 82991213

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### 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.
- 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)
  - (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
- (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.
- 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:

Driver's Signature

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

3/8/2020

NRIC/FIN No.:

Reporting Centre Personnel's Signature

KETCH PLAN				
	111111			
		V		
IBD	AP			
-				
	1 1 1			
	A		A- SJM49 8- SLZ198	30C
			B- SLZ198	64
SCRIBE CIRCUMSTANCES	OF THE ACCIDENT			
			2 0000	
I was coming	dann from	Bartley Road	and may different	14
left to Many	vernon road.			
			ISURER: ALG EHICLE: SJM4930C	
			DOA: 3/8/2020 @1	0:30h
		(	CLAIM TYPE: Own Dama	ge cle
		\	WORKSHOP: KES Moto	~
			Workshop	
DECLARATION  //We declare the foregoing parti	culars are true in every respect.	- +		
'olicyholder's Signature	Driver's Signature	Reporti	ng Centre Personnel's Signature	

# AIG ASIA PACIFIC INSURANCE PTE LTD

## MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: Dertek Wong Jun Jie	
VEHICLE NUMBER DATE/TIME OF ACCIDENT	: 50 M 4930 C	
	: 3/8/2020 (0:30hr	
PLACE OF ACCIDENT	: Bartley Road x Mount vemon Road.	
THIRD PARTY VEHICLE (IF ANY)	: SLZ 19 86U	
<b>由表表表表表表表表表表表表表表表表表表表表表表表表表表表表表表表</b>	*********************	
BEFORE THE ACCIDENT? Tampines (home) to 8 Burn Road	RNEY AND WHERE WAS THE INTENDED DESTINATION	
	DRINKS BEFORE YOU DRIVE ON THE DAY OF THE FIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST LT?	
WHAT IS THE TYPE OF COLLISION VEHICLES INVOLVED?	AND THE EXTENSIVENESS OF THE DAMAGES TO ALL	
WERE YOU OR YOUR PASSENGER/S	INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU	
TAKEN TO THE TRAFFIC POLICE FO $N_0$ .		
Name: Derick Wong Jun Jie  I Affirmed The Above Information Is Giv		
Name: Derick Wong Jun Jie		
I Affirmed The Above Information Is Giv	en To My Best Knowledge.	

1





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

EFFECTIVE DATE

Motor cars with unladen weight =< 3000 passengers, exclusive of driver; and oth vehicles with unladen weight =< 2500kg < 7 23 Jun 2017

MRC No. S9531049D 14-09-2010 15 TAMPINES CENTRAL 7 #07-11 SINGAPORE 528771 NRIC No: \$9531049D Date: 11/05/2015



# CERTIFICATE OF INSURANCE

#### **AUTOPLUS PRIVATE VEHICLE**

 
 Name of Policyholder
 : Tan Siam Huay

 Period of Insurance
 : 06 Jan 2020 To 05 Jan 2021

 Engine No.
 : BFS070244

 Chassis No.
 : WVWZZZ9CZ9M550478
 Vehicle No. : SJM4930C Policy No. : 2100113633-11

Endorsement No. : 26 Dec 2019 Issued Date

#### ABOUT THE COVER

Make/Model : VOLKSWAGEN BEETLE 1.6A

First Year of Registration : 2009 Engine Capacity/Tonnage: 1,595.00 CC Sum Insured : Market Value Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with his/her permission. This Policy will indemnify the Policyholder or any authorised driver only if heisher 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' divining 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 suition, driving test, racing, pace-making, rehability that or speed-basing, 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 (Millaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

#### EXCESS

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

Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Siam Huay

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

Approved Reporting Centreof AIG Authorised Repairers (For datins 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 Centre/AIA Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 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: DBS BANK LTD

IAVe 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. 169), Part IV of the Road Transport Act, 1881 (Malleysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1968 (Malleysia).

0692649000

TAN SIAM HUAY

15 TAMPINES CENTRAL 7 #07-11

SINGAPORE 628771 SP-RITA

Underwritten by AIG Asia Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature,









































