MLHM20074692 / Lai Huat (Meng Kee) Motor Pte Ltd - Sin Ming ENTRY DATE & TIME: 31/08/2020 14:07 SUBMITTED BY: Tracia Leong

#### SINGAPORE ACCIDENT STATEMENT

#### **IMPORTANT NOTICE**

**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.
- ${\bf 5.} \ \underline{\textbf{Any false reporting may be referred to the Police for investigation.}}$
- 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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. By the lodgement of this report to the insurers, you hereby conse foresaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	31/08/2020 14:07
Date Of Accident	28/08/2020 12:35
Exact Location Of Accident	SERANGOON ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMS6253T
Insured/Policyholder	
Name Of Registered Owner	TAN YOUJIE (CHEN YOUJIE)
NRIC No	S8311261A
Email Address	HEYYOUSG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96743518
Alternative Phone No	Office-96743518
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ATTRAGE 1.2CVT
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?	NO
f 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	
Cover Note Number	2070031214
Driver	
Name of Driver	TAN YOUJIE (CHEN YOUJIE)
NRIC No	S8311261A
Date Of Birth	29/03/1983
Occupation	INDOOR
Date Of Driving Pass	21/10/2004

15 YEARS AND 10 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-96743518

Fax Number

**Contact Number** OFFICE-96743518

**EMail Address** HEYYOUSG@GMAIL.COM

Address BLK 119C KIM TIAN ROAD #24-216

Postcode 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 **COLLISION - HEAD TO REAR** 

**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

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

1 Number of Passengers (Including Driver)

#### **Details of Police Action**

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 51 ANG MO KIO AVE 9, POSTCODE: 569784, COUNTRY: SINGAPORE

**Police Station Contact** TEL NO: 1800-4849999 - FAX NO: 62181399

Was notice of intended Prosecution given?

If Yes, against whom?

NO

#### **Circumstances of Accident**

Please refer to Sketch Plan & Police Report: T/20200828/2131

#### Attachment(s)

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

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SH3189C

Vehicle Make/Model/Colour

**Details Of Properties** 

**Vehicle Category TAXI**  Name of Driver ROSLAN BIN SA'ADON

NRIC/Passport Number S0093628F Contact Number 97887134

Address BLK 289 YISHUN AVENUE 6 #02-22

2

Postcode 760289

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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
- 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.
- 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 "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.
- 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:

Reporting Centre Personnel's Signature

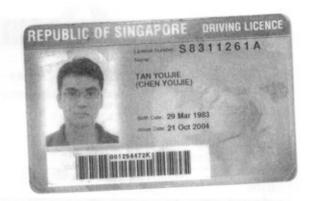
Name: Tracia Leong

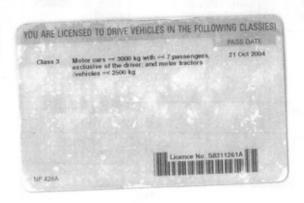
NRIC/FIN No.: -

3 1 AUG 2020

ETCH PLAN	1 1 1	
13189C)B—		A(SMS6253 T).
SCRIBE CIRCUMSTANCES O	F THE ACCIDENT	
28/03/19/19/19		
CLARATION Ve declare the foregoing particul	ars are true in every respect.	0
icyholder's Signature	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: Tracia Leong NRIC/FIN No.: - 21 A LIC 2000
31/8/2020 2pm		3 1 AUG 2020









# COVER NOT

# CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder : TAN YOUJIE (CHEN YOUJIE)

Period of Insurance 05 :-02-Mar 2020 to 01 Mar 2022

Chasis No.

: 3A92UJL6260/04 : MMBSTA13AKH004951/

Vehicle No. Cover Note No.

: 2070031214 Endorsement No.

**Issued Date** 

: 02 Mar 2020



#### ABOUT THE COVER

Driver Restriction

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT/

Engine Capacity/Tonnage : 1,193.00 CC/

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2020

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\* :

a) The Policyholder

: NA

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 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

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

#### **EXCESS**

Section 1 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)
TAN YOUJIE (CHEN YOUJIE) - \$600 (Own Damage), \$600 (Flood Cover)

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

1.Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

2.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapere 159094 64708688

4.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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.sig.sg or AIG SG Mobile App, Simply search and download "AIG SG" from Trunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

000 ptg 15 AKT Building S070120 | T +65 6419 3000 | www.akg.sg

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.

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If you do not receive your Certificate of Insurance and Insurance an

0504675220

CYCLE & CARRIAGE - RANDY

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.





Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No: 1800-4849999

1 of 3 Report No. T/20200828/2131

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/08/2020 21:46		Made:	Vide Report No.:	Station Diary No.: 62		
Informa	nt's Partic	ulars				
Name of TAN YO	Informant: UJIE		Address: APT BLK 119C KIM TIAN RO 163119	DAD #24-216 SINGAPORE		
ID Type / ID No.: NRIC NO / S8311261A			Contact No.: Home/Office:	Mobile: 96743518		
National SINGAP	ity: ORE CITIZ	EN	Email:			
Sex: Age: Date of Birth: Male 37 29/03/1983			Type of Informant:			
Race: Chinese			Language:	Institution / School Name:		
Occupation: SELF-EMPLOYED			Driving Licence Information:	Date of Evolor		

		ent			
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 28/08/2020 12:35	Type of Location T-Junction	
SERANGOO	N ROAD	Road Surface:	F	Road Speed Limit:	
Clear Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate	
One Way				nyone conveyed by	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SH3189C	Car			Black	Slightly Damaged	1
SMS6253T	Car	MITSUBISHI	ATTRAGE 1.2 CVT	Silver	Slightly Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SMS6253T	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2070031214	05/03/2020	04/03/2022	





Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No: 1800-4849999

Report No. T/20200828/2131

#### CONTINUATION OF REPORT

Details of Perso	on Involved		H 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Any Pedestrian I	nvolved: No						
No. of Pedestrians Injured: NIL			Use of Pe	Use of Pedestrian Crossing: NA			
Driver							
Name	ROSLAN BIN SA'ADON			ID No.		S0093628F	
Related Vehicle	SH3189C (Car)			Contact No.		97887134	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Dis				NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL		
Driver							
Name	TAN YOUJIE			ID No.		S8311261A	
Related Vehicle	SMS6253T (Car)			Contact No.		96743518	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL Date		Date Disc		NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL		

On 28/08/2020 at 1238hrs, I was driving my vehicle(SMS6253T) along Serangoon Road towards Upper Serangoon Road on the 3rd lane. At the T-junction between Serangoon Road and St Barnabas Lane, I saw a taxi(SH3189C) that was about 2 to 3 car length away, drove into my lane from the left and stopped in my lane. The taxi was stationary in his lane before he turned into my lane. I braked my vehicle but my vehicle did not stopped in time. The left front of my vehicle collided into the right rear of the taxi. The left headlight and the left bonnet of my vehicle was damaged. The taxi has multiple slight scratch damages on the right rear side of the vehicle. I am making this report for record purposes.





Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No: 1800-4849999 3 of 3 Report No. T/20200828/2131

CONTINUATION OF REPORT

# Sketch Plan

Informant is not able to provide sketch plan

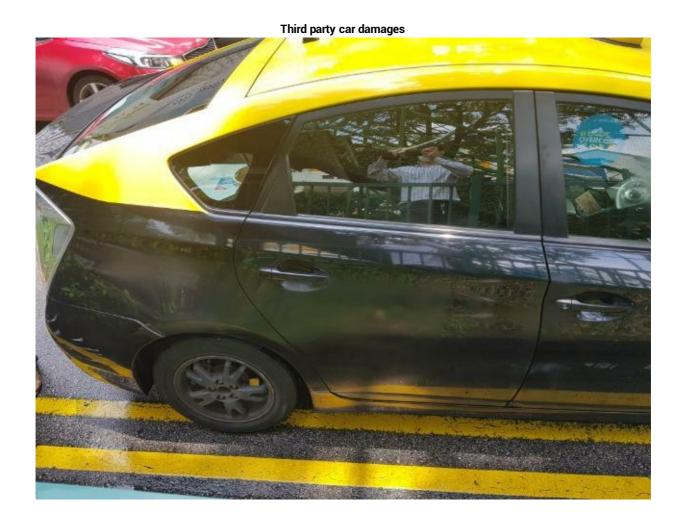
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:  F /  SI-MOHAMMED BIN ZAINOL  \$2 mellin Ren Tei Locay	Signature Of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	28/08/2020 21:46
Officer In Charge Of Case: TP / GIA /	Classification Of Case:
Staff Sgt WONG SIEU LUI Contact No.: 65476151	
Authentication Stamp	

dy

Third party car damages

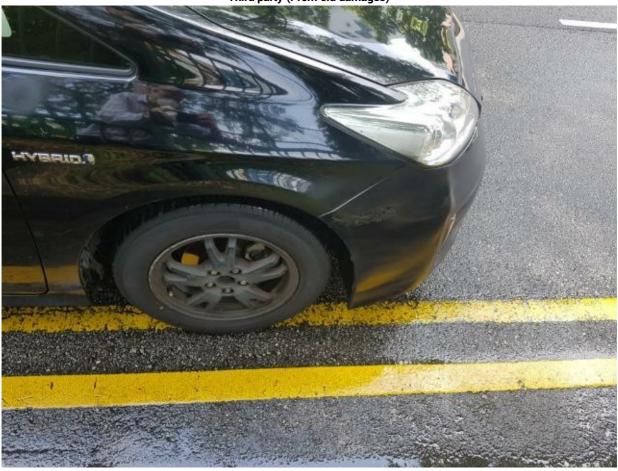




Third party car damages



Third party (From old damages)



Third party (From old damages)

# **Accident Photo**



# **Chassis Number**







# **Accident Photo**



# **Accident Photo**

