

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	07/09/2020 13:18
Date Of Accident	05/09/2020 22:30
Exact Location Of Accident	PIE BEFORE KPE (TOWARDS CHANGI)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ4905S
Insured/Policyholder	
Name Of Registered Owner	HU GUO QIANG
NRIC No	S2702393B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91292139
Alternative Phone No	Office-91292139

Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT-1.6 MT (M)
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	1800026548
Cover Note Number	

Driver

Name of Driver	HU JIN
NRIC No	S9272975C
Date Of Birth	15/11/1992
Occupation	INDOOR
Date Of Driving Pass	07/12/2016
Driving Experience	3 YEARS AND 8 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96903202
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	20 PASIR RIS LINK #08-14
Postcode	518157
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

VEHICLE B IN FRONT SUDDENLY BRAKE. I CANNOT STOP IN TIME AND HIT ONTO VEHICLE B REAR PORTION. IT WAS A CHAIN COLLISION. TOTAL 3 VEHICLES WERE INVOLVED.

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	SBD2523L
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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 2

Vehicle Registration Number SLZ6735Z
Vehicle Make/Model/Colour
Details Of Properties VEHICLE C
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)

SKETCH PLAN

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.
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.

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.

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

Vehicle B instantly suddenly brake, I cannot stop in time and hit onto vehicle B rear portion. It was a close collision, total 3 vehicles was involved.

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

Date & Time:

NRIC/FIN No.:

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : HU JIN
 VEHICLE NUMBER : SJ 49055
 DATE/TIME OF ACCIDENT : 05/09/2000 @ 2230HRS
 PLACE OF ACCIDENT : P12 BEFORE KPE (TOWNS CHANON)
 THIRD PARTY VEHICLE (IF ANY) : 2BP 2523L

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

WEST COAST TO PASIR RIS

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

HEAD TO REAR

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No

Name: Hu Jin

I Affirmed The Above Information Is Given To My Best Knowledge.

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2702393B



Name

HU GUOQIANG

胡国强

Race

CHINESE

Date of birth

18-12-1966

Sex

M

Country of birth

CHINA

Usage for Insurance Motor Accident Reporting
and Claims Purposes Only

Vehicle no: 3JJ 4906S

Date of Accident: 05/09/20



4819249

NRIC No. S2702393B



Date of issue

31-01-2012

20 PASIR RIS LINK #08-14
SINGAPORE 518157

NRIC No: S2702393B

Date: 06/05/2016

Driving License

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9272975C



Name

HU JIN

胡 津

Race

CHINESE

Date of birth

15-11-1992

Country of birth

CHINA

Sex

F

S9272975C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9272975C

Name

HU JIN

Birth Date: 15 Nov 1992

Issue Date: 24 Jun 2017



Usage for Insurance Motor Accident Reporting
and Claims Purposes Only

Vehicle no:

3JJ 49055

Date of Accident:

05/09/20



NRIC No. S9272975C



Date of issue
31-01-2012

20 PASIR RIS LINK #08-14
SINGAPORE 518157

NRIC No: S9272975C

Date: 08/05/2016

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 07 Dec 2016

NP 428A





RENEWAL NOTICE

Policy No. : 1800026548-02 V2
 Vehicle Registration No. : SJJ4905S
 Next Period of Insurance : 16 Mar 2020 to 15 Mar 2021

Date : 17 Jan 2020



Scan this QR code to renew
 online or visit
www.aig.sg/renew

Hu Guo Qiang
 20 Pasir Ris Link
 #08-14
 SINGAPORE 518157

RENEWAL PREMIUM

After 5.00% Safe Driver Discount, 5.00% Loyalty Discount & 50% No Claim Discount

Premium Payable (incl. GST): \$1,089.66

ABOUT THE COVER

Sum Insured : Market Value
 Insuring with COE/PARF : Yes Off Peak Car : No
 Driver Restriction : NA
 Age Condition : All Age Condition
 Key Benefits :
 Act of God, Dealer (First 3 years from original registration) + AIG
 Authorised Workshops, In-Car Camera Excess Waiver, Key
 Replacement Cover- \$800, PA to Authorised Driver / Unnamed
 Passengers- \$10000, NCD Protector, PA Insured- \$50000, Waiver of
 Excess, Strike, Riots and Civil Commotions, Loss of Use 1500cc -
 1600cc Optional

EXCESS

Section 1
 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600
 Section 2
 Property Damage - \$0
 Windscreen : \$100
 Named Driver
 Hu Guo Qiang - \$600 (Own Damage), \$600 (Flood Cover)

CHANGES TO POLICY

Please refer to your existing policy documents for full terms and conditions which will be unchanged unless otherwise stated.

IMPORTANT NOTICE

- It is your duty to disclose in this Renewal Notice, fully and faithfully, all the facts which you know or ought to know in respect of this proposed insurance and to ensure that all information provided to AIG Asia Pacific Insurance Pte. Ltd. (AIG) is accurate and updated. Information that you should disclose to AIG would relate to the vehicle and to you or your authorised driver(s). Examples of such information include a change in occupation or nature of business, a change in claim experience, revocation/suspension of driver licence/traffic related convictions, physical impairment(s) or illness(es) affecting driving ability, modification(s) done to the Vehicle or a change in the usage of the Vehicle. These information could result in additional premium being payable by you and different terms and conditions being applied to your policy. If such information is not disclosed to AIG, your policy may be void and you may not receive any benefits under the policy.
- All modifications made to the Vehicle must also be declared to AIG and is subject to AIG's acceptance. If accepted, additional terms and conditions may apply. If you fail to disclose such modifications to AIG, your policy may be void and you may not receive any benefits under the policy.
- In addition to the policy Excess, Young, and/or Inexperienced Driver Excess (YIDR) of \$3000 (before GST) will apply to you or your authorized driver who is below the age of 23 (in the case of All Age Condition policies) and/or has less than 2 years' driving experience. The YIDR Excess is not applicable to (i) Named Driver policies and (ii) any other policies which expressly exclude the YIDR Excess.
- If your policy is subject to Driver's Age Condition, we will indemnify you or any authorised driver only if he/she meets the specified age condition. Please refer to the policy terms and conditions.
- If any accident occurs any time during this renewal notice and the expiry of your current policy resulting in a claim or if AIG increases its claims reserve on an existing claim on or before the expiry of your current policy, the renewal terms quoted on this notice may be revised or AIG may choose to withdraw this renewal offer.
- If you have the NCD Protector benefit, please note that the NCD protected under this benefit is not transferable to any other insurer and an offer to renew your policy is not guaranteed.
- If you have a comprehensive policy, windscreen cover will be automatically reinstated after each windscreen claim at no additional premium. Excess applies unless otherwise stated in the policy terms and conditions.
- If your policy is a private car policy, all third party liability incurred by your authorised driver will be settled by AIG, if payable, even if your authorised driver owns a vehicle insured by another insurer.
- In the event more than one discount applies to your quotation, AIG reserves the right to cap the total discount which will be applied to the quotation.
- To avoid road tax late payment penalty, your renewal and payment instructions must reach AIG at least 14 working days prior to expiry of your current policy. Please do not send the original road tax disc via mail as AIG will not be responsible for the loss of the road tax disc or delay in the road tax renewal.
- Please be reminded that driving or permitting someone to drive an uninsured vehicle may result in suspension of driver's license, fine and/or imprisonment.
- This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact AIG Asia Pacific Insurance Pte. Ltd. or visit the AIG, GIA or SDIC web-sites (www.aig.sg or www.gia.org.sg or www.sdic.org.sg)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

