## 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 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	04/09/2020 12:44
Date Of Accident	04/09/2020 10:15
Exact Location Of Accident	BEDOK RESERVOIR BLK 608 OPEN CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SDQ1191M
Insured/Policyholder	
Name Of Registered Owner	LOW MAGGIE
NRIC No	S0057619J
Email Address	SAMACHEE@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96704987
Alternative Phone No	Home-96704987
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	1900156779
Cover Note Number	
Driver	
Name of Driver	ANTHONY CHEE LENG HIONG
NRIC No	S1227337A
Date Of Birth	09/10/1952

**INDOOR** 

16/03/1988

32 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96647045

Fax Number

**Contact Number** 

EMail Address ANTCHEE1952@YAHOO.COM.SG

Address 22 UPPER SERANGOON VIEW

#07-24 SINGAPORE

Postcode 534204
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured SPOUSE

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 DRY

**Other Information** 

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

3

NO

NO

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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: : LOW MAGGIE

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

If Yes, against whom?

#### **Circumstances of Accident**

AROUND 10:15 AM WHEN I WAS REVERSING INTO A SLOPING PARKING LOT MY CAR HIT THE BACK OF HYUNDAI CAR (SJT7342T) AND THE LEFT SIDE OF KIA CAR (ED75D). THERE WAS NO INJURY. THE OWNERS OF THE TWO CARS CAME DOWN AND DISCUSSED AND EXCHANGED OUR PARTICULARS.

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 SJT7342T

Vehicle Make/Model/Colour HYUNDAI I30

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver ABU SAMAH BIN ABDUL HAMID

NRIC/Passport Number S1576515A Contact Number 88581330

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number ED75D

Vehicle Make/Model/Colour KIA STINGER

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver MR. LOH

NRIC/Passport Number

Contact Number 90097752

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:

- 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.
- (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.

GIANNAC SketchPlanForm\_VB

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

SERVICE

NRIC/FIN No.:

# SKETCH PLAN VEHICLE A VEHICLE B SJT7342T DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DECLARATION I/We declare the foregoing particulars are true in every respect. Driver's Signature Reporting Centre Personnel's Signature (If driver is not the policyholder) Name: NRIC/FIN No.: Date & Time:



# CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Low Maggie

Period of Insurance

: 03 Sep 2019 To 02 Sep 2021

: 3A92UHT1659

Engine No. Chassis No. : MMBSTA13AKH001878 Vehicle No.

: SDQ1191M : 1900156779

Policy No. Endorsement No.

Issued Date

: 16 Sep 2019

ABOUT THE COVER Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT

Erigine Capacity/Tonnage : 1,193.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

a) The Policyholder b) Any ofter person who is driving on the Policyholder's order or with higher parmission. This Policy will indicately the Policyholder or any authorised driver only if heiste meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver (bases" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition Limitation as to use\* :

Use only for social, demands and pleasure surposes and for the Policyholder's business.

This Policy does not cover use for him or reward, diving fullow, driving feet, recing, sect-making, reliability trail or speed-tecting, the carriage of goods either than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1800cc

\* Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cop. 180), Section 66 of the Road Transport Act, 1987 (Malaysia) and 1987

#### EXCESS

Section 1 Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Low Maggie - \$600 (Own Damage)

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

1. Cycle & Cerniage Awthorised Service Centre (For accident reporting & windscreen claim only). Add: 600 Sin Ming Ave Singapore 575733 69328000.
2. Cycle & Cerniage Awthorised Service Centre (For accident reporting & windscreen claim only). Add: 20 Long Kee Re Bingapore 169394-6470888.
3. Cycle & Cerniage Awthorised Service Centre (For accident reporting & windscreen claim only). Add: 330 Ubl Rd 3 Singapore 409650 67461000.
4. Cycle & Cerniage Body & Paint Centre. Add: 209 Pandan Gardens Singapore 609938 68684501.

For other: Approved Reporting ContrasAIG Authorised Regulars, please contact our 24-hour assistent emergency had ne at 465 8333 6200. Alternatively, you may refer to AIG wobsite www.aig.com.sg or AIC 8G Mobile App. Simply search and download "AIG 8G" from ITunes or Google Play.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

I/We hereby certify that the policy to which this Certificas 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 Rose Transport Act, 1997 (Malaysto), Rose Transport (Americans) and Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysto).

0504623210

FULCOMICP2 - PY

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408817

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

Al-3 Asia Pacific Insurance Ptc. Ltd.









YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS[65]

Class 3

Motor cars with unladen weight =< 3000kg with =< 7 passengers, excitative of driver; and other motor vehicles with unladen weight =< 2500kg

with =< 7 16 Mar 198 motor

FOR C&C USE ONLY

NP 428A

License No:S1227337A







































