# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 25/09/2020 17:11

#### SINGAPORE ACCIDENT STATEMENT

#### **IMPORTANT NOTICE**

Occupation

**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 <u>truthful and accurate</u> 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.
- 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.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	25/09/2020 16:52
Date Of Accident	21/09/2020 09:20
Exact Location Of Accident	JUNCTION OF BRAS BASAH & VICTORIA STREET
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMP1284C
Insured/Policyholder	
Name Of Registered Owner	WENDY ONG BEE CHOON
NRIC No	S1632396I
Email Address	ALEX_LER@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97302238
Alternative Phone No	Office-NOPHONE
Vehicle Particulars	
Manufacturer	SUBARU
Model	FORESTER-2.0 I-L EYESIGHT AWD CVT (A)
Exact Purpose for which vehicle was being used at time of accident	LEISURE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	1900162177-01
Cover Note Number	
Driver	
Name of Driver	ALEX LER CHEE HUA
NRIC No	S1607904I
Date Of Birth	24/03/1963

**INDOOR** 

16/04/1981

39 YEARS AND 5 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-97302238

Fax Number

**Contact Number** 

**EMail Address** ALEX\_LER@HOTMAIL.COM

Address Postcode

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 COLLISION - CHANGE/CROSS LANE

2

NO

NO

YES

NO

1

YES

NO

NO

**Weather Conditions CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any injured conveyed to hospital by

Was any body injured in the Accident?

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)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name THOMSON NPP 25 SIN MING ROAD

ROAD: 25 SIN MING ROAD #01-180, POSTCODE: 570025, COUNTRY: **Police Station Address** 

**SINGAPORE** 

**Police Station Contact** TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

Was there any audio recorded?

PLEASE REFER ATTACHED 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 SKK8029C Vehicle Make/Model/Colour AUDI

**Details Of Properties** FRONT RIGHT PORTION Vehicle Category Name of Driver PRIVATE CAR

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

NTUC Income Insurance Co-operative Ltd

Nature Of Damage

No. Of Passenger (Including Driver)

#### **Accident Sketch Plan**

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#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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:

- (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;

werdy ong authorial lette to Alex Lar. Alex

- (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

Policyholder's Signature Date & Time: 25/9/26 n

Driver's Signature (If driver is not the policyholder) Date & Time:

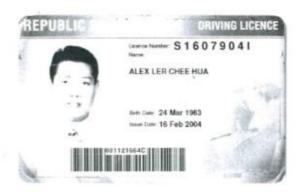
Reporting Centre Personnel's Signature

DANIEL

NRICATIN NO. SXXXX5180



24-03-1963 County/Flace of the SINGAPORE

















#### CERTIFICATE OF INSURANCE

#### SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Wendy Ong Bee Choon
Period of Insurance : 12 Sep 2020 To 11 Sep 2021
Engine No. : FB20YF33242

Engine No.

Chassis No. : JF1SK7KL5KG006683 Vehicle No. : SMP12846 : 1900162177-01 Policy No.

Endorsement No.

Issued Date : 17 Aug 2020

#### ABOUT THE COVER

Make/Model : SUBARU Forester 2.0i-S Eyesight

Engine Capacity/Tonnage : 1,995.00 CC Sum Insured : Market Value First Year of Registration : 2019 Off Peak Car : No Driver Restriction : NA 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 parmission.
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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above Mileage Condition : Unlimited Mileage

Limitation as to use\* :

we only for social, domestic and pleasure purposes and for the Policyholder's business.

A his Policy does not cover use for hire or reward, driving fulfion, 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 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189). Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

#### EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Wendy Ong Bae Choon - \$800 (Own Damage), \$800 (Flood Cover)

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

Motor Image Enterprises Pte Ltd: Add: 19 Lorong 5 Tox Payob Singapore 319255 64170100

For other: Approved Reporting Centres/A/G Authorised Repairers, please contact our 24-hour accident emergency hotine at +85 6338 6200. Alternatively, you may refer to A/G website www.aig.ag or A/G 8G Mobile App. Shrelly search and download "A/G 8G" from Trunes or Google Play.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

Was ferrefly certify that the policy to which this Certificate of treumance relates in issued in accordance with the provisions of the Witter Vehicles (Trind Party Reiss and Compensation) Act (Cap. 100). Part (V of pitte Rosel Transport Act. 1987 (Materylate). Road Transport (American

0500619211

TAN CHONG CREDIT SUBARU-MIT

911 BUKIT TIMAH ROAD

SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pts. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Re: Subaru Forester SMP 1284C Accident & Insurance Report

I, Wendy Ong Bee Choon I/C SXXXX396i owner of SMP 1284C
hereby authorised my husband Alex Ler Chee Hua I/C SXXXX904i
to handle & file any documents related to the above mention on my behalf.
Kindly provide necessary assistance where possible.

Thank you

Wendy Ong Bee Choon

POLICE REPORT

NOTICE OF REPORTING

This is to confirm that I.Alex Ler Chee Hua, NRIC: S16079041, HP: 97302238 has reported to the Police a non-injury traffic accident which occurred at Along X- Junction of Bras basar Road and Victoria Street (20km/hr) on 21/09/2020 at about 0920hrs involving the following vehicles:

#### Vehicles involved:

- 1) SMP1284C (Complainant's vehicle)
- 2) SKK8029C

On the above mentioned date and time, I was driving my vehicle (SMP1284C) along Along X- Junction of Bras basar Road and Victoria Street with a speed of 20km/hr.

At the point of time, my vehicle was travelling on the right lane of bras basar Road making a right turn into Victoria Street. While my vehicle was in midst of making a right turn with a speed of 20km/hr, A vehicle (SKK8029C) hit onto the right rear of my vehicle Causing some dent and damages to my vehicle's paintwork.

I would wish to state that there was no police or ambulance attended to the accident. My vehicle does have front and rear in-built camera however the camera did not capture the footage of the accident.

I am doing this report for a record and insruance claim purposes.

If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(3) T160292 Jason Tan

Date: 21/09/2020 Time: 1521hrs

S/D Ref: 45

Police Post/ Unit: Thomson Neighbourhood Police Post

THOMSON NPP HLK 25 SIN MING PERAP #01-80

INGAPORE 570025









































**Accident Photo** 



