

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	30/09/2020 14:45
Date Of Accident	30/09/2020 11:15
Exact Location Of Accident	ANG MO KIO AVENUE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU6065H
Insured/Policyholder	
Name Of Registered Owner	TAY CHIT NEO
NRIC No	S1104273B
Email Address	BOBLIM63@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91596929
Alternative Phone No	Office-91596929

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 DUAL
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
If 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	2100423168-05
Cover Note Number	

Driver

Name of Driver	TAY CHIT NEO
NRIC No	S1104273B
Date Of Birth	02/03/1940
Occupation	INDOOR
Date Of Driving Pass	05/03/1970
Driving Experience	50 YEARS AND 6 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-91596929
Fax Number	
Contact Number	OFFICE-91596929
EEmail Address	BOBLIM63@GMAIL.COM
Address	11 WESTLAKE AVENUE
Postcode	574220
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
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

Please refer to Sketch Plan.

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	SKC4349Y
Vehicle Make/Model/Colour	
Details Of Properties	
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

SKETCH PLAN

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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;
 - (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.

Jay Chit neo

Policyholder's Signature

Date & Time:

30/9/20 2:35

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Tracia Leong

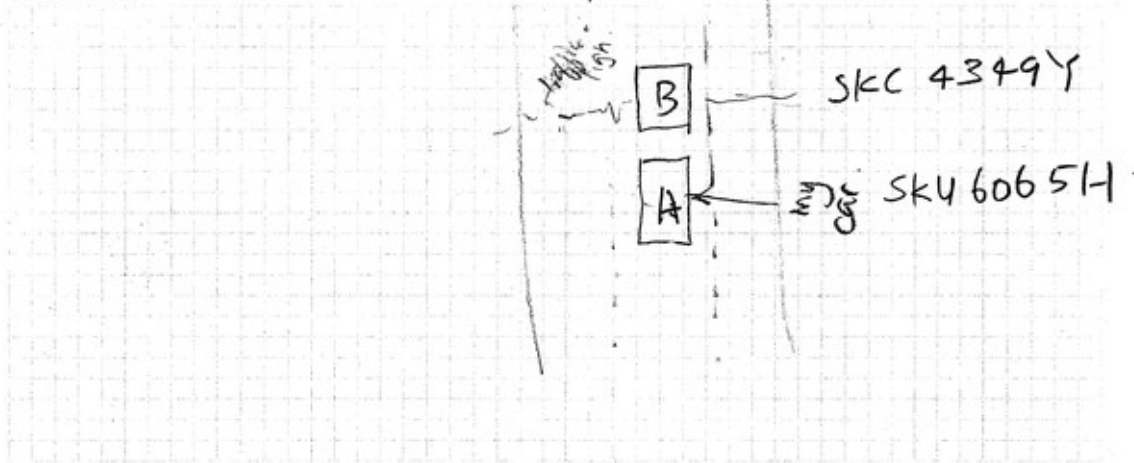
Reporting Centre Personnel's Signature

Name: Tracia Leong

NRIC/FIN No.:

30 SEP 2020

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30th Sept at 11.15^{am}, I stopped at a traffic light at Ang Mo Kio Ave 3, in the middle lane. ^{red} When the light changed to green, the car in front, SKC 4349 Y, started moving. My car, SKU 6065 H, followed suit. SKC 4349 Y did not accelerate, like I expected him to, and subsequently my car bumped into his back bumper.

DECLARATION

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

Jay Chit Neo

Policyholder's Signature

Date & Time:

30/9/20 2:35

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Leong

Reporting Centre Personnel's Signature

Name: Tracia Leong

NRIC/FIN No.:

30 SEP 2020

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1104273B



Name

TAY CHIT NEO

鄭 識 娘

Race

CHINESE

Date of birth

02-03-1940

Country/Place of birth

SINGAPORE

Sex

F

S1104273B



5926640



NRIC No. S1104273B



Date of issue

30-04-2018

Address

11 WESTLAKE AVENUE
SINGAPORE 574220

Driving License



Insurance Certificate



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Tay Chit Neo
Period of Insurance : 04 Aug 2020 To 03 Aug 2021
Engine No. : 1ZR5519550
Chassis No. : MR053REH104535274

Vehicle No. : SKU6065H
Policy No. : 2100423168-05
Endorsement No. : 2100423168-05
Issued Date : 26 Jul 2020

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6 DUAL
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2015
Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

a) The Policyholder
 b) Any other person who is driving on the Policyholder's behalf or with his/her permission.
 This Policy will indemnify the Policyholder or any authorized 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" ("YIDE") if You are or Your Authorized Driver (named or unnamed) is under the age of 22 and/or has less than 2 years driving experience.

Age Condition : All Age Condition
Mileage Condition : Unlimited Mileage
Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's surprise. This Policy does not cover use for hire or reward, driving school, racing, pace-making, mobility trial or sports testing. The percentage of goods other than samples 5% per annum with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Conditions imposed independent by Section 3 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 18B), 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 - \$1,000 Damage - \$3100 Theft - \$0 Flood Cover - \$3100

Section 2
 Property Damage - \$0

Workshop - \$100

Named Driver and Excess (where applicable)

Tay Chit Neo - \$2100 (Fire Damage), \$3100 (Flood Cover)

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

Approved Reporting Centres/ AIG Authorized Repairs (for claims related repairs)
 Any accident repairs to the Vehicle must be carried out by one of our Authorized Repairers. Within the first 2 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 Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.sg or AIG 100 Mobile App. Simply search and download "AIG 100" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

We 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. 18B) and the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1958 (Malaysia).

SH19001000
 LIM TIONG KHENG

3 TAMPINES GRANDE #03-25 AIA TAMPINES
 SINGAPORE 628796 SP-EDWIN DAVIDONG
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

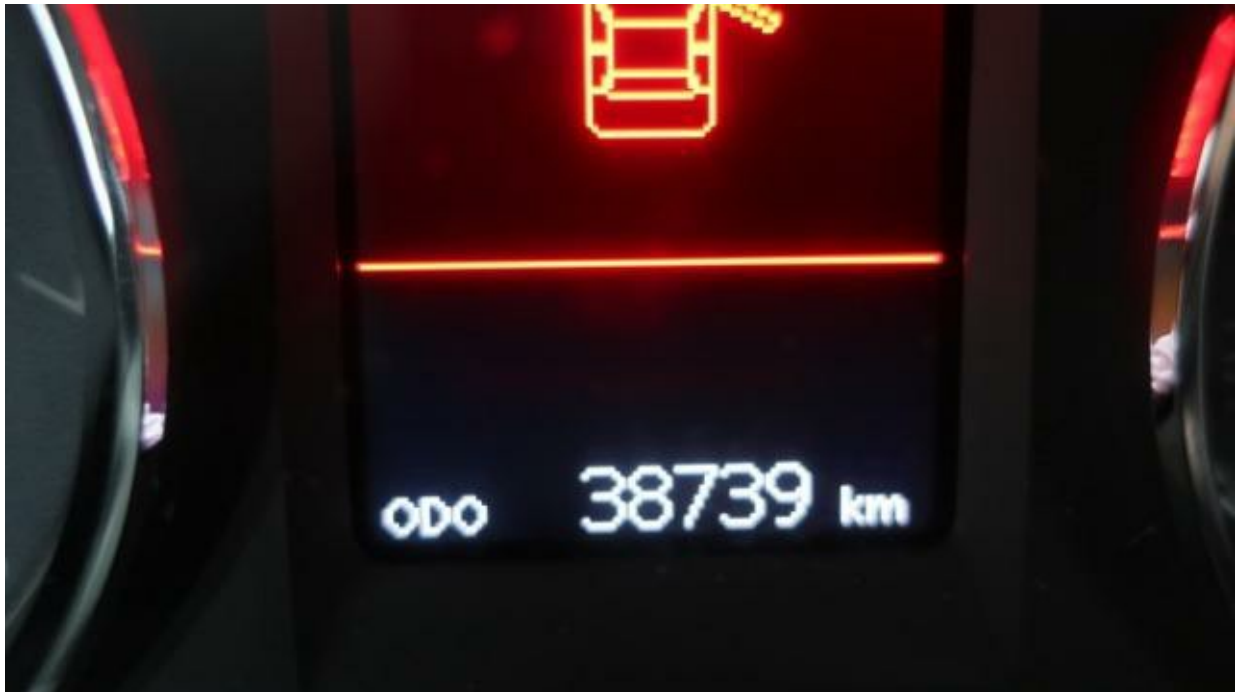
AIG Asia Pacific Insurance Pte. Ltd.
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EWING CHENG 016

Chassis Number



Odometer Reading



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

