

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	05/10/2020 13:58
Date Of Accident	03/10/2020 08:50
Exact Location Of Accident	TAMPINES AVE 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX1231L
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Insured/Policyholder

Name Of Registered Owner	WANG KUN
NRIC No	S8166949Z
Email Address	WANGKUN1207@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91837271
Alternative Phone No	Others-91837271

Vehicle Particulars

Manufacturer	CITROEN
Model	C4 PICASSO 1.6 BLUEHDI EAT6
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?	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	2100440295
Cover Note Number	

Driver

Name of Driver	WANG KUN
NRIC No	S8166949Z
Date Of Birth	07/12/1981
Occupation	INDOOR
Date Of Driving Pass	18/03/2011
Driving Experience	9 YEARS AND 6 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-91837271
Fax Number	
Contact Number	OTHERS-91837271
EMail Address	WANGKUN1207@HOTMAIL.COM
Address	BLK 185B RIVERVALE CRESCENT #09-115
Postcode	542185
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	SIDE SWIPE
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?	
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)	2
Passenger 1	Name: : WANG QINZE Gender: : Male

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 ATTACHED.

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	SHA9439J
Vehicle Make/Model/Colour	TOYOTA / PRIUS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MICHAEL SEE YONG TENG

NRIC/Passport Number	S0038686C
Contact Number	96822144
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

Protected by Symantec

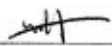
SKETCH PLAN

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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.


 Policyholder's Signature

Date & Time: 5-Oct-2020 12:30

Driver's Signature

 (If driver is not the policyholder)
 Date & Time:


 Reporting Centre Personnel's Signature

 Name:
 NRIC/FIN No.:

REF: 13012020

SKETCH PLAN

Refer to the attach.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 3 Oct 2020 about 8:50 am in the morning, I was driving my way to Century Square via Tampines Ave 7. I stopped at the junction of Tampines Ave 7 and Tampines Ave 4, waited the traffic light to turn green.

After the traffic ~~light~~ light turned green and all the straight running car run through, I turned right to the first lane of Tampines Ave 4. Meanwhile, a yellow taxi (SHA9439J) came from my opposite direction turned left from Tampines Ave 7 to Tampines Ave 4, and it entered lane 2. I was driving at very slow speed (about 20 km/h) as I just finished turning.

However, the yellow taxi suddenly speed up and at the same time it attempted to change lane from Lane 2 to Lane 1. My car was just at the right side of the taxi, as it came so sudden and so fast, I had no time to slow down or stop to avoid the crash. As a result, the yellow taxi ran into my lane and hit the front left side of my car. After the collision, I immediately stopped at that location. The yellow taxi drove back to his lane and continuously drove forward more than 10 meters further before stop.

DECLARATION

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



Policyholder's Signature

Date & Time: 5-Oct-2020, 13:30

Driver's Signature

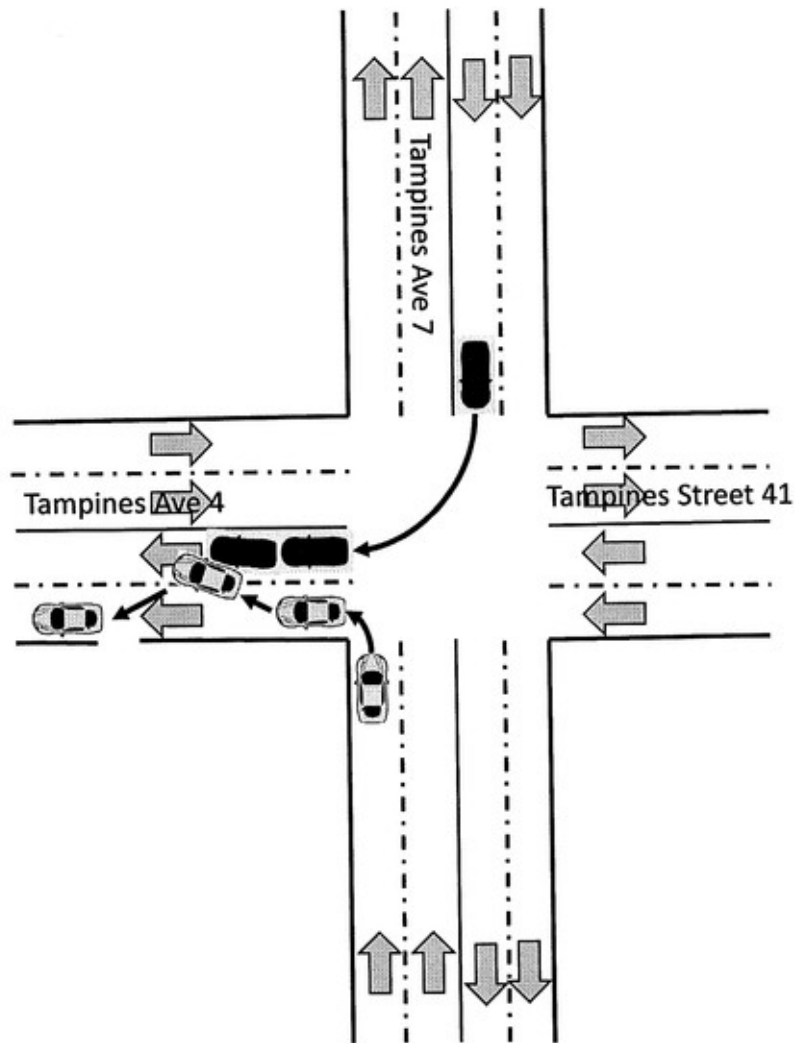
(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Car A
SKX1231L



Car B
SHA9439J

Wang Kun 88168442
Public



CERTIFICATE OF INSURANCE

CITROEN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Wang Kun
Period of Insurance : 27 Nov 2019 To 26 Nov 2020
Engine No. : 10JBHD3013293
Chassis No. : VF73DBH2TFJ757942

Vehicle No. : SKX1231L
Policy No. : 2100440295-04
Endorsement No. :
Issued Date : 19 Oct 2019

ABOUT THE COVER

Make/Model : CITROEN C4 Picasso 1.6 Blue HDi eAT6
Engine Capacity/Tonnage : 1,560.00 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 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), 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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Wang Kun - \$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: 20 Long Keo Rd Singapore 159094 64708600

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.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: GOLDBELL LEASING PTE 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. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504485217

CYCLE & CARRIAGE - WENDYN

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

AIGSGMOBILEAPP

Driving License



Driving License



Identification Card

IC COLLECTION SLIP FOR NEW SINGAPORE CITIZEN



NRIC NO: S8166949Z (PINK IC)

FEES: \$10.00

NAME: WANG KUN

DATE OF ISSUE: 15/09/2020

REGISTRATION OFFICER: MOHAYANI BINTE MOHAMED

APP ID: FC.202009151653.949.0706.REN

DOCUMENTS ARE TO BE PRESENTED AT GRC CITIZENSHIP CEREMONY



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

