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 <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

aforesaid.		
	ACCIDENT STATEMENT	
Date Of Report	22/10/2020 12:24	
Date Of Accident	22/10/2020 09:05	
Exact Location Of Accident	SELETAR ROAD & YIO CHU KANG JUNCTION	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SGV1405K	
Insured/Policyholder		
Name Of Registered Owner	ONG WEE TERK	
NRIC No	SXXXX614E	
Email Address	ALVINONGWT@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-98319311	
Alternative Phone No	OFFICE-98319311	
Vehicle Particulars		
Manufacturer	TOYOTA	
Model	VIOS-1.5 G (A)	
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USAGE	
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	210024768-13	
Cover Note Number		
Driver		

Name of Driver

ONG WEE TERK

NRIC No

SXXXX614E

Date Of Birth

Occupation

INDOOR

Date Of Driving Pass

ONG WEE TERK

INDOOR

07/01/1985

Driving Experience 35 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98319311

Fax Number

Contact Number OFFICE-98319311

EMail Address ALVINONGWT@GMAIL.COM

Address 93 NERAM ROAD

Postcode 807788

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 CHAIN COLLISION

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

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.

Number of Passengers (Including Driver)

4

NO

NO

NO

Passenger 1 NAME:

GENDER: : FEMALE

: ISABELLE SEAH

Passenger 2 NAME: : ONG KIAN HAO

GENDER: : MALE

Passenger 3 NAME: : ONG MIN RAY

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?

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT

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 SKU8770S

Vehicle Make/Model/Colour BMW

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver CLARITY PANG

NRIC/Passport Number

Contact Number 96284159

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGT2357U

Vehicle Make/Model/Colour HONDA CIVIC

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver CAROL

NRIC/Passport Number

Contact Number 91666933

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Protected By Symantec

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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

MARANCE PRESENTANCE VI

Date & Time: 22/10/20 11.55 am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Y'so Chu Kong Rd 10 + SQT 2357M SKU SKU STIOS - OS My Car EGV 1405 K STIOS - OS IND ON 22 OCT 20, I Atop my Co SQV 1405 K behind SGT 2357 V duc to red light. A car driven by Clarity Pang cur no. SKU hit me from behind with great for a Causing my car to hit the front car SGT 2357 U. My car back was badly damaged at the The front bonnet was also damaged.	
SKU STOS SELETAT Rd. SCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 am on 22 oct 20, I stop my of Sq V 1405 K behind S 977 2357 a due to red light. A car driven by clarity Pang car no. SKU hit me from behind with great for a Causing my car to hit the front car SGT 2357 u.	
SKU STOS THE ACCIDENT SCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 am on 22 oct 20, I stop my or Sq V 1405 K behind S 977 2357 a due to red light. A car driven by clarity Pang cur no. SKU hit me from behind with great for a Causing my car to hit the front car SGT 2357 u.	
SKU STOS SELETAT Rd. SCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 am on 22 oct 20, I stop my of Sq V 1405 K behind S 977 2357 a due to red light. A car driven by clarity Pang car no. SKU hit me from behind with great for a Causing my car to hit the front car SGT 2357 u.	
SKU STOS THE ACCIDENT SCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 am on 22 oct 20, I stop my or Sq V 1405 K behind S 977 2357 a due to red light. A car driven by clarity Pang cur no. SKU hit me from behind with great for a Causing my car to hit the front car SGT 2357 u.	
SKU SKU SKU SKU SCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 nm on 22 Oct 20, I stop my of Sq V 1405 ic behind S GT 2357 n duc to red light. A car driven by clarity Pang cur no. Sku hit me from behind with great for a Causing my car to hit the front car SGT 2357 u.	
SCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 nm on 22 Oct 20, I stop my of Sqv 1405 K behind S 9T 2357 n due to red light. A car driven by clarity Pang cur no. SKN hit me from behind with great for a Causing my car to hit the front car SGT 2357 u.	
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 um on 22 Oct 20, I stop my on Sq V 1405 ic behind S 9T 2357 u due to red light. A car driven by clarity Pang cur no. Sku hit me from behind with great for a Causing my car to hit the front cur SGT 2357 u.	
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT At 9.05 um on 22 Oct 20, I stop my on Sq V 1405 ic behind S 9T 2357 u due to red light. A car driven by clarity Pang cur no. Sku hit me from behind with great for a Causing my car to hit the front cur SGT 2357 u.	
At 9.05 um on 22 Oct 20, I stop my of Sq v 1405 ik behind S 9T 2357 u due to red light. A car driven by clarity Pang cur no. Sku hit me from behind with great for a couring my car to hit the front car SGT 2327 u.	
At 9.05 um on 22 Oct 20, I stop my of Sq v 1405 ik behind S 9T 2357 u due to red light. A car driven by clarity Pang cur no. Sku hit me from behind with great for a couring my car to hit the front car SGT 2327 u.	
At 9.05 nm on 22 Oct 20, I stop my of SQV1405 K behind SQT 2357 n duc to red light. A car driven by clarity Pang cur no. SKU nit me from behind with great for a couring my car to hit the front car SQT 2327 U.	1.A.J.A.L.
SQV1405 K behind SQT 2357 u due to red light. A car driven by clarity Pang cur no. SKU hit me from behind with great for a couring my car to hit the front car SQT 2357 U.	
red light. A can driven by clarity Pang cur no. Sku hit me from behind with great for a couring my car to hit the front car SGT 2327 U.	ar
A can driven by clarity Pang cur no. Sku hit me from hethird with great for a cousing my car to hit the front car SGT 2327 U.	
couring my our to hit the bront car	
SGT 2327 U.	(8770
59T 12357 U.	ce
my can back was body damaged at the The front bornet was also damaged.	
The front bonnet was also damaged.	
The front bonnet was also damaged.	600T.
CLARATION	
Adeclare the foregoing particulars are true in every respect	
Mywither 12	

Policyholder's Signature Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Possonnel's Signature

Name:

NRIC/FIN No.:



CERTIFICATE OF INSURANCE

PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

Name of Policyholder : Ong Wee Terk

Vehicle No.

: SGV1405K

Period of Insurance : 06 Jun 2020 To 05 Jun 2021

Policy No. Endorsement No. : 2100024768-13

Engine No. Chassis No.

: 1NZX563254 : MR053HY9305007643

Issued Date

: 06 May 2020

ABOUT THE COVER

Make/Model

: TOYOTA VIOS

Sum Insured : Market Value

First Year of Registration : 2007

Engine Capacity/Tonnage: 1,497.00 CC Driver Restriction

: NA

Off Peak Car : No

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 permission.
This Policy will indemnify the Policyholder or any authorised driver only if helishe meets the specified age condition.

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 fultion, 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.

* 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 Theft - \$0

Property Damage - \$0

Windscreen: NA

Named Driver and Excess (where applicable)

Ong Wee Terk

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)
Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).
For Approved Reporting Centres/MG Authorised Reppairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.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: HONG LEONG FINANCE LTD

I/We hereby certify that the policy to which this Certificate of Insurance reletes 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).

0030210452

AIG - AUTO DIRECT

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.













































