### 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.

	ACCIDENT STATEMENT
Date Of Report	05/11/2020 09:48
Date Of Accident	04/11/2020 17:00
Exact Location Of Accident	THOMSON RD, TURNINNG INTO MOULMEAIN RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SFD9781C	
Insured/Policyholder		
Name Of Registered Owner	TAN PUAY HIN	
NRIC No	S0150489D	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-97564802	
Alternative Phone No	OFFICE-NOPHONE	
Vehicle Particulars		

Manufacturer TOYOTA

Model LEXUS GS250 STANDARD AUTO

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?

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 2100354113-07

Cover Note Number

**Driver** 

Name of Driver TAN LI MIN, BERNY

NRIC No S9013002A

Date Of Birth 13/04/1990

Occupation INDOOR

Date Of Driving Pass 23/06/2009

Driving Experience 11 YEARS AND 4 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-98263519

Fax Number

Contact Number

EMail Address BERNYTLM@GMAIL.COM

Address 19 SHELFORD ROAD

#04-52

Postcode 288408

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

ambulance?

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?

Was any injured conveyed to hospital by

NO YES

Was any other material or property damaged?

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 THE 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 SKR9781D

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver KUAH WEE HAR

NRIC/Passport Number S1568208F Contact Number 96843150

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:

- 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
- (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.

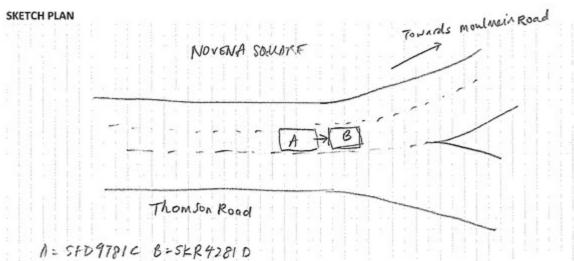
Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time: 5/11/2020. 9.50Am

Reporting Centre Personne Ignature

NRIC/FIN No.:



LICENSE PLATE: SFD 9781 D	ACCIDENT DATE & TIME: 4/11/2020, 5 pm
CONTACT NUMBER: 98263519	E-MAIL ADDRESS: BERNYTLM@6MAIL.60M
LOCATION: A long Thomason Kond,	turning into Montmein Road, outside Volocity/Novena S
Al Googge makely Cam and H Nov	traffit
from & Thomson Road into Mou	-mein Road. The car in front of me moved forward
story, so I inched forward and	then the aftempted to brake. However my hoot
slipped and lended up pressing	down on the accelerator, colliday with the car
ty bout of we.	
NOTE: DI EASE NOTE THAT VOLID INSI	URER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN
	N POLICY, PLEASE CHECK YOUR POLICY FOR MORE INFORMATION
Please slate:	
(Claim Own Policy ( ) Claim Third	Party ( ) Claim OD/TP at other workshop ( ) Reporting Only
DECLARATION	
We declare the foregoing particulars are true in e	every respect.
and The	W XX
olicyholder's Signature Driver's Signature (If driver is	s not the policyholder) Name:
5/11/2020 10 am Date & Tin	me: S/11/2020.9.50am NRIC/FIN No.:



# CERTIFICATE OF INSURANCE

### AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : Tan Puay Hin Vehicle No. : SFD9781C : 18 Oct 2020 To 17 Oct 2021 Policy No. : 2100354113-07 Period of Insurance

: 4GR0931925 Endorsement No. Engine No.

Chassis No. : JTHBF1BL905009012 **Issued Date** : 25 Sep 2020

### ABOUT THE COVER

Make/Model : LEXUS GS250

Engine Capacity/Tonnage : 2,500.00 CC Sum Insured : Market Value First Year of Registration : 2013 Off Peak Car : No Insuring with COE/PARF : Yes Driver Restriction : NA

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 mests the specified ago condition

You have to pay an additional sum of \$3,000 as "Young anti/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.

Mileage Condition : Unlimited Mileage 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

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Componisation) Act (Cap. 189), Section 95 of the Road Transport Act, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under those headings.

#### EXCESS

Section 1 Fire - 50 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0 Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Puay Hin - \$800 (Own Damage), \$800 (Flood Cover)

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

Approved Reparing Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident regains to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency holline 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 Iffunes or Google Play.

### IMPORTANT NOTES

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

I/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 5 the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

0030211000

AIG ASIA PACIFIC INSURANCE PL

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

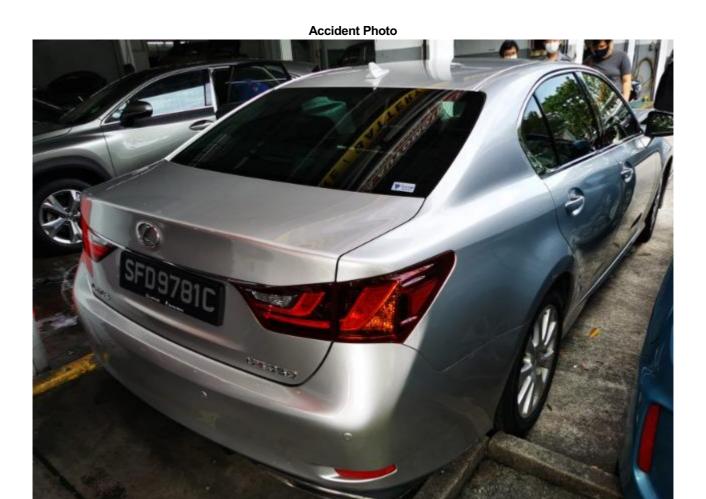
SSPLLC











**Accident Photo** 

















