

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	25/11/2020 17:13
Date Of Accident	25/11/2020 08:20
Exact Location Of Accident	AYE JUST EXITED MCE (TWDS JURONG)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF4432Z
Insured/Policyholder	
Name Of Registered Owner	JIMMY GOH KOCK KENG
NRIC No	S7497250J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98470539
Alternative Phone No	OTHERS-98470539

Vehicle Particulars

Manufacturer	LAND ROVER
Model	DISCOVERY SPORT-2.0 HSE (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
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	1700066376-03
Cover Note Number	

Driver

Name of Driver	FERYANA HALIM
NRIC No	S7572864F
Date Of Birth	04/02/1975
Occupation	INDOOR
Date Of Driving Pass	24/06/2006
Driving Experience	14 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98413259
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 1 CHAI CHEE ROAD #03-206
Postcode	461001
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	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	4
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)	2
Passenger 1	NAME: : JIMMY GOH KOCK KENG 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

REFER TO ATTACHMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB992G
Vehicle Make/Model/Colour	TAXI TOYOTA PRIUS MAROON
Details Of Properties	BALY INDENTED BONNET
Vehicle Category	TAXI
Name of Driver	TAN SOON BENG
NRIC/Passport Number	S1703065E
Contact Number	91816008
Address	
Postcode	
Insurance Company Name	MS FIRST CAPITAL INSURANCE LTD
Nature Of Damage	

No. Of Passenger (Including Driver) 4

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMP8917P
Vehicle Make/Model/Colour VOLKSWAGEN TIGUAN BLACK
Details Of Properties MILD SCRATCH TO REAR BUMPER
Vehicle Category PRIVATE CAR
Name of Driver CHAN YEOK FAI
NRIC/Passport Number S1671672C
Contact Number 96931890
Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver) 2

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLD5568H
Vehicle Make/Model/Colour SUBARU XV/ MATCHA LATTE
Details Of Properties NO DAMAGE
Vehicle Category PRIVATE CAR
Name of Driver BENG LI HUI HAZEL
NRIC/Passport Number S8405565D
Contact Number 83828484
Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver) 1

Accident Sketch Plan

SKETCH PLAN

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5. 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)**

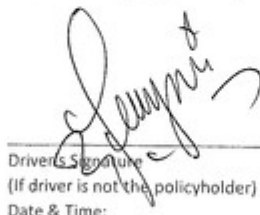
I understand, acknowledge, agree and consent that:

- (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;
 - (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:

25 Nov 2020
9:30 am



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

25 Nov 2020
9:30 am

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

51687
PL-TP

SINGAPORE ACCIDENT STATEMENT	
IMPORTANT NOTICE	
1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for filing. 2. Please report <u>correctly</u> the details of the accident to speed up the claims process. 3. This Form must be completed by the Policyholder and/or the Authorised Driver. 4. 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 repudiate policy liability. 5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies. 6. <u>Any false reporting may be referred to the Traffic Police Department for investigation.</u>	
ACCIDENT STATEMENT	
Date and Time of Accident	Date: 25 Nov '20 Time: ~ 8:20 am
Exact Location of Accident	AYE, just exited MCE (towards Jurong)
DETAILS OF OWN VEHICLE	GPS coordinates 1.27263, 103.85377
Vehicle Registration Number	SKF 4432 Z
INSURED / POLICYHOLDER (OWN VEHICLE)	
Name of Registered Owner (See Insurance Cert.)	Jimmy Goh Kock Keng
Personal Identification - NRIC (Singaporean/PR)	S7497250 J
- FIN/Passport Number	
- Not Applicable	
VEHICLE PARTICULARS (OWN VEHICLE)	
Vehicle Make / Model	Manufacturer Land Rover Model Discovery
Type of Vehicle*	<input type="radio"/> Saloon <input checked="" type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input type="radio"/> Others, _____
Exact Purpose for which vehicle was being used at time of accident	Social
Are you claiming under your own insurance policy for repair to your vehicle?	<input type="radio"/> Yes <input type="radio"/> No (If No, Pts select: <input checked="" type="radio"/> Third Party <input type="radio"/> Reporting)
Vehicle Category*	<input checked="" type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle
INSURANCE COMPANY (OWN VEHICLE)	
Name of Insurance Company*	Alh
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input checked="" type="radio"/> No
Policy Number	1700066376-03
Motor CI	
DRIVER	<input type="radio"/> Same as Insured above
Name of Driver	Feryana Halim
Personal Identification - NRIC (Singaporean/PR)	S7572864F
- FIN/Passport Number	
Date of Birth	04 dd/ 02 mm/ 1975 yy
Driving Date Pass	24 dd/ 06 mm/ 2006 yy
Year of Driving Experience	Year(s) _____ Month(s) _____
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor
Gender	<input type="radio"/> Male <input checked="" type="radio"/> Female
Contact Number / Mobile Phone / Fax No.	98470539 / 98413259

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Address of Driver	BKK 1 Chai Chee Road #03-206		Postcode (46100)
Email Address			
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If No, Relationship of the Driver with the Insured	Spouse		
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Vehicle Registration Number of Driver's Own Vehicle (if applicable)			
Insurance Company of Driver's Own Vehicle (if applicable)			
GENERAL INFORMATION OF THE ACCIDENT			
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	Chain, 4 vehicles (Car #2)		
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others		
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others		
OTHER INFORMATION			
Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Was any other vehicle or property damaged?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Was there any video captured by Car Camera?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Number of Passengers (Including Driver)	2		
DETAILS OF POLICE ACTION			
Was the Accident reported to the Police?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, please state which Police Station.)		
Police Station Name			
Police Station Address			
Police Station Contact	Tel No.	Fax No.	
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, against whom?)		
DETAILS OF OTHER VEHICLE / PROPERTY 1			
Car # 1			
Vehicle Registration Number	SMP 8917 P		
Vehicle Make/ Model/ Colour	Volkswagen Tiguan / Black		
Details of Properties			
Name of Driver	CHAN YEOK FAI		
Personal Identification - NRIC (Singaporean/PR)	S1671672 C		
- FIN/Passport Number			
Contact Number	96931890		
Address	808 Bedok Reservoir Rd #10-06 S(479240)		
Name of Insurance Company			
Nature of Damage	Mild scratch to rear bumper		
No. of Passenger (Including Driver)	2		

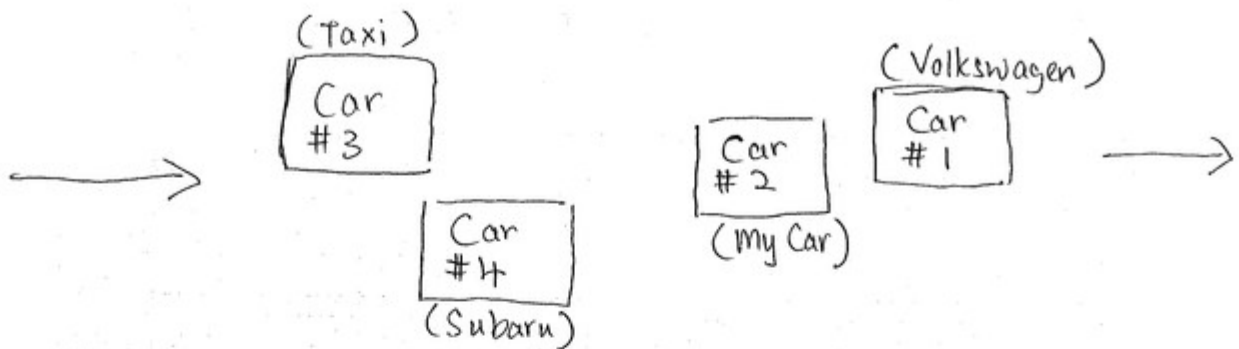
DETAILS OF OTHER VEHICLE / PROPERTY 2		Car #3
Vehicle Registration Number	SHB 992 G	
Vehicle Make/ Model/ Colour	SMRT Taxi Toyota Prius / Maroon	
Details of Properties		
Name of Driver	TAN SOON BENG	
Personal Identification - NRIC (Singaporean/PR)	S1703065 E	
- FIN/Passport Number		
Contact Number	9181 6008	
Address		
Name of Insurance Company		
Nature of Damage	Badly indented bonnet	
No. of Passenger (Including Driver)	3 or 4	

DETAILS OF OTHER VEHICLE / PROPERTY 3		Car #4
Vehicle Registration Number	SLD 5568 H	
Vehicle Make/ Model/ Colour	Subaru XV / matcha Latte	
Details of Properties		
Name of Driver	BENG LI HUI, HAZEL	
Personal Identification - NRIC (Singaporean/PR)	S8405565 D	
- FIN/Passport Number		
Contact Number	8382 8484	
Address		
Name of Insurance Company		
Nature of Damage	No damage	
No. of Passenger (Including Driver)	1	

DETAILS OF OTHER VEHICLE / PROPERTY 4	
Vehicle Registration Number	
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Contact Number	
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	

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SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At approximately 820 am ; on Lane 1 on AYE towards Jurong .


- 1) Car #1 jam-braked
- 2) I jam braked my car (Car #2)
- 3) Car #3 (taxi) rear-ended my car and propelled my car forward , causing my car to hit Car #1 with minor impact .
- 4) Car #4 (Subaru XV) swerved to the right and avoided collision with Car #3 . Stopped beside Car #3 . Car #4 did not hit ~~car~~^{my} car .

DECLARATION

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


Policyholder's Signature
Date & Time:

25 Nov 2020
9:30 am


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

25 Nov 2020
9:30 am

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (LAND ROVER) PRIVATE VEHICLE

Name of Policyholder : Jimmy Goh Kock Keng
Period of Insurance : 22 Sep 2020 To 21 Sep 2021
Engine No. : 170620W0309204DT
Chassis No. : SALCA2AN1HH716203

Vehicle No. : SKF4432Z
Policy No. : 1700066376-03
Endorsement No. :
Issued Date : 04 Sep 2020

ABOUT THE COVER

Make/Model : LANDROVER Discovery Sport 2.0D SE
Engine Capacity/Tonnage : 1,999.00 CC
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 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.

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2017
Insuring with COE/PARF : Yes

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 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 2000cc

* 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 - \$900 Theft - \$0 Flood Cover - \$900

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Jimmy Goh Kock Keng - \$900 (Own Damage), \$900 (Flood Cover)

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

1. Wearn's Automotive Pte Ltd Add: 45 Leng Kee Road, Singapore 159103 63789333

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.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: NA

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).

0503486656

WEARNES AUTOMOTIVE - ST (LR)

45 LENG KEE ROAD
 SINGAPORE 159103


Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AIGSGMOBILEAPP

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7497250J



Name
JIMMY GOH KOCK KENG
(JIMMY WU GUOQING)
吴国庆

Race
CHINESE

Date of birth
31-10-1974

Sex
M

Country of birth
MALAYSIA

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7572864F



Name
FERYANA HALIM

Race
CHINESE

Date of Birth
04-02-1975

Sex
F

Country of Birth
INDONESIA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7572864F



Name
FERYANA HALIM

Birth Date: 04 Feb 1975

Issue Date: 24 Jun 2006

0014277438

3672155



NRIC No. S7497250J



Date of issue
05-02-2005


Address
APT BLK 1 CHAI CHEE ROAD
#03-206
SINGAPORE 461001

3135214

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(IES)

3672155

NRIC No. S7572864F



Blood Group
O+

Date of issue
10-03-2000

APT BLK 1 CHAI CHEE ROAD #03-206
SINGAPORE 461001

NRIC No: S7572864F Date: 12-05-2002 No: 4342820

NP 42SA

Class 3A Motor cars without clutch pedals (Auto) <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals <= 2500kg

PASS DATE
24 Jun 2006

Licence No: S7572864F

NOTICE OF REPORTING

CONFIDENTIAL

ANNEX E

NOTICE OF REPORTING

This is to confirm that FERYANA HALIM, S7572864F , Tel: 98413259 has reported to the Police a non-injury traffic accident which occurred AYE, just exited MCE (towards Jurong) on 25/11/2020 at 08:20am. Involving the following vehicles:-

- i) SKF 4432Z (Complainant vehicle)
- ii) SHB 992G (SMRT Taxi, Toyota prius, Maroon)
- iii) SMP 8917P (Volkswagen Tiguan, Black)
- iv) SLD 5568H (Subaru XV, White)

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

Rank/Name of Issuing Officer: SGT T160376 Jonathan

Date: 25/11/2020

Time: 1106hrs

Station Diary ref: 21

Police Post/Unit: Bedok South NPC


Bedok South NPC
No. 20 Chai Chee Drive
Singapore 469045
Tel: 1800-2448999

CONFIDENTIAL

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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