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SN0820C30003 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 03/12/2020 13:55 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (03/12/2020 13:55 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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.

- Any false reporting may be referred to the Police for investigation.
 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 Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

03/12/2020 13:55 (SGT) 02/12/2020 09:15 (SGT) Bras Basah, Singapore NICOLL HIGHWAY Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLV8079m

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

TAN SENG POH

SXXXX100J

tansengpoh1961@gmail.com (Phone) +65-96799229

+65-96799229

VEHICLE PARTICULARS

Manufacturer

Model

Variant

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?

Vehicle Category

Mitsubishi

Attrage

Private hire

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

AIG

Comprehensive

No

1800003017-02

DRIVER

Name of Driver

NRIC No

TAN SENG POH SXXXX100J

Date Of Driving Pass 15/12/1978 Driving experience 42 YEARS Gender Male Mobile Number (Phone) +65-96799229 Alt. Phone Number +65-96799229 Email Address tansengpoh1961@gmail.com Address BLK 330 #07-379 Address complement SERANGOON AVENUE 3 Postcode 550330 is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Head to Rear Weather Conditions DRIZZLING Road Surface Wet

Dad Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

No
Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No

PASSENGER 1

Name UNKNOWN Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police? No 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?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Private hire

Address	200
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	(e)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be commissed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any within 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 falso 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
- 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, admondedge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/ere 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 tirms, 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 ciaims;
 - (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 chains. (collectively the
 - all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/ten 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.
 - 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. (d)
 - (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.

Policyhulder's Date & Time:

(ti driver is not the policyholder)

Date & Time:

Name:

MRIC/File No.:

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CONDUCT CHAIRPINFORM V3

ACCIDENT STATEMENT

9:5	ACCIDENT DATE: 02,12, 300 (DD/MM/YYYY), TIME: 09: 15 J(HHMM)
	LOCATION: Poras Basah Rd traffer Juneten of Nicoll Hu
	1. DETAILS OF VEHICLE OLVEHICLE NUMBER: SLV 8079M DINSURANCE COMPANY: ALCA
	CIPOLICY NUMBER:
	OJPOUCYTYPE (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
	FITYPE (SATOON) COUPE / MPV /VAN / LORRY / MOTORCYCLE / OTHERS)
	DIVEHICLE CATEGORY: [PRIVATE / COMMERCIAL / MOTORCYCLE]
	IT ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (YES/MO) IF NO, PLEASE STATE (THIRD PARTY CLAIM? REPORTING ONLY)
	ANAME TON SANG PON. (MALE/FEMALE)
22	binric/fin/passport: 314791003 Contact: 96799229
, in 1	c)ADDRESS
	* CONTINUE TO 3.d IF DRIVER ALSO POUCY HOLDER
Allo of bazza	SINAME: OS CLEVE (MALE/FEMALE)
Elnduding di	binec/fin/Passport: Contact:
(2)	c]ADDRESS:
	*didate of BIRTH: LET 1 051 1961 HODOMMMY : *JOCCUPATION: (INDOOR LOUIDOOR) 5/12/1978
	4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES' 80)
	5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS_CC32(12)
	6. WAS ANYBODY INJURED (YES (NO)
a (C	7. a) REPORTED TO POLICE (YES (NO)
	IF YES, PLEASE STATE WHICH POLICE STATION:
Ho of passens	8. THEO PARTY VEHICLE SGX9558 P MODEL: M.B. CLAIST
Cluding deb	DI DIRIVER'S NAME SWOTE AT COMMENT OF THE PROPERTY OF THE PROP
()	9. THIRD PARTY VEHICLE
A 1. A	- MODE:
of the of person	92, e) DRIVER'S NAME.
(Induding do	TO NRIC/FIN/PASSPORT:CONTACT:
()	

email = tansaugpohia61@gmail.com



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder

: TAN SENG POH

Period of Insurance

: 17 Jan 2020 To 16 Jan 2021

Engine No.

: 3A92UGP2555

Chassis No.

: MMBSTA13AJH000991

Vehicle No.

: SLVB079M

Policy No.

: 1800003017-02

Endorsement No.

Issued Date

: 02 Jan 2020

ABOUT THE COVER

Make/Model

: MITSUBISHI Attrage 1.2 CVT

Engine Capacity/Tonnage: 1193 Tonnage

Sum Insured : Market Value

First Year of Registration : 2018

Driver Restriction

Off Peak Car : No

: NA

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

Any person who is driving on the Policyholder's order or with their 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 und/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or conserved) is under the age of 23 and/or him tems than 2 years' driving experience.

Age Condition

: All Age Condition

Limitation as to use* :

Use for the carriage of passengers or goods in connection with the Policyholder's business. Use for societ, domestic, pleasure purposes and business purposes of any present to whom the Volucie is hired. This Policy does not cover

This is to driving failing, driving test, racing, pace-matting, reliability trial or speed-testing;

2) use whitst drawing a trailer except the towing (other than for everall) of anyone disabled using a mechanically propelled vehicle; and

3) use for the carriage of passengers for him or reward by any parson to whom the Vehicle is hired c) use for any purpose in connection with Motor Traile.

* Limitations randomed inoperative by Section 8 of the Noter Vehicles (Third-Party Risks and Compensation) Act (Cop. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

FXCESS

Section 1

Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$2000

Windscreen: \$100

Named Driver and Excess (where applicable)

TAN SENG POH - \$2000 (Own Damage) \$2000 (Property Damage)

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

1. Cycle & Carriage Authorised Service Centre (Fox accident reporting & windscreen claim only). Add: 600 Sin Ming Ave Singapore 575733 69328000

1.Cycle & Carriage Authorised Service Centre (Fox accident reporting & windscreen claim only). Add: 241 Alexandra Road Singapore 15931 64278800.

3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 20 Lang Kee Rd Singapore 159094 64708688.

4.Cycle & Carriage Authorised Service Centre (Fox accident reporting & windscreen claim only). Add: 20 Lang Kee Rd Singapore 159094 64708600.

5.Cycle & Carriage Authorised Service Centre (Fox accident reporting & windscreen claim only). Add: 20 Lang Kee Rd Singapore 159094 64708600.

5.Cycle & Carriage Authorised Service Centre (Fox accident reporting & windscreen claim only). Add: 330 Ubt Rd 3. Singapore 409650 67401000.

6.Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65664501

For other Approved Reporting CentresAKG Authorised Reporting CentresAKG Authorised Reporting or 24-hour accident emergency hotions at +65-6336-6200. Alternatively, you may refer to AGG website www.sig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

If the vehicle is used for the carriage of passenger for hire or reward, such driver must be named under the Policy and registered with an intermediary which facilitates the carriage of passengers for hire or reward. Should you decide to include any other drivers, please indicate. (Company reserves the right to acceptive)ect the inclusion of any Named Drivers).

Hire Purchase Company/Employer's Loan: Goldbell Financial Services Pte 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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia). 002881762/

0500720794

CYCLE & CARRIAGE - LAWLIM

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

BEPOOL