

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 Submission	16/12/2020 13:34 (SGT)
Date of Accident	15/12/2020 13:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JALAN HAJI ALIAS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDY1113Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHNG BOON HUEI (ZHUANG WEN HUI)
NRIC No	SXXXX015A
Email Address	BOONHUEICHNG@GMAIL.COM
Mobile Phone No	(Phone) +65-96322528
Alternative Phone No	+65-96322528

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	S320
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?	Yes
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	1800089226-02
Cover Note Number	-

DRIVER

Name of Driver	CHNG BOON HUEI (ZHUANG WEN HUI)
NRIC No	SXXXX015A

Date Of Driving Pass	05/03/1993
Driving experience	27 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96322528
Alt. Phone Number	+65-96322528
Email Address	BOONHUEICHNG@GMAIL.COM
Address	40 JALAN HAJI ALIAS
Address complement	-
Postcode	268538
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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

REFER TO ATTACHED.

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	SLC6953C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DETAILS

Are you claiming under your own insurance policy for repair to your vehicle?

YES ☒ NO - Claiming Third Party ☐ NO - Reporting Only ☐

Country/State of Loss: Singapore/ Malaysia

Date of accident: 15 DEC 2020 Time of accident: 1320

Exact Location of Accident: Jalan Haji Alias

Type of accident: Side Swipe No. of vehicles involved in the accident: 2

Weather condition: Clear ☒ Raining ☐ Others: _____

Road surface: Dry ☒ Wet ☐ Others: _____

Was any foreign vehicle involved in accident? YES ☐ NO ☒

If YES, Foreign vehicle registration number: _____ Category: _____

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

YES ☐ NO ☒

Was notice of intended Prosecution given?

YES ☐ NO ☒

Was the accident reported to the police?

YES ☐ NO ☒

If YES, Please state which Police Station: _____

OWNER VEHICLE

Vehicle registration number: SDY1113 Y Vehicle Manufacturer: MERCEDES-BENZ

Vehicle Model: S-320 Transmission: Manual ☐ Auto ☒ CC: 2996

Number of passengers (including driver): 1

Passenger 1: _____ Male ☐ Female ☐

Passenger 2: _____ Male ☐ Female ☐

Passenger 3: _____ Male ☐ Female ☐

Passenger 4: _____ Male ☐ Female ☐

OWNER VEHICLE POLICY

Owner Insurance Company: AIG Coverage Type: Comprehensive

Fleet Policy: YES ☐ NO ☒

Policy number: 1800889226-02 Cover Note No: _____

Name of Registered Owner/Company: Chng Boon Hui (Zhuang Wen Hui)

Registered Owner/Company ID: S7218015A

Email: Boonhueichng@gmail.com Mobile No: +65 96322528

DRIVER INFORMATION

Name of Driver: As above Driver Gender: Male ☐ Female ☐

Driver ID: _____ Driver Mobile No: _____

Driver Date of Birth: 24 MAY 1972 Driving Pass Date: 5 MAR 1993

Driver address: 40 Jalan Haji Alias Singapore

Driver Postcode: 268538 Driver Email: As above

Driver Occupation: Indoor ☒ Outdoor ☐

Driver owner relationship: Owner ☒ Paid Driver ☐ Relative ☐ Friend ☐ Parent ☐
Spouse ☐ Children ☐ Sibling ☐ Other: _____

Does Driver own other vehicles? YES ☐ NO ☒

If YES, Vehicle registration number: _____ Category: _____

TP VEHICLE OR PROPERTY

Was there any other vehicle or property damaged? YES ☒ NO ☐

Vehicle Or Property 1:

Vehicle Registration No: SLC 6953 C Vehicle Manufacturer: _____

Vehicle Model : _____

Vehicle Color : _____

Vehicle Category : _____

Name of Insurance Company: _____

Name of Driver: HOCK Driver ID: _____

Contact Number: 9010 7219 Number of passengers (including driver): _____

Address: _____

Vehicle Or Property 2:

Vehicle Registration No: _____ Vehicle Manufacturer: _____

Vehicle Model : _____

Vehicle Color : _____

Vehicle Category : _____

Name of Insurance Company: _____

Name of Driver: _____ Driver ID: _____

Contact Number: _____ Number of passengers (including driver): _____

Address: _____

INJURED PERSON DETAIL

Was anybody injured in the accident? YES ☐ NO ☒

Any injured conveyed to hospital by Ambulance? YES ☐ NO ☒

Injured person 1:

Name: _____ Gender: Male ☐ Female ☐

Mobile No: _____ Injuries Sustained: _____

Injured person in which vehicle? _____ Were seat belts worn? YES ☐ NO ☐

WITNESS DETAIL

Was there any witnesses? YES ☐ NO ☒

Witness Name: _____ Witness Phone: _____

FILES

Are accident photos available for attachment? YES ☒ NO ☐

Was there any video captured? YES ☒ NO ☐

Was there any audio captured? YES ☐ NO ☒

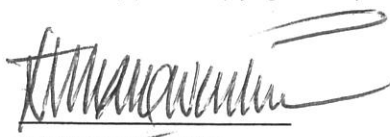
SKETCH PLAN

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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

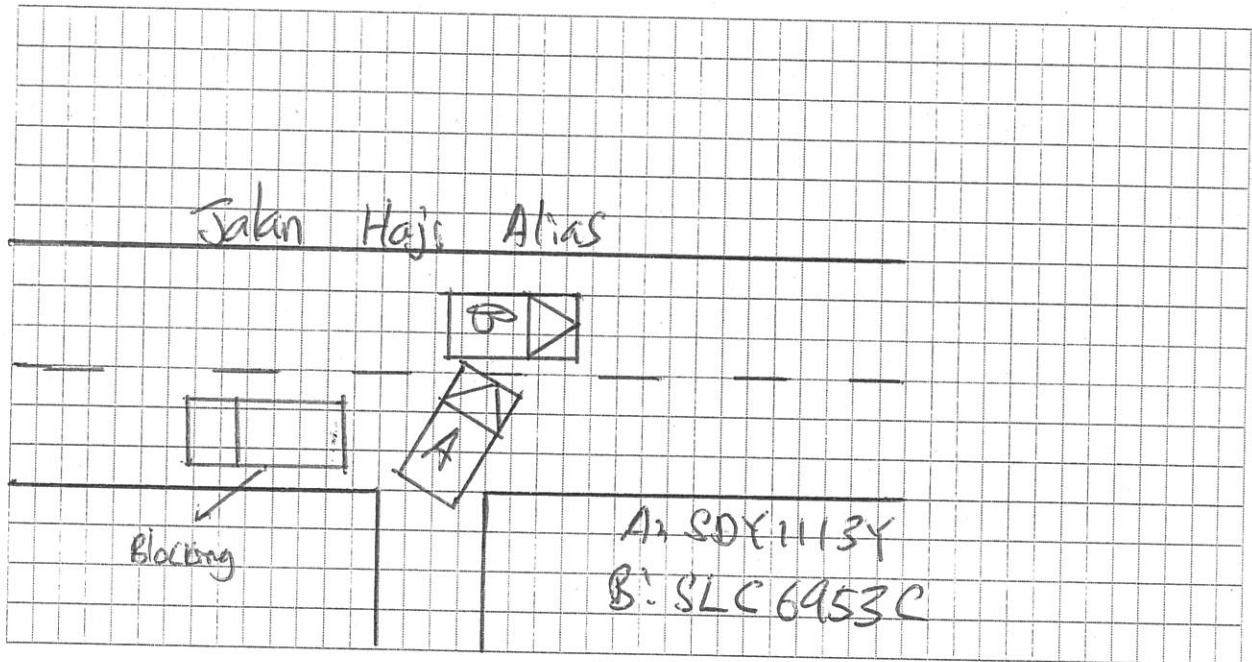
Driver's Signature

(If driver is not the policyholder)

Date & Time

Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop
Reporting Centre Personnel's
Name:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/12/2020 around 1:20 PM, I was driving out of my driveway. As my house is under renovation, the renovation truck has to exit first. When the truck exited and turn left, it was beginning to turn right. I assumed there was no other vehicle and therefore proceeded right. However, there was a vehicle (Harrow license Plate SLC 6953C) being blocked from my view. I collided into the car right door (back). The door was dented but interior looked OK. No one was injured.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

[Signature]

Policyholder's Signature
Date & Time

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

Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop
Name: _____



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : CHNG BOON HUEI (ZHUANG WENHUI)
Period of Insurance : 06 Aug 2020 To 05 Aug 2021
Engine No. : 27682430897415
Chassis No. : WDD2221622A422695

Vehicle No. : SDY1113Y
Policy No. : 1800089226-02
Endorsement No. :
Issued Date : 06 Jul 2020

ABOUT THE COVER

Make/Model : MERCEDES Benz S320L Sedan
Engine Capacity/Tonnage : 2,996.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PAFF : 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 2000cc

* 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 - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CHNG BOON HUEI (ZHUANG WENHUI) - \$800 (Own Damage), \$800 (Flood Cover)

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

1. Cycle & Carriage Eunus Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818
2. Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

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: United Overseas Bank Limited

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

0504612273

CYCLE & CARRIAGE - LIHWEI

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.

SSPLLC

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **S7218015A**
Name:
CHNG BOON HUEI
(ZHUANG WENHUI)

Birth Date: **24 May 1972**
Issue Date: **18 Mar 2003**

000303812B

FOR C&C USE ONLY

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

05 Mar 1993

FOR C&C USE ONLY



Licence No: S7218015A

NP 428A