Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 12/03/2018 15:40

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 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 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

By the lodgement of this report to the insurers, you hereby conse aforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	12/03/2018 15:35
Date Of Accident	05/03/2018 11:00
Exact Location Of Accident	TOH TUCK ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	EE676P
Insured/Policyholder	
Name Of Registered Owner	LOH KWAI LIN
NRIC No	SXXXX127E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96661100
Alternative Phone No	Office-96661100
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLS350
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?	NO
If No, Please state action to be taken	REPORTING ONLY
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	2100121443-09000
Cover Note Number	
Driver	
Name of Driver	LOH KWAI LIN
NRIC No	SXXXX127E
Date Of Birth	31/03/1957
Occupation	INDOOR
Data Of Deliving Dags	00/05/1000

03/05/1980

37 YEARS AND 10 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-96661100

Fax Number

Contact Number OFFICE-96661100

EMail Address NOEMAIL

Address 341 BUKIT TIMAH ROAD #03-01

Postcode 259719 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 SIDE SWIPE **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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

3

Gender:

Was any other material or property damaged? YES I have been approached by unknown person(s) NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 : UNKNOWN Name:

> Gender: : Female

> > : Female

Passenger 2 Name: : UNKNOWN

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 1 DUKE ROAD, POSTCODE: 268914, COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-4629999 - FAX NO: 64628933

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT.

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 Vehicle Make/Model/Colour

SBS6329P

Details Of Properties

Vehicle Category

BUS

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 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
- 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' insurers from the Monetary Authority of Singapore and any relevant convergingly 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
 - (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
 - (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.
- 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

VIX Chan Hoe Pre Lid

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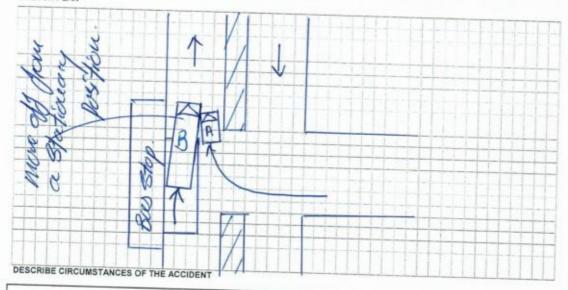
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Orthog

Name

NRIC/FIN No.:



Refli to attached police report.

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)

Policyholder's Signature Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

VIK Chan Hoe

VIK Chan Hoe

VIK Chan Hoe

VIK Chan Hoe

A Carriage Industries Pre Ltd

A Carriage Repair Center

A Carriage Repair Center

A Carriage Repair Center

A Carriage Repair Center

A Carriage Repair

A Carriage R Di Name:

NRIC/FIN No.:

NOTICE OF REPORTING

This is to confirm that Loh Kwai Lin , NRIC/Passport No. S2754127E has reported to the Police a non-injury traffic accident which occurred along Beverly Road on 05/03/2018 at about 1100hrs, involving the following vehicles:

Car A: EE676P (Loh Kwai Lin , hp: 96661100)

Car B: SBS6329P

On the above mentioned date, time and location, I was travelling straight on the right lane, suddenly Car (B) hit the left side of my wing mirror Car (A). Resulted in my left wing mirror damaged and unable to function, the left side of my car also suffered from some scratches. I wish to state that I have 2 passengers inside my Car (A).

No one injured and No government property damaged and No foreign vehicles

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

Rank/Name of Issuing Officer: w/Sgt Tan Hui Ru

Date: 05/03/2018 Time: 1100hrs

S/D Ref: _ 26

Police Post/Unit: Bukit Timah Neighbourhood Police Centre

Original - to be issued to informant, Duplicate - to be submitted to Traffic Police

BUKIT TIMAH NEKHBOLIRHOOD POLICE CENTE DUKE'S ROAD SINGAPORE 268914



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Loh Kwai Lin

Period of Insurance

: 23 Feb 2018 To 22 Feb 2019

Engine No. Chassis No.

: WDD2193562A156637

: 27296431136206-

Vehicle No.

: EE676P

Policy No.

: 2100121443-09

Endorsement No.

Issued Date

: 25 Jan 2018

ABOUT THE COVER

Make/Model

: MERCEDES BENZ CLS350

Engine Capacity/Tonnage : 3,498.00 CC Driver Restriction

: NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2009

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 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 busines, 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) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Section 1 Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Loh Kwai Lin - \$2000 (Own Damage)

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

Euros Service Center (For accident reporting only) Add: 330 Util Road 3 Singapore 408850 67412338
 Panden Loop Service Center – Body Cere & Repeir (For accident repair & accident reporting) Add: 188 Pandan Loop Singapore 128378 67778388

For other Approved Reporting Centres/A/G Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6335 6200. Alternatively, you may refer to A/G website www.aig.com.ag or A/G SG Mobite App. Simply search and download "A/G SG" from (Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

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 Companisation) Act (Cap. 189), Part IV of 3 the Road Transport Act, 1967 (Malaysis) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysis).

100660050

TLE & CARRIAGE - CORPORATE

ALEXANDRA ROAD

APORE 159930 ANSP-NONLIFE

written by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE





Licence Number: S2754127E

LOH KWAI LIN

Birth Date: 31 Mar 1957 Issue Date: 28 Jan 2010



FOR C&C USE ONLY

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

Motor Cars=< 3000kg-with =<7 passengers, exclusive 03 May 1980 of the driver; and other motor vehicles =< 2500kg Class 3

FOR C&C USE ONLY



NP 428A













Accident Photo











Accident Photo







