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SN08211T0003 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 29/01/2021 14:37 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (29/01/2021 14:37 (SGT))



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 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

29/01/2021 14:37 (SGT) Date of Submission 28/01/2021 11:25 (SGT) Date of Accident Marine Parade Rd, Singapore Exact Location of Accident Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SLZ5691T Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? LIM WEE CHIEH (LIN WEIJIE) Name Of Registered Owner SXXXX792I NRIC No hamerlim@evergreenreno.com Email Address (Phone) +65-98717579 Mobile Phone No +65-98717579 Alternative Phone No

VEHICLE PARTICULARS

Kia Manufacturer Stinger Model Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Private car Vehicle Category

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Comprehensive Fleet Policy Policy Number 1800050393-01 Cover Note Number

DRIVER

LIM WEE CHIEH (LIN WEIJIE) Name of Driver SXXXX792I NRIC No

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	08/04/1997 23 YEARS AND 9 MONTHS Male (Phone) +65-98717579 +65-98717579 hamerlim@evergreenreno.com BLK 339 CHOA CHU KANG AVENUE 3 #05-18 - 689873 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged?	Side Swipe Clear Dry No 2 No - Yes
Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Choa Chu Kang Neighbourhood Police Centre (Phone) +65-18007659999 (Fax) +65-67644104 No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286 No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes Yes No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver	PA6531A - - - Bus

Address	
And description	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No Of Passenger (Including Driver)	
rto. Of Fassenger (including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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. 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 ree 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

Sketch Plan

13:16 PM

B) PA 6531A

Describe C	ricumstances of the Accident
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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

87934483

ACCIDENT'STATEMENT

ACCIDENT DATE: (28. 1.01) (DD/MM/YYYY), TIME: (1 : 2) (HH:MM)
LOCATION: MORINIA PROPER ROM
DETAILS OF VEHICLE DIVERIOLE NUMBER: SUZ SONIT DINSURANCE COMPANY: DISTRIBUTION OF THE STHEFT) DIPOLICY NUMBER: THIRD PARTY / THIRD PARTY FIRE STHEFT) DIMAKE & MODEL: THIRD PARTY / THIRD PARTY FIRE STHEFT)
F)TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) G) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE) h) PURPOSE OF USING AT ACCIDENT TIME: PROPERTY (USING A LORGE OF USING UNDER YOUR OWN INSURANCE (YES/NO) IF NO. PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
DINRIC/FIN/PASSPORT: CONTACT: 978/157
*CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER DRIVER DRIVER DINAME: AP MOUN. (MALE / FEMALE) DINRIC/FIN/PASSPORT: CONTACT: CIADDRESS:
*d) DATE OF BIRTH: (
5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS D) ROAD SURFACE: (DRY / WET / OTHERS) 6. WAS ANYBODY INJURED (YES / NO) 7. a) REPORTED TO POUCE (YES / NO) * IF YES, PLEASE STATE WHICH POLICE STATION: CCK
He of passenger a) VEHICLE NUMBER: PA 65314 MODEL: Including driver) b) DRIVER'S NAME:
() NRIC/FIN/PASSPORT:CONTACT:
Mo of passanger d) VEHICLE NUMBER:MODEL: Including driver f) NRIC/FIN/PASSPORT:CONTACT::

email = Hamerlinde evergreenreno: com VIDEO

NOTICE OF REPORTING

This is to confirm that <u>Lim Wee Chieh</u>, NRIC/FIN <u>S7525792I</u>, has reported to the Police a non-injury traffic accident which occurred at <u>Marina Parade</u> <u>Road</u> on <u>28/01/2021</u> at <u>1125am</u> involving the following vehicles:

V1:SLZ5691T V2:PA6531A

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.

CHOA CHU KANG NPC 40 CHOA CHU KANG ST 52 #01 SINGAPORE 689286

TEL: 1800-7659999

Rank/Name of Issuing Officer: SGT(2) Liew Kian How

Date: <u>28/01/2021</u> Time: <u>2357HRS</u>

S/D Ref: 94

Police Post/Unit: CHOA CHU KANG NPC

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



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: LIM WEE CHIEH (LIN WEIJIE)

Period of Insurance Engine No.

: 09 May 2020 To 08 May 2021

: G4KLJH012641

Chassis No.

: KNAE351AMJ6030092

Vehicle No.

: SLZ5691T

Policy No.

: 1800050393-01

Endorsement No.

Issued Date

: 30 Apr 2020

ABOUT THE COVER

Make/Model

: KIA Stinger 2.0

Engine Capacity/Tonnage : 1,998.00 CC Driver Restriction

Sum Insured : Market Value

First Year of Registration : 2018

: NA

Off Peak Car : No

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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition

: 40 years old and above

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 1500cc - 1600cc

* 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

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

LIM WEE CHIEH (LIN WEIJIE) - \$600 (Own Damage), \$600 (Flood Cover)

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

1.Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

2.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000 3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800 4.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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: MayBank

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 3 the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia). 1003242492/

0504622216

C&CKICP2 - KEENG

239 AL EXANDRA 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.

AIGSGMOBILEAPP