SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 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
- 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 06/02/2021 11:02 (SGT) Date of Accident 05/02/2021 16:45 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE TUAS TO CHANGI AIRPORT, 300M BEFORE EXIT 24 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMN6181T INSURED/POLICYHOLDER

is company? No Name Of Registered Owner TAN KENG BOO NRIC No SXXXX083A Email Address KENGBOO@YMAIL.COM Mobile Phone No (Phone) +65-96201363 Alternative Phone No +65-96201363

VEHICLE PARTICULARS

Manufacturer Mitsubishi Model Outlander 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 No Policy Number 1900149633 Cover Note Number

DRIVER

Name of Driver TAN KENG BOO NRIC No SXXXX083A Date Of Birth 25/09/1950 Occupation Indoor

Date Of Driving Pass 03/06/1972 Driving experience 48 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-96201363 Alt. Phone Number +65-96201363 Email Address KENGBOO@YMAIL.COM Address BLK 130 BUKIT BATOK WEST AVENUE 6 #09-354 Address complement Postcode 650130 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3 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) 2 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Yes PASSENGER 1 Name ONG LAY SUAN 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 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	SLD1210R
Vehicle Manufacturer	Hyundai
Vehicle Model	Elantra
Vehicle Variant	
Vehicle Colour	Grav
Vehicle Category	Private car
Name of Driver	SIM THENG JUN
Contact Number	SIM THEING JUN

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour	SMH6948E - -
Vahiala Catagoria	-
Name of Driver	Private car TEE JIA JUN
Contact Number	TEE SIA SON
Address	_
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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.
- 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.

olicyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre
retch Plan	EX1724 300m	
	3 mm	
		(5)
	Planting Pl	as to Changing
	Tue	as to change
	16948E SLD1210A SMN 618/17	Airport.
smi	169486 56012101	

Describe Circumstances of the Accident
I was driving from on PIE towards Change Airport. There
was a slow down of about 300m to exit 24. I slow down
was a slow down at about 300m to exit 24. I slow down and stopped behind the so stationery cars intrest, and
the car behind me sollided into my car, followed by another
the car behind Me sollided into my cor, followed by unother collision from the third car.
Declaration

 ${\it I\!W\! P}$ declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

SYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: TAN KENG BOO

Period of insurance

: 21 Aug 2019 To 20 Aug 2021

Engine No.

: 4J11BD7746

Chassis No.

: GF7W0601723

Vehicle No.

: SMN6181T : 1900149633

Policy No.

Endorsement No. Issued Date

: 29 Aug 2019

ABOUT THE COVER

Make/Model

: MITSUBISHI Outlander 2.0 Elegance/Sports

Engine Capacity/Tonnage : 1,998.00 CC

Sum insured : Market Value

First Year of Registration : 2019

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

at The Policyholder

by Any chargerson 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 media the specified age condition.

Tournate 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

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 him or raward, 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

* Limitation's 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 (Melaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings

EXCESS

Section 1 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

TAN KENG BOO - \$600 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REF

- 1 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 800 Sin Ming Ave Singapore 675733 89328000 2.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64705688 3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000 4.Cycle & Certiage Body & Paint Centre Add: 209 Pandan Gerdena Singapore 609339 65684501

For other: Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency holtine at +65 5338 6200. Alternatively, you may refer to AlG website www.alg.com.cg or AlG SG Mobile App. Simply search and download "AlG SG" from ITunes or Google Play.

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

The state of the secretion of the same was been a great and

(No hareby certify that the posicy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cep. 189). Part IV of the Read Transport Act, 1967 (Malaysia), Read Transport Act, 1967 (Malaysia), Read Transport Act, 1967 (Malaysia).

0504620217

C&CMICP2 - ANNAL 239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AlG Asia Pacific Insurence Pte. Ltd. **AUTHORISED REPRESENTATIVE**