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SN08212A0001 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 10/02/2021 12:38 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (10/02/2021 12:38 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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**

Date of Submission 10/02/2021 12:38 (SGT)
Date of Accident 09/02/2021 08:00 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information (FLYOVER) EXIT JALAN BUKIT MERAH
Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKS3287P

INSURED/POLICYHOLDER

Is company?

No
Name Of Registered Owner

NRIC No
Email Address
Mobile Phone No
Alternative Phone No

No
TAN SECK GUAN
SXXXX470I
Seck.guan.tan@gmail.com
(Phone) +65-81251804
+65-81251804

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Attrage
Variant -

Exact purpose for which vehicle was being used at time of accident

Private use

Are you claiming under your own insurance policy for repair to

your vehicle?

No - Claiming third party
Vehicle Category

Private car

INSURANCE COMPANY

Cover Note Number

Name of Insurance Company
AIG
Type of Coverage
Comprehensive
Fleet Policy
No
Policy Number
2100408561-05

DRIVER

Name of Driver TAN SECK GUAN NRIC No SXXXX470I

Date Of Driving Pass	24/01/1978
Driving experience	43 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-81251804
Alt. Phone Number	
E - "A A I I	+65-81251804
A 1 December 2019 Control of the Con	seck.guan.tan@gmail.com
Address	12 CORFE PLACE
Address complement	-
Postcode	558146
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	
Michigan Designation of the Commission of the Co	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry
Tiodd ddiiddo ar yr grynai yr ac yn gaeth a ga	ыу
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)	Ne
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?	r. a.e.
ii yes, agaiist wildiii?	
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
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 OTHE	R VEHICLE PROPERTY 1
Vehicle Registration Number	FBG4480K
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	;=
Vehicle Colour	
Vehicle Category	Motorcycle
Name of Driver	Motorcycle
Contact Number	
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Address	
Address complement	:5
Doctordo	

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 Form must 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 bllectively 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 & Time

our Seek Gra

Witnessed by Reporting Centre Personnel

Sketch Plan

B + IX

EDS 4480K

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Describe Circumstances of the Accident
On 19.02.2021 at about 08:00 Mr. I was trauling along
814 Rom Rom CTE (Flyoner) Ext to Julan Bull + Merzh. Upu readling
the punction I slow down and stop-While writing for the road to dear,
all of a suddlin I felt an impact from the rear. Then I realised a
motor FBF 4460K had collided outs my near. That', all.
}

## 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

Date of Accident	: 09. 12. 201 Accident Time: 08:00 (24-HR-Format)
Accident Place	: CTE (flyour) East Inlan Bulut mersh
Vehicle. No. (Car Plate No.)	: SKS 3287P Make/Model: Mit. Attrice 1-2 CVT
Insurace Company	: Alb Policy No: 2100408561-05
Owner or Company Name /IC No.	: Tan Seck Guan (S1269470I)
Owner or Company Contact No.	: 8125 1804 Owner's Hp Company Tel
DRIVER'S Name / IC No.	: Same as abone
DRIVER'S Date Of Birth	: 21.05.1957 DRIVER'S License Pass Date 24.01.1979
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:
DRIVER'S Address	: 12 Corte Place S (558146)
DRIVER'S Contact No./ Alt No.	:1)2)
DRIVER'S Occupation	: INDOOR OUTDOOR (e.g. working inside or outside office)
Email Address	: seck, quantan @ gmail. com
Weather & Road Surface	CLEAR & DRY RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only Claim Other Party Claim Own Insurance
Number of Passengers (Including D	river): Baky on b
Was there any video Captured by ca Exact purpose for which vehicle wa Any Injury (If YES, Pls state):	r camera: YES NO s being used at the time of accident: Private use \ Work purpose
	Party Driver's Particular (if any)
Vehicle, No: PB6 4460K	(HTUI) Vehicle. No:
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

\* NEW - Passenger's name & gender:



## CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Tan Seck Guan

Period of Insurance

: 08 Apr 2020 To 07 Apr 2021

Engine No.

: 3A92UCG2091

Chassis No.

: MMBSTA13AFH008191

Vehicle No.

: SKS3287P

Policy No.

: 2100408561-05

Endorsement No.

Issued Date

: 05 Mar 2020

### ABOUT THE COVER

Driver Restriction

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage: 1,193.00 CC

Sum Insured : Market Value

First Year of Registration : 2015

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

: NA

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 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

Section 1

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

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Tan Seck Guan - \$600 (Own Damage), \$600 (Flood Cover)

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

Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 509339 65684501

Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688
 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 holline 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 the Road Transport Act, 1987 (Mataysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Mataysia)

0500720780

CYCLE & CARRIAGE - BRYANT(MIT)

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSCASB

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	4701
Vehicle Details	
Vehicle No.:	SKS3287P
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Feb 2021
Vehicle Make:	MITSUBISHI
Vehicle Model:	ATTRAGE 1.2 CVT
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	3A92UCG2091
Chassis No.:	MMBSTA13AFH008191
Maximum Power Output:	57.0 kW (76 bhp)
Open Market Value:	\$12,479.00
Original Registration Date:	08 Apr 2015
First Registration Date:	08 Apr 2015
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 Apr 2025
PARF Rebate Amount: Intended COE Rebate Details	\$3,500.00
COE Expiry Date:	07 Apr 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$57,199.00
COE Rebate Amount:	\$23,467.00
Total Rebate Amount:	\$26,967.00

The information contained herein is correct as at 09 Feb 2021