







## 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 ..... 10/02/2021 16:22 (SGT)  
 Date of Accident ..... 09/02/2021 22:53 (SGT)  
 Exact Location of Accident ..... Boon Teck Rd, Singapore  
 Additional Location Information ..... -  
 Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMT1339H

## INSURED/POLICYHOLDER

Is company? ..... No  
 Name Of Registered Owner ..... LUM SAY KEONG  
 NRIC No ..... SXXXX446J  
 Email Address ..... VINCENTLUMSK11@GMAIL.COM  
 Mobile Phone No ..... (Phone) +65-97895907  
 Alternative Phone No ..... +65-97895907

## VEHICLE PARTICULARS

Manufacturer ..... Nissan  
 Model ..... Qashqai  
 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

Name of Insurance Company ..... AIG  
 Type of Coverage ..... Comprehensive  
 Fleet Policy ..... No  
 Policy Number ..... 2070056768  
 Cover Note Number ..... -

## DRIVER

Name of Driver ..... ALVIN LUM CHENG HONG  
 NRIC No ..... SXXXX515I  
 Date Of Birth ..... 31/05/1993  
 Occupation ..... Indoor



Date Of Driving Pass .....	31/05/2013
Driving experience .....	7 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-92969909
Alt. Phone Number .....	-
Email Address .....	VINCENTLUMSK11@GMAIL.COM
Address .....	BLK 160A PUNGGOL CENTRAL #14-101
Address complement .....	-
Postcode .....	821160
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 .....	Collision - Major/Minor Rd
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) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	TAN BO YAO
Gender .....	Male

#### PASSENGER 2

Name .....	KANG KA KAY
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 STATEMENT.

#### 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 .....	SKD8206U
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
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

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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' 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

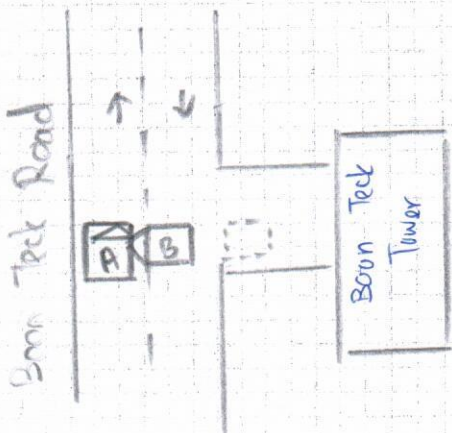
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

### Sketch Plan



A = SMT1339H  
B = SKD8206U

**Describe Circumstances of the Accident**

On 09/02/2021, I was travelling along Boon Teck Road.

Suddenly vehicle B coming out from Boon Teck Tower and collided on my vehicle.

As a result my car sustained damages on the front and right portion.


I wish to state that the incident are recorded by my in-car-camera.


**Declaration**

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

  
Policyholder's Signature / Date &  
Time

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

  
Witnessed by Reporting Centre  
Personnel





HOME > E-SERVICES > E-APPLICATION OF QUALIFIED DRIVING LICENCE (QDL)

## E-APPLICATION OF QUALIFIED DRIVING LICENCE (QDL)

### ACKNOWLEDGEMENT

Receipt for e-QDL replacement (Q000314358)

Dear **ALVIN LUM CHENG HONG (LIN ZHENGHONG) (NRIC: S931\*\*\*\*I)**,

1. Your payment for QDL for replaced Class 3A is successful.
2. You have made payment of S\$25.00 for replacement of QDL on 10 Feb 2021 at 01:34 PM.
3. **The validity of your replaced QDL for Class 3A is for a LIFETIME.**

You may visit our Status of Photocard Driving Licence Application e-service to track the delivery status of your QDL.

You may continue to drive/ride for the class of vehicle that you are licensed to operate while waiting for the replacement photo card licence to be delivered to your address.

You can print out this page using your Internet browser. Click the Logout button to end the transaction.  
Thank you for using this e-service.

PRINT



LOGOUT

Page 1 of 4

Dear ALVIN LUM CHENG HONG (LIN ZHENGHONG) (NRIC:  
S9319515I),

Welcome to the e-application of QDL page!

#### Your Licence and Test Information

Our records shows that you possess the following  
class of qualified driving licence (QDL) with expiry  
date, :

i. **Class 3A**

You have passed Practical Test(s) for following  
class(es).

- **Class 3A** Practical Test at CDC on 31 May 2013.

Our records show that you have already applied for your  
Singapore Qualified Driving Licence and we are currently  
processing your application. You are not allowed to make  
another application of your Singapore Qualified Driving  
Licence until after your Singapore Qualified Driving Licence  
had been delivered to you.

You are not eligible for any QDL licence transaction.

**Prerequisites for Singapore Qualified Driving Licence  
Application**





# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Lum Say Keong  
**Period of Insurance** : 28 Mar 2020 To 27 Mar 2022  
**Engine No.** : HRA2638896A  
**Chassis No.** : SJNFEAJ11U2307472

**Vehicle No.** : SMT1339H  
**Policy No.** : 2070056768  
**Endorsement No.** :  
**Issued Date** : 17 Apr 2020

### ABOUT THE COVER

**Make/Model** : NISSAN Qashqai 1.2 DIG-Turbo  
**Engine Capacity/Tonnage** : 1,197.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2020  
**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 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)

Lum Say Keong - \$600 (Own Damage), \$600 (Flood Cover)

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

1. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
2. TC AutoClinic Add: No. 1, Sixth Lok Yang Road Singapore 628099 62622212
3. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

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](http://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: DBS BANK LTD

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).

0500610376

TAN CHONG CREDIT PTE LTD-OPH

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589623 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



VEHICLE NO: SMT1339H

MAKE & MODEL : Nissan Qashqai

AUTO / MANUAL

DATE OF ACCIDENT	09 / 02 / 2021	*C.C.
TIME OF ACCIDENT	10.53 AM / (PM)	
LOCATION OF ACCIDENT	Along Boon Teck Road	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	Lum Jay Keong	Email: Vincentlumsk11@gmail.com
TELP NO	Mobile: 97895907	Office: Home:
NRIC	S1485446J	
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY	
FLEET POLICY	YES / NO ?	
INSURANCE CO.	AIU Asia Pacific Insurance	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	2070056768	
NAME OF DRIVER	AS ABOVE / IF NO: Alvin Lum Chong Hong	
NRIC	S93195151	
DATE OF BIRTH	31 / 05 / 1993	
ANY PASSENGER	YES / NO : 2	
NAME OF PASSENGER	Tan Bo Yao, Kong Ka Kay. - F	
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	31 / 05 / 2013	
GENDER	Male / Female	
CONTACT NO.	Mobile: 92969909	Office: Home:
EMAIL:	vincentlumsk11@gmail.com	
ADDRESS	Blk 160A Punggol Central #14-101 Singapore 821160	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No: <del>FA</del>	INSURER:
RELATIONSHIP	Employee / If No: Father - Son	
WEATHER CONDITION	Clear / Raining / Other:	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	No / If yes, Who?	
CONTACT NO.		
POLICE REPORT	No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?		NO/IF YES: WHO?
VEHICLE B NO.	SKD8206U	Any Passenger: No
NAME		
CONTACT NO.		
VEHICLE C NO.		Any Passenger:
VEHICLE D NO.		Any Passenger:
VEHICLE E NO.		Any Passenger:
VEHICLE F NO.		Any Passenger:
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?		YES / NO
WAS THERE ANY AUDIO RECORDED?		YES / NO
SCENE ACCIDENT PHOTOS TAKEN?		YES / NO
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?		YES / NO

No. of passenger : 2

Free Simon auto drive

Free Simon Auto drive @ gmail.com