SS1Y213C000A / SME MOTOR PTE LTD ENTRY DATE & TIME: 12/03/2021 16:43 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (12/03/2021 16:43 (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.

- 4. The issue and acceptance of this is form by instrained 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 12/03/2021 16:43 (SGT) Date of Accident 30/05/2019 13:25 (SGT) Exact Location of Accident Prinsep St, Singapore Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKA488R

## INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN CHEE HONG NRIC No. S1734067J Email Address prestige@singnet.com.sg Mobile Phone No (Phone) +65-98249229 Alternative Phone No +65-98249229

## VEHICLE PARTICULARS

Manufacturer Nissan Model X-trail 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 - Reporting only

Vehicle Category Private car

# INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy Policy Number 1800062494-01 Cover Note Number

## DRIVER

Name of Driver TAN CHEE HONG NRIC No S1734067J Date Of Birth 22/07/1966 Occupation Outdoor

Date Of Driving Pass 20/10/1992 Driving experience 26 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-98249229 Alt. Phone Number +65-98249229 Email Address prestige@singnet.com.sg Address BLK 647 PASIR RIS DRIVE 10 #10-42 Address complement Postcode 510647 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 - Head on 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 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) Has the driver been approached by unknown person(s) 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? CIRCUMSTANCES OF ACCIDENT I WAS COMING OUT FROM THE PARKING LOT. SUDDENLY, VEHICLE B FROM MY RIGHT CAME STRAIGHT AND HIT ONTO MY VEHICLE FRONT PORTION. 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 **YP962T** Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Driver

Postcode

Contact Number
Address
Address complement

nsurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	VEHICLE B
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.
- 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 GA 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.
- 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)

Lunderstand, acknowledge, agree and consent that :

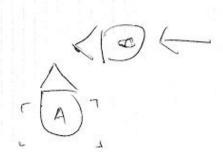
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 :
- (ii) 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.

Thy

Policyholder's Si	gnature / Date /	Š.
Time 1	12/3/21	
Sketch Plan	Vich	- 5

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

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

veline B for	on my tett	right co	me	steight
and Lit onto	ny vel:ue	front po	n tion.	
		_		
	215			
		= = =		
eclaration				
Ve declare the foregoing particula	rs are true in every respect.			
4				
Thy				
licyholder's Signature / Date &	Driver's Signature (If driver is not the	e policyholder) / Date	Witness	sed by Reporting Centre

















Policy/Reference No. 1800062494-01

01 Apr 2020

Mr.TAN CHEE HONG 647 PASIR RIS DRIVE 10 #10-42 SINGAPORE 510647

Dear Mr. TAN CHEE HONG



Send back this ORANGE Form to enjoy coverage for your CAR, HOME and more under one policy.

# Your Motor Policy Is Expiring

Your Policy No. 1800062494-01 for Vehicle No. SKA488R will expire on 29 May 2020 and I would like to invite you to renew it.

#### Important Benefits

Renewing your AutoPlan motor policy allows you to have the flexibility of having accident repairs carried out at a workshop of your choice.

If you are currently enjoying 50% No Claim Discount (NCD), you will receive the NCD Protector Benefit when you renew. This means that your first claim under this policy for the next 12 months will not affect your hard-earned NCD in the following year as long as you continue to renew with us.

Other valued benefits you receive with your renewal include:

- Cover for Personal Accident of up to \$20,000
- · Cover for your Car Key of up to \$800 if the benefit is attached to your policy
- Cover for Flood and Windstorm Damage without penalising your NCD
- Unlimited coverage for Windscreen Damage with automatic reinstatement
- 6 or 12 monthly Interest-Free Instalment Payment Plan with DBS/POSB/UOB/Citibank credit cards (minimum premium of \$300 required)

Your current motor policy also includes a Loyalty Home Cover that provides up to \$720,000 in extended protection for your home and third party liability. By continuing with the Loyalty Home Cover which only costs an additional premium of \$95 (before GST), you will enjoy combined coverage under a single policy with just one expiry date. As a bonus, you will receive \$50,000 Non-motoring Worldwide Personal Accident cover at no additional cost.

To renew your motor policy and Loyalty Home Cover, just complete and return the ORANGE form to us with payment.

Alternatively, you can contact us to reduce your coverage to motor only.

Pog haudiggebath | Copyright 6 2019 Propud unterwiden by Ald Ada Padific treumping Pte.

1003159G58/ACS/BRE\_/