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

Date of Submission 25/02/2021 14:43 (SGT) Date of Accident 25/02/2021 08:57 (SGT) Exact Location of Accident Singapore Additional Location Information OPEN COMPOUND AT TOH GUAN ROAD EAST Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMV3974A

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN BENG CHEOW NRIC No. SXXXX427D Email Address BENGCHEW.TAN@GMAIL.COM Mobile Phone No (Phone) +65-96748582 Alternative Phone No (Home) +65-96748582

VEHICLE PARTICULARS

Manufacturer Toyota Model Prius 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 Policy Number 2070139592 Cover Note Number

DRIVER

Name of Driver TAN BENG CHEOW NRIC No SXXXX427D Date Of Birth 28/03/1966 Occupation Indoor

Date Of Driving Pass 04/06/1993 Driving experience 27 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-96748582 Alt. Phone Number (Home) +65-96748582 Email Address BENGCHEW.TAN@GMAIL.COM Address BLK 6 LORONG 7 TOA PAYOH #06-191 Address complement Postcode 310006 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 Collision - Head to Rear 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 PLEASE REFER TO ATTACHED SKETCH PLAN AND STATENMENT. ATTACHMENT(S) Are accident photos available for attachment? Nο Was there any video captured by Car Camera? Yes Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** ₹

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	SJE5831R Mitsubishi Delica - -
verificie Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	_
Postcode	_
Insurance Company Name	-

Nature Of Damage FRONT BUMPOER DAMAGE
Details of property damaged in accident No. Of Passenger (Including Driver) 2

escribe Circumstances of the Accident
1 WGC Signal alone Jan evan ruck each and to all a war
I was briving along ton guan road east and toward an open
Compound to spickup a friend, as I was early, I decided to
wait judged the open company of one I ston my ear
wait outside the open Compound area, I stop my car sterted to
and, engaged reverse gear, when I was starting to do so,
the Car, SJE 58312 hof me at the back of the car, my
the back of my cor, and the funt part of his car was
damaged. There was no injury found at the scence, we
both drave off after take the photo at the incident site.

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

Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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
- 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 w orkshop 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
- (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

Witnessed by Reporting Centre

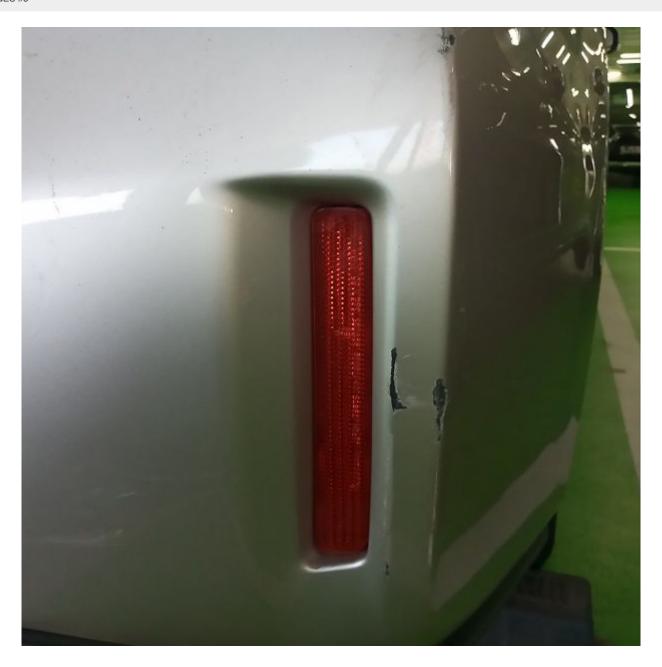
Sketch Plan

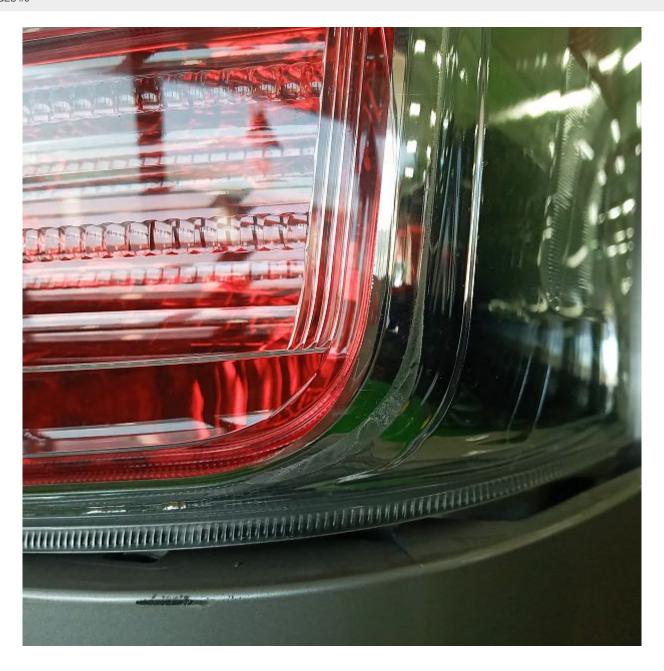


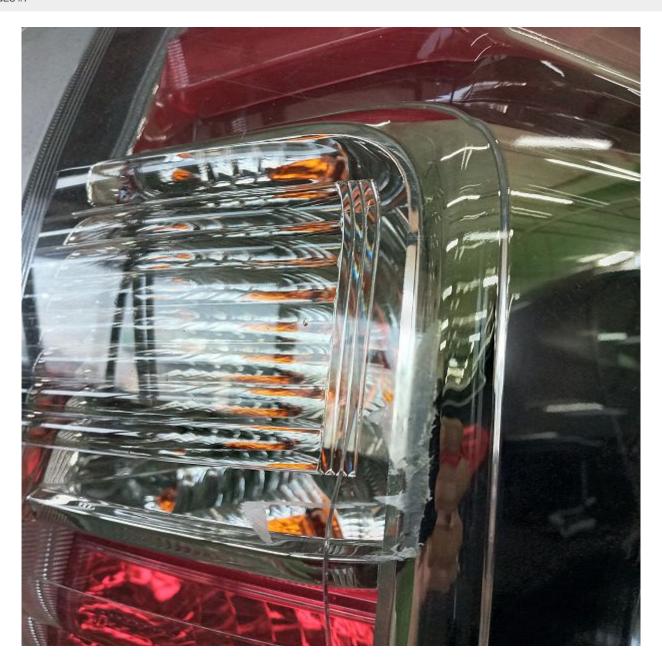




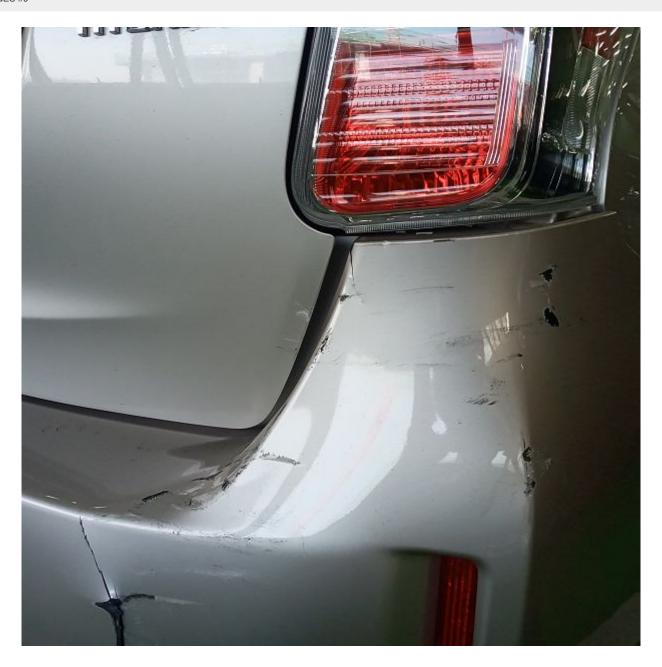




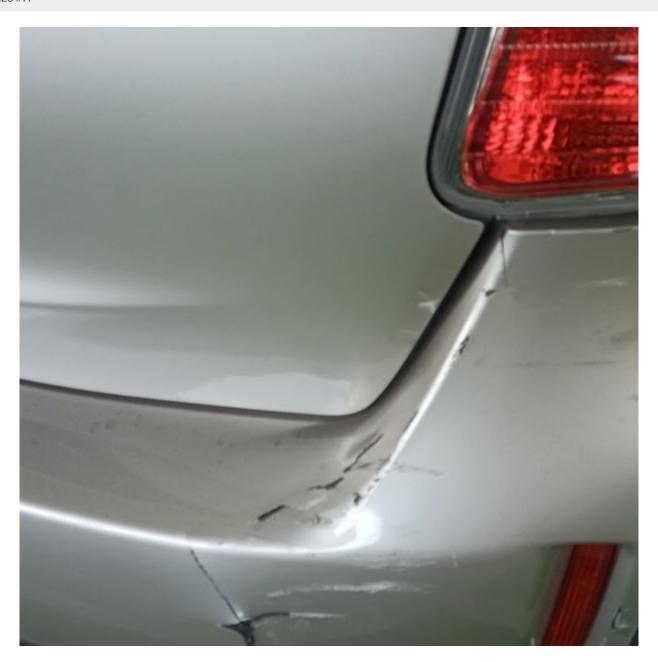


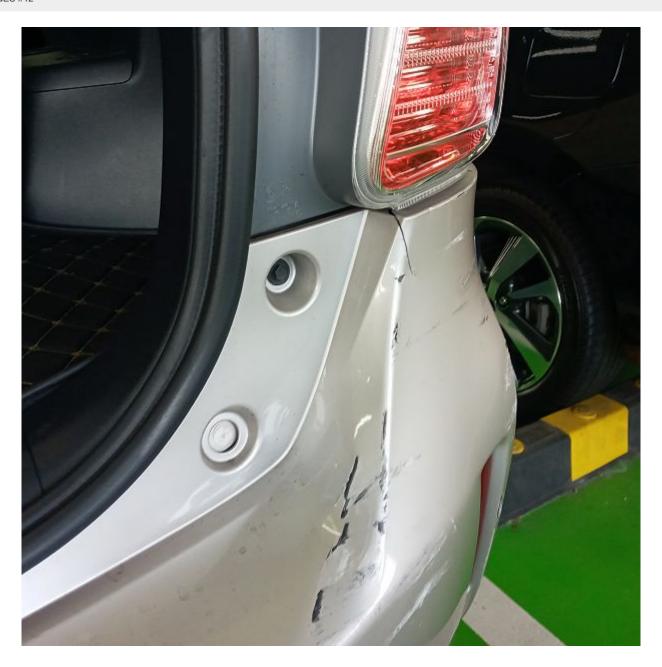
















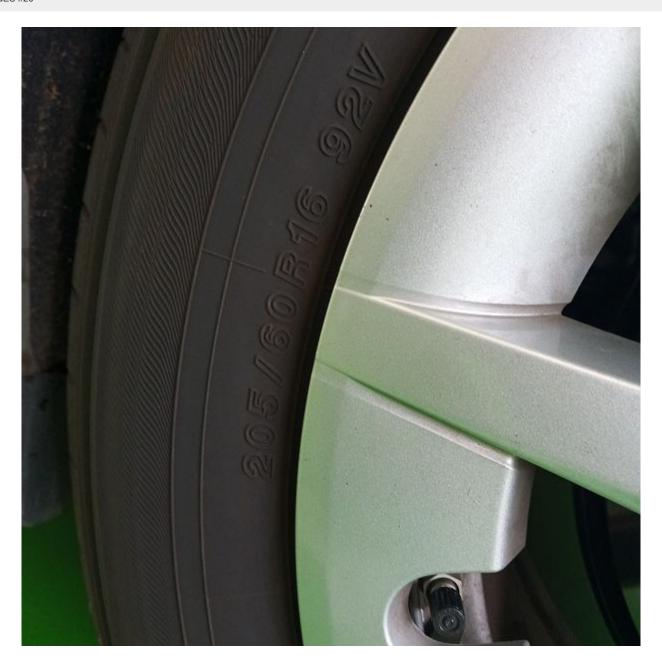




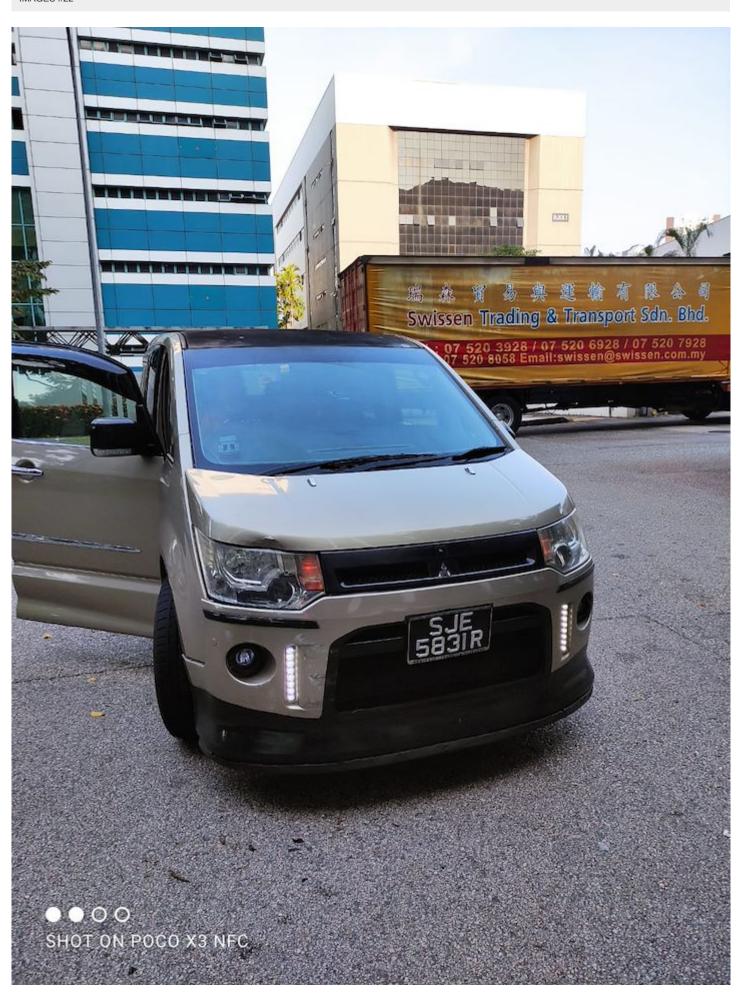


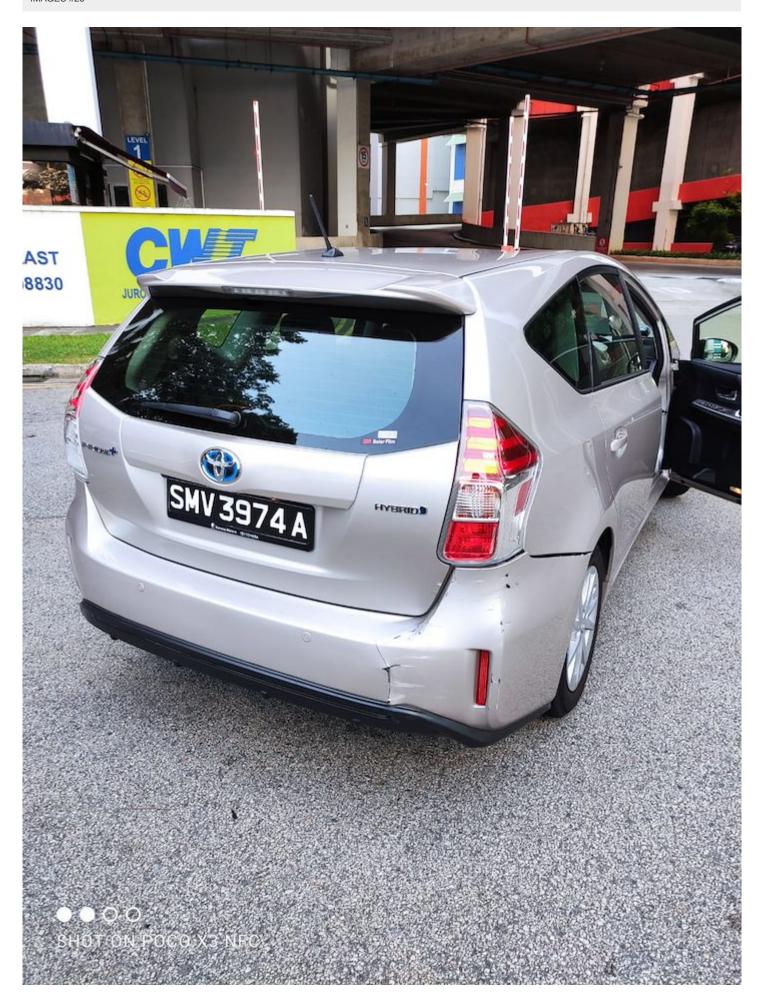


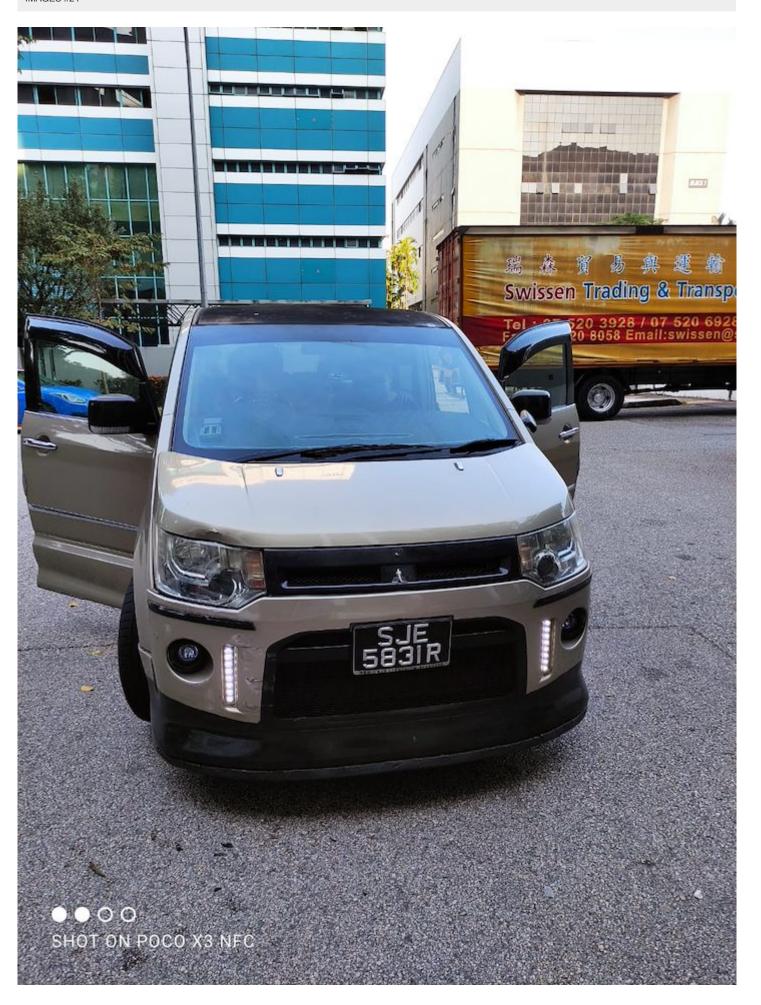














CERTIFICATE OF INSURANCE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : TAN BENG CHEOW Vehicle No. : SMV3974A Period of Insurance : 29 Sep 2020 To 28 Sep 2021 Policy No. : 2070139592

Engine No. : 2ZR2H45900 Endorsement No.

: JTDZS3EU10J060880 Chassis No. Issued Date : 30 Sep 2020

ABOUT THE COVER

: TOYOTA PRIUS+ 1.8 HYBRID Engine Capacity/Tonnage : 1,798.00 CC Sum Insured : Market Value First Year of Registration : 2020 Insuring with COE/PARF : Yes Driver Restriction : NA Off Peak Car : No

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 Oriver 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 Mileage Condition ; Unlimited Mileage

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 - S0 Own Damage - \$1000 Theft - S0 Flood Cover - \$1000

Section 2 Property Damage - S0

Windscreen: \$100

Named Driver and Excess (where applicable)

TAN BENG CHEOW - \$1000 (Own Damage), \$1000 (Flood Cover)

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

1.Toyota Bodycare Centre (For accident repair & accident reporting). Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188
 2.Toyota Bodycare Centre (For accident repair & accident reporting). Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

For other Approved Reporting CentrestAlG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AlG website www.aig.sg or AlG SG Mobile App. Simply search and download 'AlG SG' from iTunes or Google Play.

IMPORTANT NOTES

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

IWe 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 Read Transport Act, 1987 (Malaysia), Read Transport (Amendment). Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504667270

INCHCAPE AUTO TOYOTA - BSTU058

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

33 LENG KEE ROAD SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Fartana Ismail



AIG Asia Pacific Insurance Pte. Ltd AIG Building 78 Shenton Way #07-16

MOTOR ACCIDENT INTERVIEW FORM

	lan Bus Charl
VEHICLE NUMBER	Tan Bung Cheow SMV 3974 A
DATE/ TIME OF ACCIDENT	25/2/2021 / 8-57 am
PLACE OF ACCIDENT	open compand at Toh guen road east
THIRD PARTY VEHICLE (IF ANY)	SJE 5831R
	HERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?
	NSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?
SJE 5831R hit my car	Smv 3474A from behind my bumper i
dancel and his front	I the velycle is damaged.
9	V
	F INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE