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# 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 10/03/2021 17:37 (SGT) Date of Accident 06/03/2021 09:35 (SGT) Exact Location of Accident Tiong Poh Rd, Singapore Additional Location Information JUNCTION OF SENG POH LANE Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SGW7068E

### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ONG SZE ANN NRIC No SXXXX130H **Email Address** otw\_wlifred@gmail.com Mobile Phone No (Phone) +65-97572268 Alternative Phone No +65-91500295

### VEHICLE PARTICULARS

Manufacturer Mercedes Model E250 Variant Exact purpose for which vehicle was being used at time of 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 Policy Number 2100504704-03 Cover Note Number

### DRIVER

Name of Driver WILFRED ONG TJUN WEI NRIC No SXXXX166A

Date Of Driving Pass	21/09/2012
Driving experience	31/08/2012
Gender	8 YEARS AND 7 MONTHS Male
Mobile Number	(Phone) +65-91500295
Alt. Phone Number	(Priorie) +03-91300293
Email Address	-
Address	otw_wlifred@gmail.com
Address complement	4 ST. PATRICK'S ROAD
Postcode	-
	424117
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	Social designation of the second of the second seco
Road Surface	Clear
Nodu Sullace	Dry
OTHER INFORMATION	
Was any foreign vahials involved in the assidant?	No
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident	No
	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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
PASSENGER 1	
Name	UNKNOWN
Gender	Female
Gender	remale
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	NO
ii yes, against whom?	
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	SDP505D
Vehicle Manufacturer	Kia
Vehicle Model	±.

Private car

Vehicle Variant Vehicle Colour Vehicle Category

Contact Number	(Phone) +65-93862147
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 daims 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. 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 lodgment 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 aforesald.
- 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 daims;
  - (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 disclosura of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mall packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or desting 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
- 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detaction, investigation and management in present and all future daims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Resolung Centre F

Name:

NRIC/FIN No .:

Policyholder's Signature Date & Time:

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## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 06/03/2021 at about 9.35—9.40am. I was travelling along. Tiong Poh Road which is a one way street. I was going straight and travelling within my own lave. As I was passing the junction between Tiong Poh Road and Seng Poh Lare, I saw the vehicle (B) coming out of Seng Poh Lane on my right hand side and tried to cut across the front of my vehicle. The vehicle (B) was make had made a right turn without stopping at the stop line on Seng Poh Lare. Upon seeing a
Tiong Poh Rosal which is a pre way street. I was going straight and travelling within my own lane. As I was passing the junction between Tiong Poh Rosal and Seng Poh Lane, I saw the vehicle (B) coming out of Seng Poh Lane as my right hand side and tried to cut across the front of my vehicle. The vehicle (B) was make had made a right turn without stopping at the Stop line on Seng Poh Lane. Upon seeing 1
and travelling within my own lare. As I was passing the junction between Tions Poh Road and Seng Poh Lare, I saw the vehicle (B) coming out of Seng Poh Lare on my right hand side and tried to cut across the front of my vehicle. The vehicle (B) was make had made a right turn without stopping at the Stop line on Seng Poh Lare. Upon seeing a
Tiong Poh Road and Seng Poh Lane, I saw the vehicle (B) coming out of Seng Poh Lane on my right hand side and tried to cut across the front of my vehicle. The vehicle (B) was make had made a right turn without stopping at the Stop line on Seng Poh Lane. Upon seeing a
Seng Bh Lane on my right hand side and tried to cut across the front of my vehicle. The vehicle (B) was make had made a right turn without stopping at the stop line on Seng Poh Lane. Upon seeing a
of my vehicle. The vehicle (B) was make had made a right turn.  Without stopping at the Stop line on Seng Poh Lane. Upon seeing 1
without stopping at the stop line on Seng Poh Lane. Upon seeing ,
the vehicle (B) making the turn, I applied my brakes and harned at
the vehicle (B) to warn the driver. However, the vehicle (B) did
not stop and eventually hit the front-right partion of my vehicle.

DECLARATION

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

licyholder's Signature Driver's Sig

ste & Time: (if driver is not the policyte

Dote & Time:

Reporting Centre Personners Signeture

NRIC/FIN No.:

Policyholder's Signature

Date of Accident	06/03/2011 Accident Time: 9.35 am (24-HR-FORMAT)
	Tiong poh Rd and seng poh bane
	SEW 7068E
Vehicle Make/Model	merceles Benz Elso sedan Avantgarde
Insurance Company :	Alg Policy No. 2100504704_03
	ong Sze Ann / SIZSZ 130H
Owner or Company Contact No.	9757 2268 Owner's HPCompany Tel
	wilfred ung Tian wei /59213166A
DRIVER'S Date of Birth :_	13/04/ 1992 DRIVER'S License Pass Date 31 Aug 2012
	Spouse \ Parents Children Sibling \ Employee \ Others:
	4 St Patrick's Road (5) 424/17
DRIVER'S Contact No./ Alt No. : 1	91500295 2)
DRIVER'S Occupation :[	NDOOR NOUTDOOR (eg. working inside or outside of an ofc) Lawy
Email Address :	othewilfred@gmail-com
Weather & Road Surface	CLEAR & DRY RAINING & WET VAFTER RAIN & WET
Reporting Type : R	eporting Only Claim Other Party) Claim Own Ins
Number of Passengers (including Driver	): 1 male,   Female
Was there any video Captured by car car Exact purpose for which vehicle was being	mera: YES \NO used at the time of accident: Private use \ Work purpose
	ty Driver's Particulars (if any)
Vehicle Reg No: SOP SOSD,	Vehicle Reg No:
Vehicle Make Model: Kia	Vehicle Make\Model:
Name DRIVER: Li Tak ming	Name DRIVER:
IC No. DRIVER: 52 56 6864 B	IC NO. DRIVER:
DRIVER'S Contact & add: 93862147	DRIVER'S Contact & add:



# CENTIFICATE OF INSURANCE

# MERGEDES-BENZ MOTOR INSURANCE PRIVATE

Name of Policyholder

: Ong Sze Ann

Period of Insurance

: 23 Mar 2020 To 22 Mar 2021

Engine No.

: 27492030914091

Chassis No.

: WDD2130452A173950

Vehicle No.

: SGW7068E

Policy No.

: 2100504704-03

Endorsement No.

Issued Date

: 19 Feb 2020

### ABOUT THE COVER

Make/Model

: MERCEDES Benz E250 Sedan Avantgarde

Engine Capacity/Tonnage: 1,991.00 CC

Sum Insured : Market Value

First Year of Registration: 2017

Driver Restriction

: NA

Off Peak Car : No

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 Inexpendenced 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 2000cc

\* 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**

Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$500

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Ong Sze Ann - \$500 (Own Damage), \$500 (Flood Cover)

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

 Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818 2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 52051818

For other. Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 5200. 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: Daimler Financial Services Africa & Asia Pacific 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). 003027886/

0504380233

CYCLE & CARRIAGE - JULI

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Aşia Pacific Insurance Pte. Ltd.

SSPQCC