

SMF213A0005

TP Insurer:

Confirmed by: (

Confirmed by: () Date: ()
Insured/Driver Liability: () % [Note-Est Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$)) Loading: \$1,000 () / \$2,000 ()

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO Refor of register.

() Total Loss Case : to e-mail Insurer URGENTLY,

() Total Loss Case : to e-mail Insurer URGENTLY;
Drive-In () / Towed-In () ; Invoice# VRS () / NO () ; Towing Co# ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection

3) Upload Resurvey Photo (Repair Cost > \$3000)

Injury :

MA 2101878

Driver/Owner:

COTING (No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

1) ALL Accident Reporting (\$30)	INCR 115
2) DA1 Damage Assessment (\$100)	\$100.00
3) TPI Towing Fee	\$100
4) TPI Follow Through Survey	\$30
5) TPI Follow Through Survey (Resurvey)	
Verbal Injury Settlement Only (over 10 Jan 2005)	\$75
6) TPI Re-inspection	\$160
7) NHTSA DA + SMRT Survey	
8) NTUC Additional Services	
ONE	\$5
NS; Courtesy Car / TPI Allowance	\$10
NS; Repairs Coordination	\$25
NS; Post Repair Inspection	\$5
INR DV / Collision Damage Coordination	\$25
TP (NHT) TP (NHT) TP (NHT)	\$0
2) NHTSA Mobile	
Invoice dated	Fee Charged
Invoice dated	Fee Charged

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	10/03/2021 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_wlfred@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 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	2100504704-03
Cover Note Number	-

DRIVER

Name of Driver	WILFRED ONG TJUN WEI
NRIC No	SXXXX166A

Date Of Driving Pass	31/08/2012
Driving experience	8 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91500295
Alt. Phone Number	-
Email Address	otw_wlifred@gmail.com
Address	4 ST. PATRICK'S ROAD
Address complement	-
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	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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
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

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDP505D
Vehicle Manufacturer	Kia
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

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 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. 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 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (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.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

10/03/2021
Resi. Horton

SKETCH PLAN



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 lane. As I was passing the junction between 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 ~~was~~ had made a right turn without stopping at the stop line on Seng Poh Lane. Upon seeing the vehicle (B) making the turn, I applied my brakes and horned at the vehicle (B) to warn the driver. However, the vehicle (B) did not stop and eventually hit the front-right portion of my vehicle.

DECLARATION

I/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:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

10/03/2021
Keddi Wotach

Date of Accident : 06/03/2021 Accident Time: 9.35am (24-HR-FORMAT)
Accident Place : Tiong Poh Rd and Seng Poh Lane
Vehicle Reg. No (Car plate No.) : SFW 7068E
Vehicle Make/Model : mercedes Benz E250 sedan Avantgarde
Insurance Company : AIG Policy No. 2100504704_03
Owner or Company Names /IC NO: ong See Ann / S1252130H
Owner or Company Contact No. : 9757 2268 Owner's HP _____ Company Tel _____
DRIVER'S Name & IC no. : wilfred ong Tjun wei / S9213166A
DRIVER'S Date of Birth : 13/04/1992 DRIVER'S License Pass Date 31 Aug 2012
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : 4 St Patrick's Road (S) 424117
DRIVER'S Contact No./ Alt No. : 1) 9150 0295 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc) Lawyer
Email Address : otw.wilfred@gmail.com
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Ins
Number of Passengers (including Driver): 2 , 1 male , 1 female
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: SPP 505D,
Vehicle Make/Model: Kia
Name DRIVER: Li Tak ming
IC No. DRIVER: S2566864B
DRIVER'S Contact & add: 93862147

Vehicle Reg No: _____
Vehicle Make/Model: _____
Name DRIVER: _____
IC NO. DRIVER: _____
DRIVER'S Contact & add: _____

CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

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
Driver Restriction : NA Off Peak Car : No
First Year of Registration : 2017
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 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

Section 1
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)

1. Cycle & Carriage Eunus 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 62061818

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 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).

0504380233

CYCLE & CARRIAGE - JULI

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPQCC