



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 17:07 (SGT)
Date of Accident	09/03/2021 18:40 (SGT)
Exact Location of Accident	Bedok North Rd, Singapore
Additional Location Information	TOWARDS PIE EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA2588Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	OH HUN BOON, WINFRED (HU HANWEN)
NRIC No	SXXXX505E
Email Address	winfredd@gmail.com
Mobile Phone No	(Phone) +65-92371456
Alternative Phone No	+65-92371456

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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	1800023852-01
Cover Note Number	-

DRIVER

Name of Driver	OH HUN BOON, WINFRED (HU HANWEN)
NRIC No	SXXXX505E

Date Of Driving Pass	20/03/2009
* Driving experience	12 YEARS
Gender	Male
- Mobile Number	(Phone) +65-92371456
Alt. Phone Number	+65-92371456
Email Address	winfredd@gmail.com
Address	BLK 239 BISHAN STREET 22 #14-202
Address complement	-
Postcode	570239
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	Side Swipe
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	NG JIA HUI
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210310/7019

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	FBR9456R
Vehicle Manufacturer	-

Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	VUSHNU PREM
NRIC No	TXXXX953F
Contact Number	(Phone) +65-82330723
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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

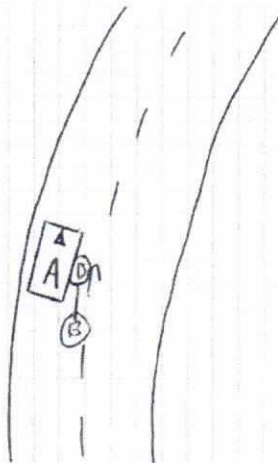
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

10/03/2021
Witnessed by Reporting Centre Personnel

Sketch Plan



V: A) SKA2588Y

V: B) FBR9456R.

Bedok North Road PIE
EXIT

Describe Circumstances of the Accident

refer to police

report NO. T/20210310/7019

Declaration

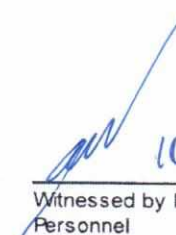
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time



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



10/03/2021

Witnessed by Reporting Centre
Personnel

Email: sm@idac.com.sg Tel no: 6555 6888

*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 09/03/2021 (dd/mm/yy) Time of Accident: 18 : 40 (24-HR-FORMAT)
Vehicle No.: SKA 2588 Y Vehicle Make & Model / Engine (cc): kia cerato k3 1591 cc Private Hire: (Y / N)
Exact location of Accident: BEDOK NORTH ROAD PIE EXIT 8A
Policyholder's Name / IC No.: OH HUN BOON, WINFRED S8805505E
Driver's Name / IC No.: OH HUN BOON, WINFRED S8805505E (As Above) ☐
Driver's Contact No.: 9237 1456 Company Contact No / Owner Contact No: _____
Driver's Address: 239 BISHAN STREET 22 #14-202 S570239
Owner Email address: winfredd@gmail.com Insurance Company: AIG
Driver Email address: winfredd@gmail.com

Relationship between Owner & Driver: (Please CIRCLE one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: OWNER

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

☒ Private use / ☐ Work purpose

Occupation (nature of job) ☒ Indoor / ☐ Outdoor

***No. of Passengers (Including Driver):** 02

*Passanger Name: Ng Jia Hui

Gender: Female

*Passanger Name: _____

Gender: _____

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☒ Yes / ☒ No (If YES) Which Police Station: 10 Ubi Ave 3

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: FBR 9456 R

Driver's Contact No: _____ Insurance Company: _____

2. Driver's Name / IC No (If Any): _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company: _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____



SINGAPORE POLICE FORCE



T/20210310/7019

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210310/7019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/03/2021 14:30	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: OH HUN BOON, WINFRED		Address: 239 BISHAN STREET 22 #14-202 SINGAPORE 570239	
ID Type / ID No.: NRIC NO / S8805505E		Contact No.: Home/Office: Mobile: 92371456	
Nationality: SINGAPORE CITIZEN		Email: WINFREDD@GMAIL.COM	
Sex: Male	Age: 33	Date of Birth: 21/02/1988	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SECONDARY SCHOOL TEACHER		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/03/2021 18:40	Type of Location: Bend
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBR9456R	Motorcycle	YAMAHA		Black		0
SKA2588Y	Car	KIA	CERATO K3 1.6A	Blue		1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20210310/7019

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210310/7019

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKA2588Y	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800023752-01	20/03/2020	19/03/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	VISHNU PREM		ID No.	T0035953F
Related Vehicle	FBR9456R (Motorcycle)		Contact No.	82330723
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	Slight
Driver				
Name	OH HUN BOON, WINFRED		ID No.	S8805505E
Related Vehicle	SKA2588Y (Car)		Contact No.	92371456
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

ON TUESDAY, 09/03/2021 AT ABOUT 1840HRS, I WAS DRIVING MY VEHICLE SKA2588Y ALONG BEDOK NORTH ROAD PIE EXIT 8A WITH MY GIRLFRIEND AS MY PASSENGER. I WAS DRIVING AT CONSTANT SPEED IN MY LANE ALONG THE SLIP ROAD EXIT WHEN I HEARD A LOUD CRASH ON MY RIGHT. AS I LOOKED TO MY RIGHT, I SAW A MOTORCYCLIST COLLIDING INTO MY CAR. HE WAS ALSO THROWN OFF HIS BIKE (FBR9466R). I IMMEDIATELY STOPPED MY VEHICLE AND WENT DOWN TO CHECK ON HIM. THERE WERE ABRASIONS AND CUTS ON HIS LEGS, HANDS AND SHOULDER. WE CHECKED FOR HIS WELL-BEING. HE MENTIONED THAT HE IS FINE, AND MAY OR MAY NOT SEE A DOCTOR. WE MANAGED TO CLEAN UP HIS WOUNDS, BEFORE DECIDING TO TALK ABOUT INSURANCE SETTLEMENTS. THERE ARE DAMAGES TO MY CAR AS WELL AS HIS MOTORCYCLE. 10TH MARCH MORNING THE MOTORIST CONTACTED ME THAT HE WENT CONSULT DOCTOR FOR HIS INJURY. IM FILING THIS REPORT FOR TRAFFIC POLICE TO PRODUCE A INVESTIGATION RESULT.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210310/7019

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Report No. T/20210310/7019

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210310/7019

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Report No. T/20210310/7019

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
10/03/2021 14:30

Classification Of Case:



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Oh Hun Boon, Winfred(Hu Hanwen)
Period of Insurance : 20 Mar 2020 To 19 Mar 2021
Engine No. : G4FGHH691494
Chassis No. : KNAFX411MJ5761692

Vehicle No. : SKA2588Y
Policy No. : 1800023752-01
Endorsement No. :
Issued Date : 20 Feb 2020

ABOUT THE COVER

Make/Model : KIA Cerato K3 1.6 EX

Engine Capacity/Tonnage : 1,591.00 CC

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2018

Insuring with COE/PAF : 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)

Oh Hun Boon, Winfred(Hu Hanwen) - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501

2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800

4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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: Standard Chartered Bank (Singapore) Limited

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).

0504624201

FULCOKICP2 - BO

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPCUE