

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 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.

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 Any false reporting may be referred to the Police for investigation.
 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.
 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	05/04/2021 14:32 (SGT)
Date of Accident	05/04/2021 09:10 (SGT)
Exact Location of Accident	Moonbeam Walk, Singapore
Additional Location Information	
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKD251R
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No Lim Yeong Phang SXXXX003Z yeongphanglim@yahoo.com (Phone) +65-98251916 (Home) +65-96622012
VEHICLE PARTICULARS	

Manufacturer Model Variant	Mercedes Glc250
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
cc	1991

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Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900149105-01
Cover Note Number	-

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Name of Driver	RUYTERS AUDREY
NRIC No	SXXXX478G



Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address	20/12/1966 Indoor 17/08/1985 35 YEARS AND 8 MONTHS Female (Phone) +65-96622012 - yeongphanglim@yahoo.com
Address Address complement Postcode Is the driver the policyholder?	9 Moonbeam Walk - 277222 No
If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	Spouse No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Hit and run / Vandalism / Damaged whilst parked Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 No - Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCHPLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes No No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	GT1234Y Commercial vehicle
Name of Driver	HOSSAIN MD ALMAS

GXXXX388W

(Phone) +65-96903337

Contact Number Address

Passport No/FIN

Address complement	-
Postcode ,	-
Insurance Company Name	Lonpac Insurance Bhd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

SKETCH PLAN

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- 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:

- 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 :
 - 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")
- 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 detection, investigation and management in present and all future claims.
- 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

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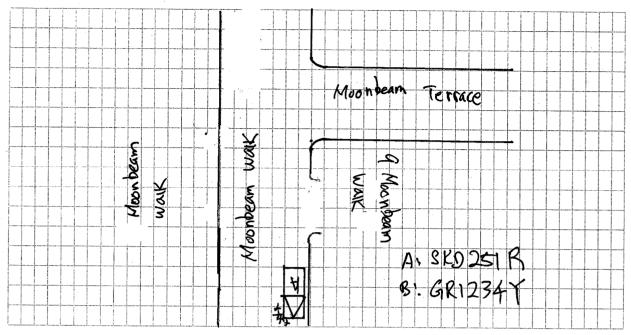
Date & Time

Go Chee Han DID: 6771 4336 HP: 9181 7717 Email: cheehan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd Service Centre - Pandan Loop

CREPORTING Centre Personnel's

Name:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At 9-10am, Ingdoorbell rangforme to look army car. A Bangladethi worker admitted to knocking into my car which was parked outside 15 Mounteam walk. He works for V-Teen construction Pretted which is the contractory 14 Mundean halk's murkrite.

The front right ride of my carand cartin is damaged. Photos taken and outmitted. Minimal damage to his lury ..

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Atteriver is not the policyholder)

Date & Time

Go Chee Han
DID: 6771 4336 HP: 9181 7717 Email: cheehan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop
Reporting Centre Personnel's
Name:

Policyholder's Signature Date & Time



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 - 17:00 UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre

with whom you submitted the Original Report. **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: _____Vehicle Registration No: SKD251R Original Report No: ___ Name(as shownin NRIC): Lim Yeong Phang __NRIC/FIN/PassportNo : SXXXX003Z (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate) Singapore(Address Mobile No.: Contact (Tel) **Email Address** ____Time of Accident : ____ 5 APR 2021 Date of Accident : MOONBEAM WALK Place of Accident Insurance Company: AIG (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: AMEND TP VEH NUMBER

Policyholder / Driver's Signature

DID: 6771 4336 HP: 9181 7717 Go Chee Han mail: cheehan.go@cyclecarriage.com.se man. onoman some your mest the Ltd.

Cycle & Carriage Industries Pre Ltd. Pandan Loop

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date:

Date:



ESTIMATE FOR SKD251R

Cycle & Carriage Industries Pte Limited Authorised Dealer Company No. 196400367W GST Reg No. MR-8500111-X

LONPAC INSURANCE BHD

MOTOR CLAIM DEPARTMENT 300 BEACH ROAD #17-04/07 THE CONCOURSE SINGAPORE 199555 62507388

Vehicle & Document Information						
WIP No	49331					
Reg No/Reg Date	SKD251R / 15/08/2019					
Date In/Mileage						
Chassis No	WDC2533462F6120248					
Engine No	27492031761544					
Make/Model	MB/MB GLC 250 4MATIC COUPE					
Colour/Trim	028 890 Cavansite B/ 041 101 ARTICO Blac					

Account No	Terms	Date/Time Printed	CSE	Operator		July and the St.	elic de la companya d	
WL001605	Credit	05/04/2021/ 19:33	CH CH	371 / Go Chee Hai	n			
		Description of Go	oods / Services		Qty	Unit Price	Disc%	Amount
	ACC DATE	NOT : 1900149105-01 // MBER : 5-4-2021 //	/ 5-4-2021	ONPAC ONPAC	LTA	XII	W	OICE
DATE IN/DAT DIRECT SETT A BPILAB	re surve	Y:	0112541			2		2400.00
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A BPILAB USING XENTE	RY DIAGN	OSTIC TO CHECK ON		RESET MEMORY TO			0.10	380.00
A BPILAB		NDARD. NETT ADLAMP WITH FOCUS	NETT	Mnn				120.00
M RH/FRONT FE M RH/COVER BU M FRONT BUMPI	ENDER UMPER AR	Contraction of the second	3 "		1.00 1.00 1.00	914.43 229.67 1964.91	00.00	914.43 229.67 1964.91
M RIVET					10.00	4.81	00.00	48.10

Confirmed & accepted by

Nett

7,557.11

7% GST on

7557.11

529.00

Total Payable

8,086.11

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

Pandan Loop Service Center 188 Pandan Loop Singapore 128378 Tel: 6777 8388 Fax: 6779 5383 www.mercedes-benz.com.sg

