# **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.

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   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 26/04/2021 12:25 (SGT) Date of Accident 25/04/2021 09:50 (SGT) Exact Location of Accident Woodlands Cres, Singapore ALONG WOODLANDS CRESCENT TWRDS WOODLANDS Additional Location Information **AVENUE 9** Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Toyota

Vehicle Registration Number **SJR5325S** 

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner WEE SOO MUN ..... NRIC No S7779100J Email Address VELOGRACE@YAHOO.COM Mobile Phone No (Phone) +65-96457184 Alternative Phone No (Office) +65-96457184

#### VEHICLE PARTICULARS

Model Corolla 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 - Reporting only Vehicle Category Private car Transmission Auto CC 1598

Manufacturer

#### INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Nο Policy Number 2100146776-11 Cover Note Number

## DRIVER

Name of Driver TAY SIEW HONG NRIC No S77726511 Date Of Birth 07/01/1977 Occupation Indoor Date Of Driving Pass 11/09/2009 Driving experience 11 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-98524931 Alt. Phone Number Email Address VELOGRACE@YAHOO.COM Address APT BLK 798 WOODLANDS DRIVE 72 #12-75 Address complement Postcode 730798 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Spouse 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?

Yes

PASSENGER 1

Name PASSENGER Gender Female

Was any other material or property damaged?

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

Number of Passengers (Including Driver)

PASSENGER 2

Name PASSENGER Gender Female

PASSENGER 3

Name PASSENGER Gender Male

## DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Phone No

(Phone) +65-18003639999

(Fax) +65-63640997

Police Station Address

1 Woodlands St 12 Singapore 738622

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Woodlands West Neighbourhood Police Centre

(Phone) +65-18003639999

(Fax) +65-63640997

1 Woodlands St 12 Singapore 738622

No

## CIRCUMSTANCES OF ACCIDENT

ON 25/4/2021 AT ABOUT 0950HRS I WAS TRAVELLING ALONG WOODLANDS CRESCENT TWRDS WOODLANDS AVE 9. AS I WAS ABOUT TO EXIT THE SLIP ROAD I THOUGHT VEHICLE B: SLX7204P HAD ALREADY MOVE FORWARD BUT I COULDN'T STOP ON TIME AND COLLIDE TO VEHICLE B BACK REAR BUMPER.

PLEASE REFER TO ANNEX D.



## 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	SLX7204P
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	-
Contact Number	_
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

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- 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.
- 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.
- 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:

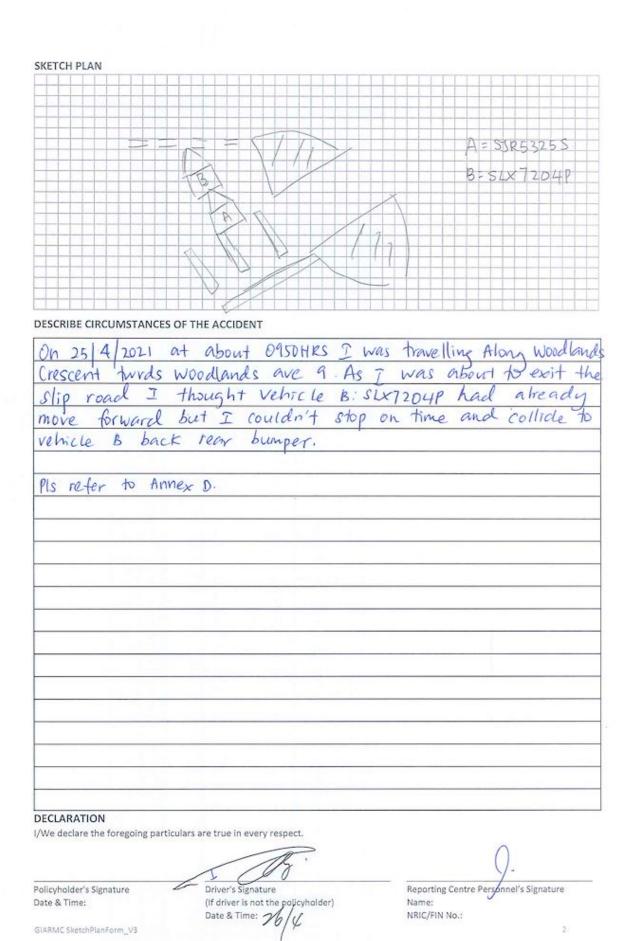
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
  - 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:
  - 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.:

GIARMC SketchPlanForm V3





# CERTIFICATE OF INSURANCE

## **AUTOPLUS PRIVATE VEHICLE**

Name of Policyholder : Wee Soo Mun Vehicle No. : SJR5325S : 29 Jun 2020 To 28 Jun 2021 Period of Insurance Policy No. : 2100146776-11

· 3774901672 Endorsement No. Engine No.

Chassis No. : MR053ZEE106147572 **Issued Date** : 31 May 2020

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6

Engine Capacity/Tonnage : 1,598.00 CC Sum Insured : Market Value First Year of Registration : 2009 Driver Restriction : NA Off Peak Car : Yes 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 30 years old and above

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 test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any triade or business or use for any purpose in connection with Motor Triade.

Loss of Use 1500cc - 1600cc Optional

\* 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)

Wee Soo Mun - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine 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: DBS BANK 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 I/V of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2018 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0030210453

AIG - AUTO DIRECT

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AVGSGMOBILEAPP









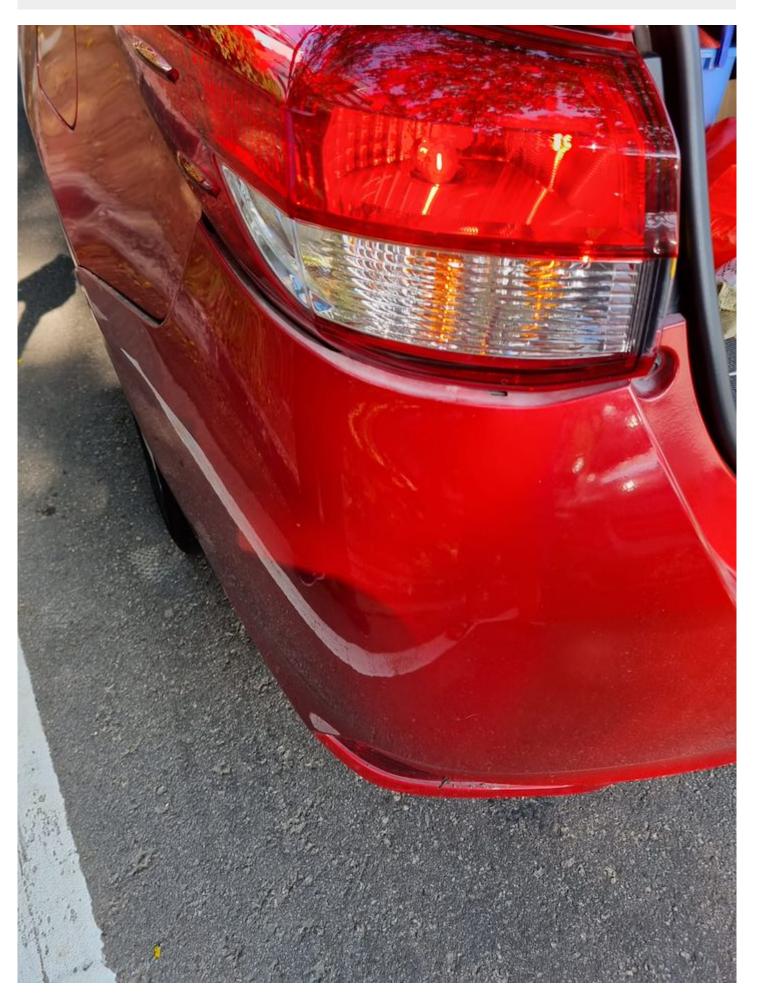




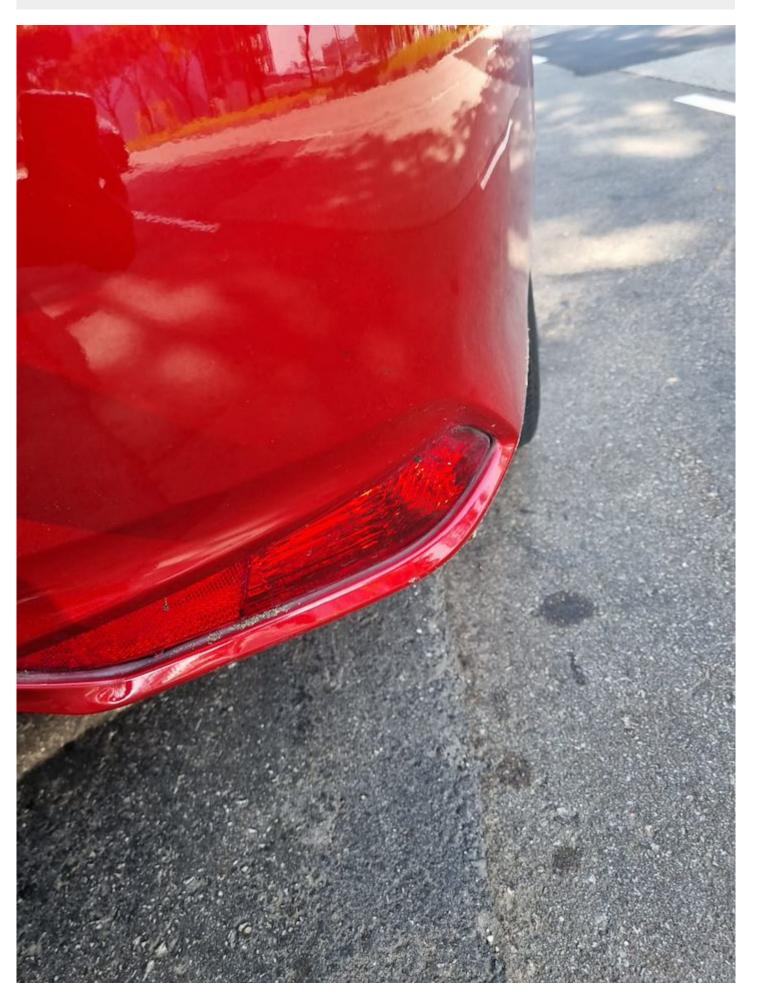


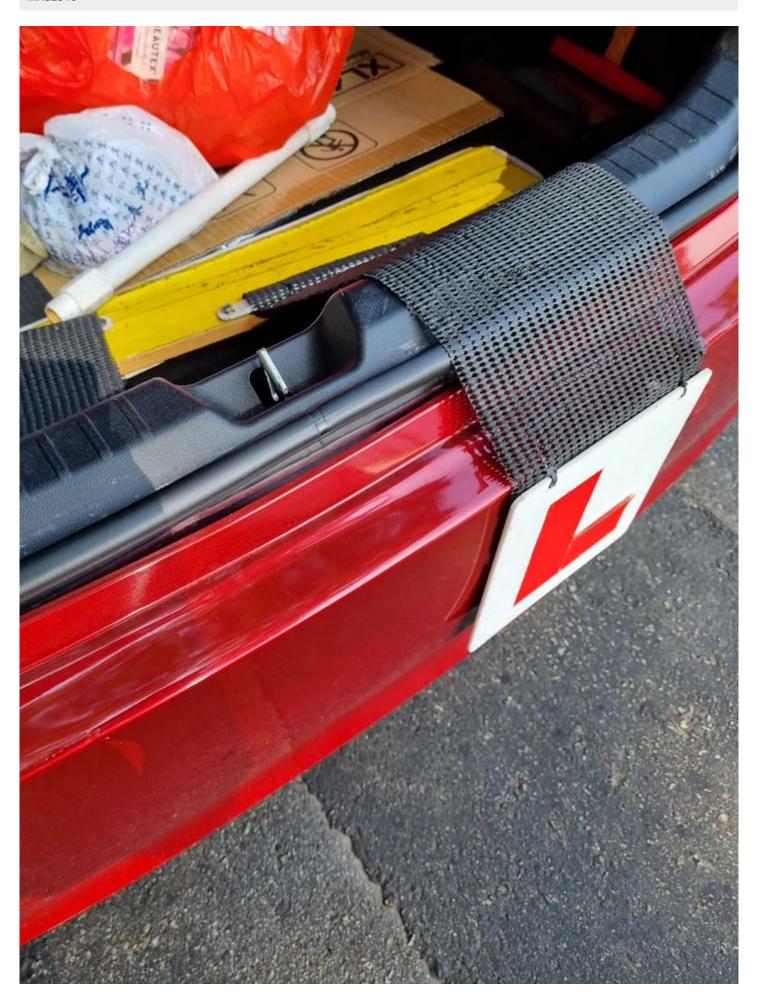


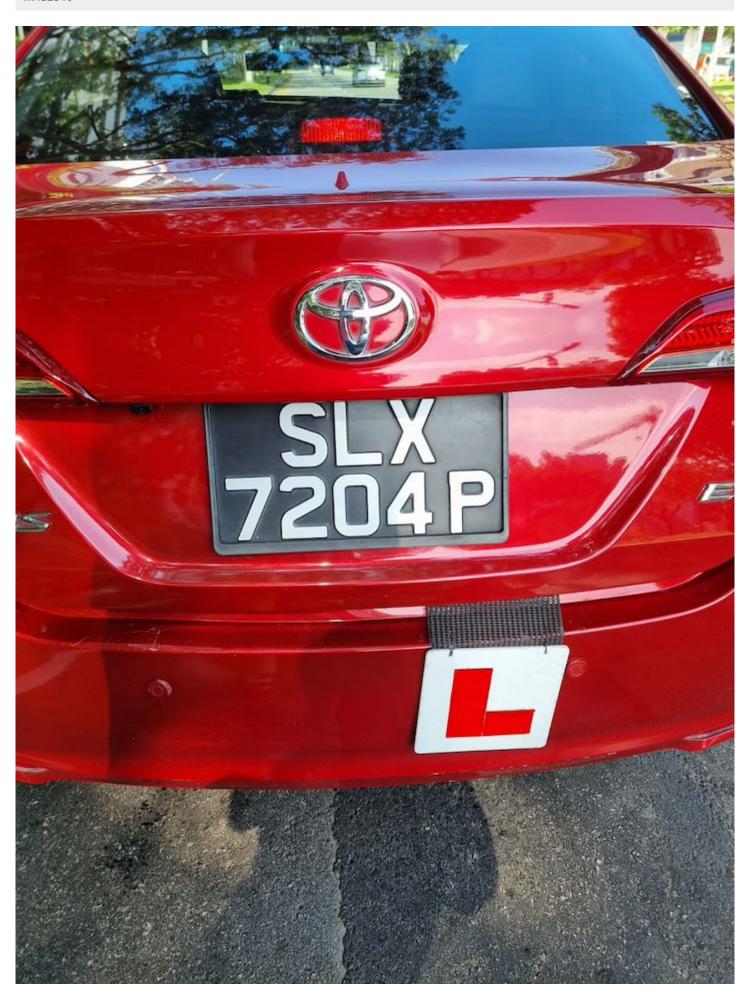


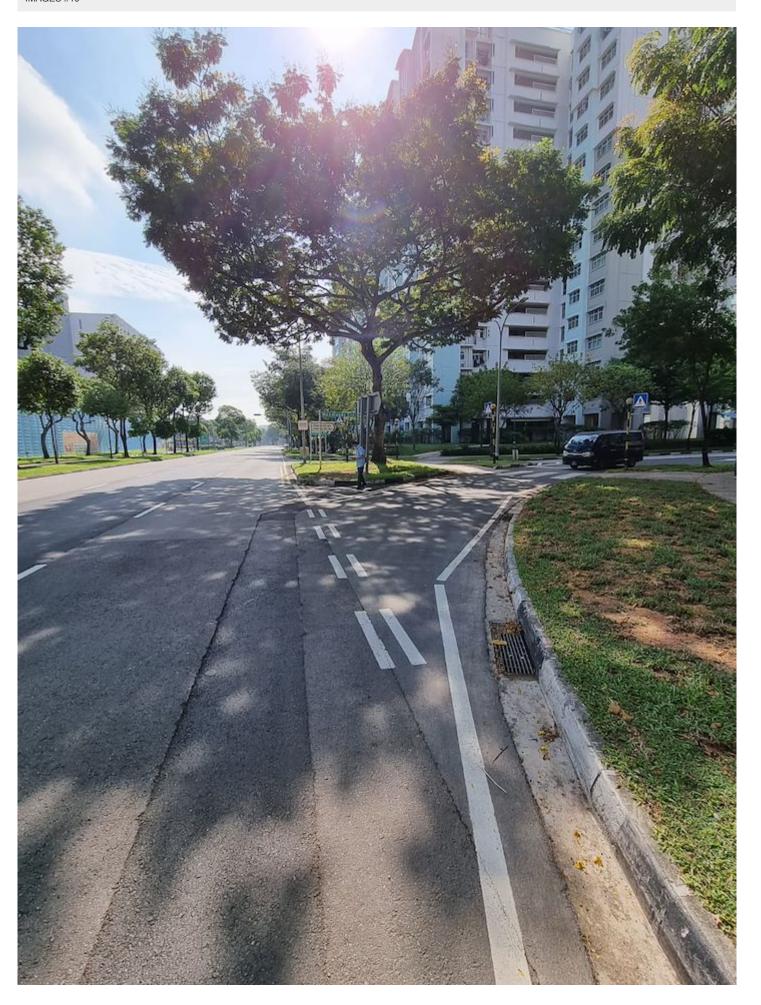








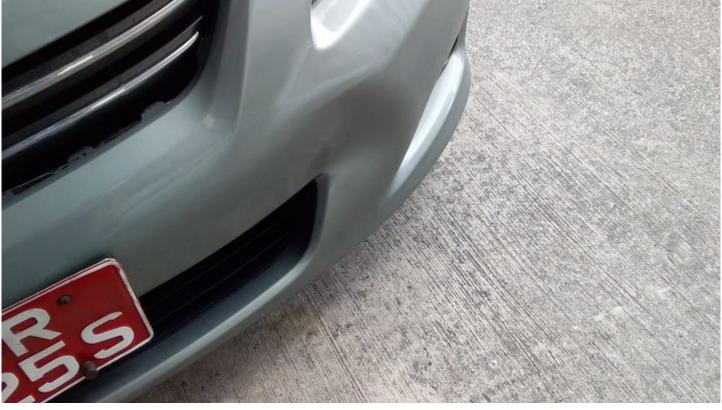


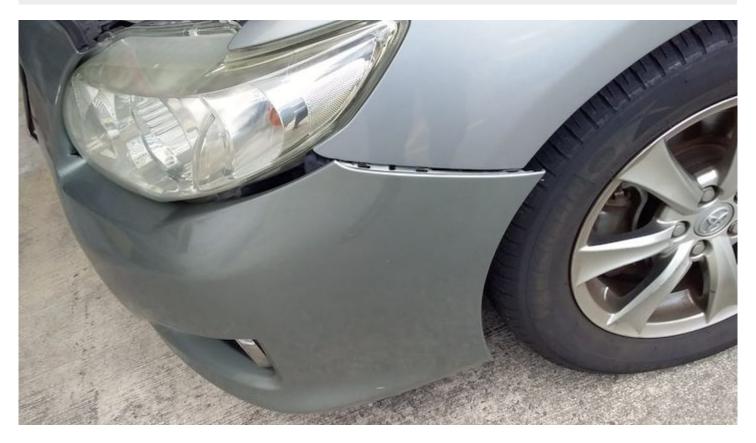
















Annex D

## NOTICE OF REPORTING

This is to confirm that TAY SIEW HONG, NRIC/FIN <u>S77726511</u>, has reported to the Police a non-injury traffic accident which occurred along <u>Along Woodlands Crescent towards Woodlands Avenue 9</u>.

On 25 April 2021 at 0950HRS involving the following vehicles:

- 1) SJR5325S SILVER TOYOTA ALTIS
- 2) SLX7204P RED TOYOTA VIOS
- 2 If this accident was reported to the Police within 24 hours of its occurrence, then he has complied with Sec. 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer:			Sg	t(3) Mohd Ma	alik	
Date: _	25/4/2021	_	Time:	1018hrs	_	
Police P	ost/Unit:	Wood	llands We	est NPC	S/D Ref:	44

Original - to be issued to informant Duplicate - to be submitted to Traffic Police

