

# 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 .....              | 04/05/2021 10:19 (SGT)                                       |
| Date of Accident .....                | 03/05/2021 15:15 (SGT)                                       |
| Exact Location of Accident .....      | Jln Toa Payoh, Singapore                                     |
| Additional Location Information ..... | at slip road from Lorong 6 Toa Payoh towards Jalan Toa Payoh |
| Country/State of Loss .....           | Singapore                                                    |

## DETAILS OF OWN VEHICLE

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | SCZ9118M |
|-----------------------------------|----------|

### INSURED/POLICYHOLDER

|                                |                       |
|--------------------------------|-----------------------|
| Is company? .....              | No                    |
| Name Of Registered Owner ..... | Chua Ywee Liang       |
| NRIC No .....                  | S7805182E             |
| Email Address .....            | yishun216@hotmail.com |
| Mobile Phone No .....          | (Phone) +65-98458928  |
| Alternative Phone No .....     | +65-98458928          |

### VEHICLE PARTICULARS

|                                                                                    |             |
|------------------------------------------------------------------------------------|-------------|
| Manufacturer .....                                                                 | BMW         |
| Model .....                                                                        | 316i        |
| 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? ..... | Yes         |
| Vehicle Category .....                                                             | Private car |
| Transmission .....                                                                 | Auto        |
| CC .....                                                                           | 1598        |

### INSURANCE COMPANY

|                                 |                                      |
|---------------------------------|--------------------------------------|
| Name of Insurance Company ..... | AIG Asia Pacific Insurance Pte. Ltd. |
| Type of Coverage .....          | Comprehensive                        |
| Fleet Policy .....              | No                                   |
| Policy Number .....             | 2100382559-06                        |
| Cover Note Number .....         | -                                    |

### DRIVER

|                      |                       |
|----------------------|-----------------------|
| Name of Driver ..... | Patrick Chua Mui Chye |
| NRIC No .....        | S0043033A             |

|                                                                    |                                    |
|--------------------------------------------------------------------|------------------------------------|
| Date Of Birth .....                                                | 30/01/1948                         |
| Occupation .....                                                   | Indoor                             |
| Date Of Driving Pass .....                                         | 19/02/1969                         |
| Driving experience .....                                           | 52 YEARS AND 3 MONTHS              |
| Gender .....                                                       | Male                               |
| Mobile Number .....                                                | (Phone) +65-98621613               |
| Alt. Phone Number .....                                            | -                                  |
| Email Address .....                                                | patrickchua@aig.com.sg             |
| Address .....                                                      | Blk 232 Lorong 8 Toa Payoh #08-218 |
| Address complement .....                                           | -                                  |
| Postcode .....                                                     | 310232                             |
| Is the driver the policyholder? .....                              | No                                 |
| If No, Relationship of the Driver with the Insured .....           | Parent                             |
| 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 .....                                                         | 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) .....                                                             | 1   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? ..... | No  |

#### 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 the 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 ..... | SLH9236T             |
| Vehicle Manufacturer .....        | -                    |
| Vehicle Model .....               | -                    |
| Vehicle Variant .....             | -                    |
| Vehicle Colour .....              | -                    |
| Vehicle Category .....            | Private car          |
| Name of Driver .....              | Kenneth Ng           |
| NRIC No .....                     | S9735047G            |
| Contact Number .....              | (Phone) +65-91905525 |
| Address .....                     | -                    |

|                                               |   |
|-----------------------------------------------|---|
| Address complement .....                      | - |
| Postcode .....                                | - |
| Insurance Company Name .....                  | - |
| Nature Of Damage .....                        | - |
| Details of property damaged in accident ..... | - |
| No. Of Passenger (Including Driver) .....     | 1 |

## SKETCH PLAN

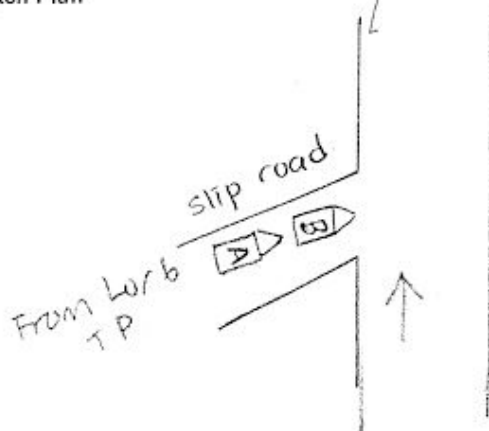
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**  
I understand, 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.

03/05/2021 22:44  
Policyholder's Signature / Date & Time  
- 4 MAY 2021  
Sketch Plan

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

Witnessed by Reporting Centre Personnel  
Jenny Lim



at slip road from  
Lorong 6 Toa Payoh  
towards Jalan Toa Payoh.

A - SCZ 9118M

B - SLH 9236T.

**Describe Circumstances of the Accident**

On 3rd May 2021 @ around 3.15 as I was driving along Lor. 6 turning down a slip road towards Jalan Toa Payoh.

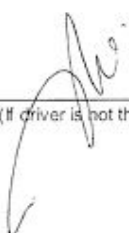
The vehicle in front of me SLH9236T after turning towards the slip road suddenly stopped. I tried to step on my brake but was too late and bump onto the rear of his car.


There wasn't any bodily injury except his car and my front portion was badly damaged.

**Declaration**

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

  
 03/05/2021 22:44  
 Policyholder's Signature / Date & Time  
 - 4 MAY 2021

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

  
 Witnessed by Reporting Centre Personnel  
 Jenny Lim





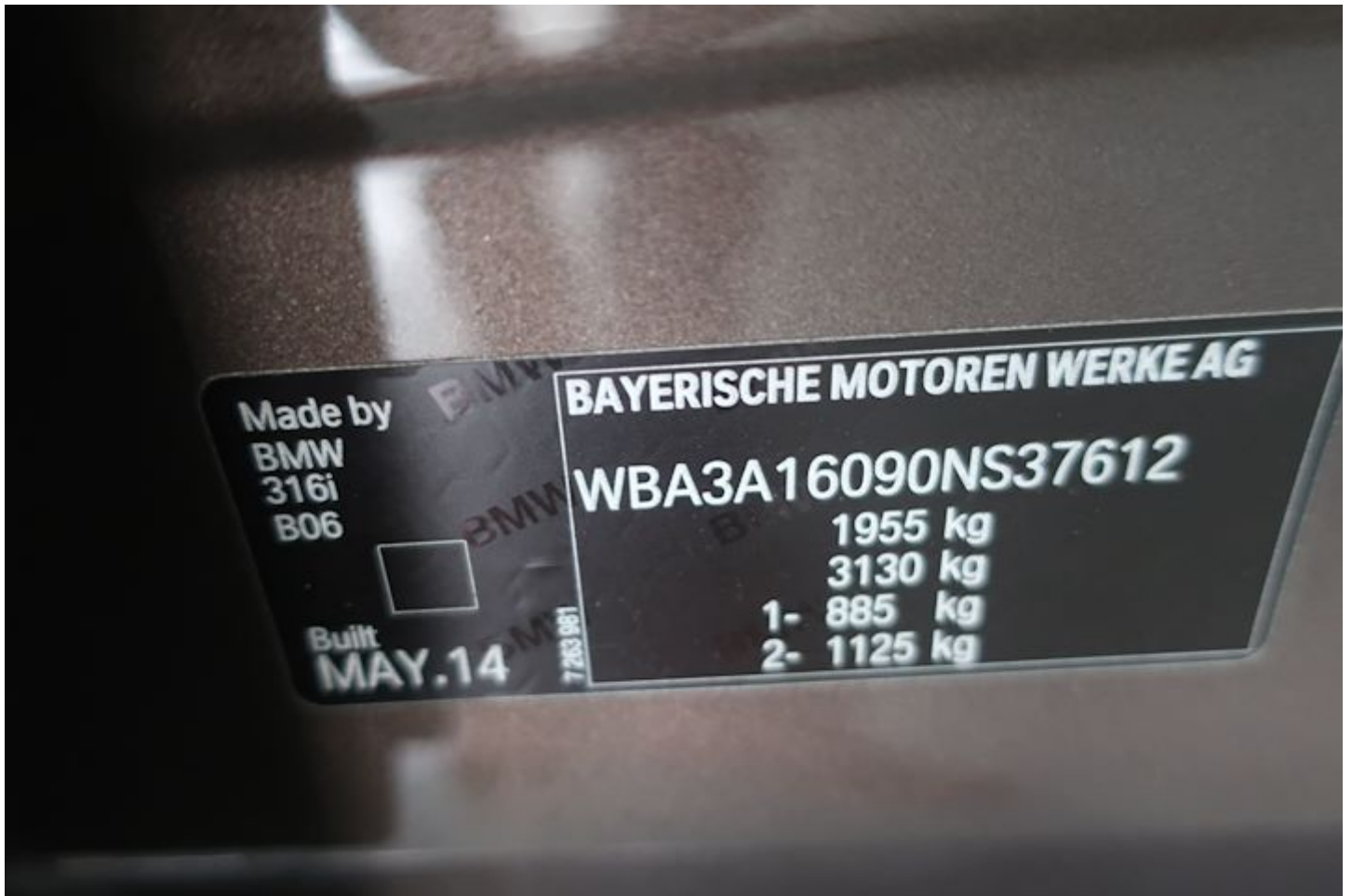














# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

**Name of Policyholder** : Chua Ywee Liang  
**Period of Insurance** : 25 Jul 2020 To 24 Jul 2021  
**Engine No.** : B065J723N13B16A  
**Chassis No.** : WBA3A16090NS37612

**Vehicle No.** : SCZ9118M  
**Policy No.** : 2100382559-06  
**Endorsement No.** :  
**Issued Date** : 12 Jul 2020

### ABOUT THE COVER

**Make/Model** : BMW 316I LUXURY  
**Engine Capacity/Tonnage** : 1,598.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2014  
**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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

**Age Condition** : 35 years old and above

**Mileage Condition** : Unlimited Mileage

**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 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)

Chua Ywee Liang - \$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 hotline at +65 6338 6200. Alternatively, You may refer to AIG website [www.aig.sg](http://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: United Overseas Bank Limited

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).

0263000000

CHUA MUI CHYE PATRICK

AIG BUILDING 78 SHENTON WAY #07-16

SINGAPORE 079120 SP-MIDGE-SEANTAN

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

MUI CHYE PATRICK CHUA