

JOSEPH GAY & COMPANY

ADVOCATES & SOLICITORS
UEN 53131273M GST Reg No. : M90367664A

GAY THUAN EWE JOSEPH MICHAEL
SEO YONG CHERN

151 CHIN SWEE ROAD
#02-16 MANHATTAN HOUSE
SINGAPORE 169876
TEL: 65355878 (3 LINES)
FAX: 65338286
EMAIL: mail@joegayco.com
OFFICE HOURS:
9 AM TO 6 PM (MON - FRI)

YOUR REF:

DATE: 4th May 2021

OUR REF: 140/2021/ap

AIG Asia Pacific Insurance Pte Ltd
AIG Building
78 Shenton Way #07-16
Singapore 079120

IMMEDIATE ATTENTION

BY POST & EMAIL ONLY
(claimsdcmangement@aig.com)

Dear Sirs

RE: PRE-REPAIR SURVEY ON MOTOR CAR SMX 2333X

**ACCIDENT INVOLVING SMX 2333X AND SML 8457X
ALONG CTE ON 02-05-2021**

We are instructed by Mr Poo Kwang Huat, the registered owner of motor car SMX 2333X, to notify you of a road traffic accident on 2nd May 2021 at about 1105 hours along CTE involving our client's motor car SMX 2333X and vehicle registration number SML 8457X driven by your insured driver at the material time. A copy of the Singapore Accident Statement filed is enclosed.

As a result of the accident, our client's motor car SMX 2333X has been damaged and will be lying at Lye Designs located at 10 Ang Mo Kio Industrial Park 2A, #04-04 AMK AutoPoint, Singapore 568047 (Tel: 64833353) on 5th May 2021 (Wednesday).

Before our client's repairer proceeds to repair the damaged vehicle, please let us know within 2 working days whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully



encs

cc Lye Designs
By email only

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 03/05/2021 11:49 (SGT)
Date of Accident 02/05/2021 11:05 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information CTE TOWARDS CITY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX2333X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner POO KWANG HUAT
NRIC No SXXXX483F
Email Address MOUNTAIN333@YAHOO.COM
Mobile Phone No (Phone) +65-92333222
Alternative Phone No +65-92333222

VEHICLE PARTICULARS

Manufacturer Honda
Model Civic
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
Transmission Manual
CC 1996

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited
Type of Coverage Comprehensive
Fleet Policy No
Policy Number V0115683
Cover Note Number 05/02/2021 - 04/02/2022

DRIVER

Name of Driver POO KWANG HUAT
NRIC No SXXXX483F

Date Of Birth	15/01/1974
Occupation	Indoor
Date Of Driving Pass	04/01/1993
Driving experience	28 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92333222
Alt. Phone Number	+65-92333222
Email Address	MOUNTAIN333@YAHOO.COM
Address	289 BISHAN ST 24
Address complement	#16-21
Postcode	570289
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	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

PLS REFER TO THE SKETCH PLAN BY DRIVER

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SML8457X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM JOON KIAT
Contact Number	(Phone) +65-91241994
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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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:

03 May 21

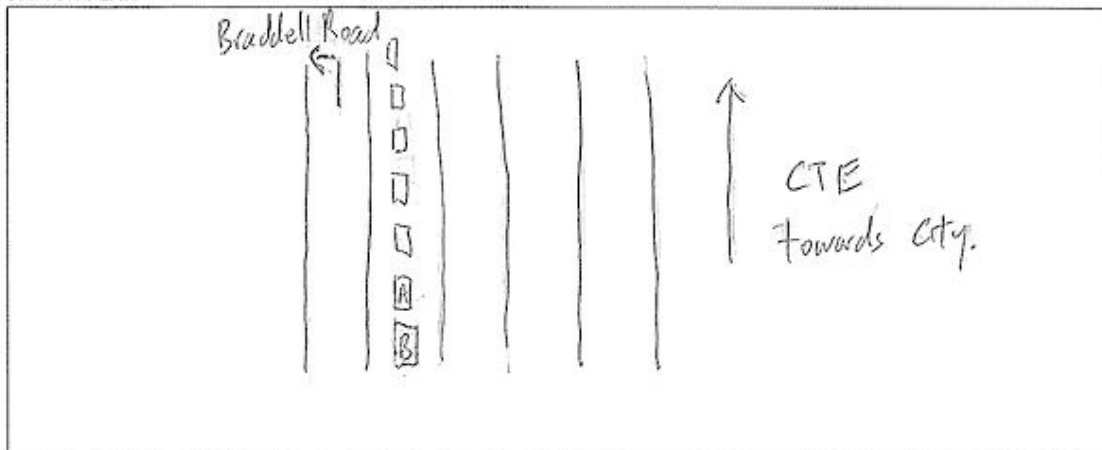
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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



Date of accident: 2-May-21 Time: 1105 hrs Location: CTE towards city
 My Vehicle A: SML 2333X Vehicle B: SML 8457X Vehicle C: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

When I was driving along CTE towards city before Braddell Road exit road. There was a queue in front of my lane. I slowed down and stopped. Behind a Toyota ^{Camry} (SML 8457X) driven by Lim Joon Kiat was unable to stop in time and hit my rear.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

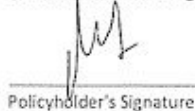
& myself :

Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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


 Policyholder's Signature

Date & Time:

03 May 21

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AH LIM MOTOR COMPANY





















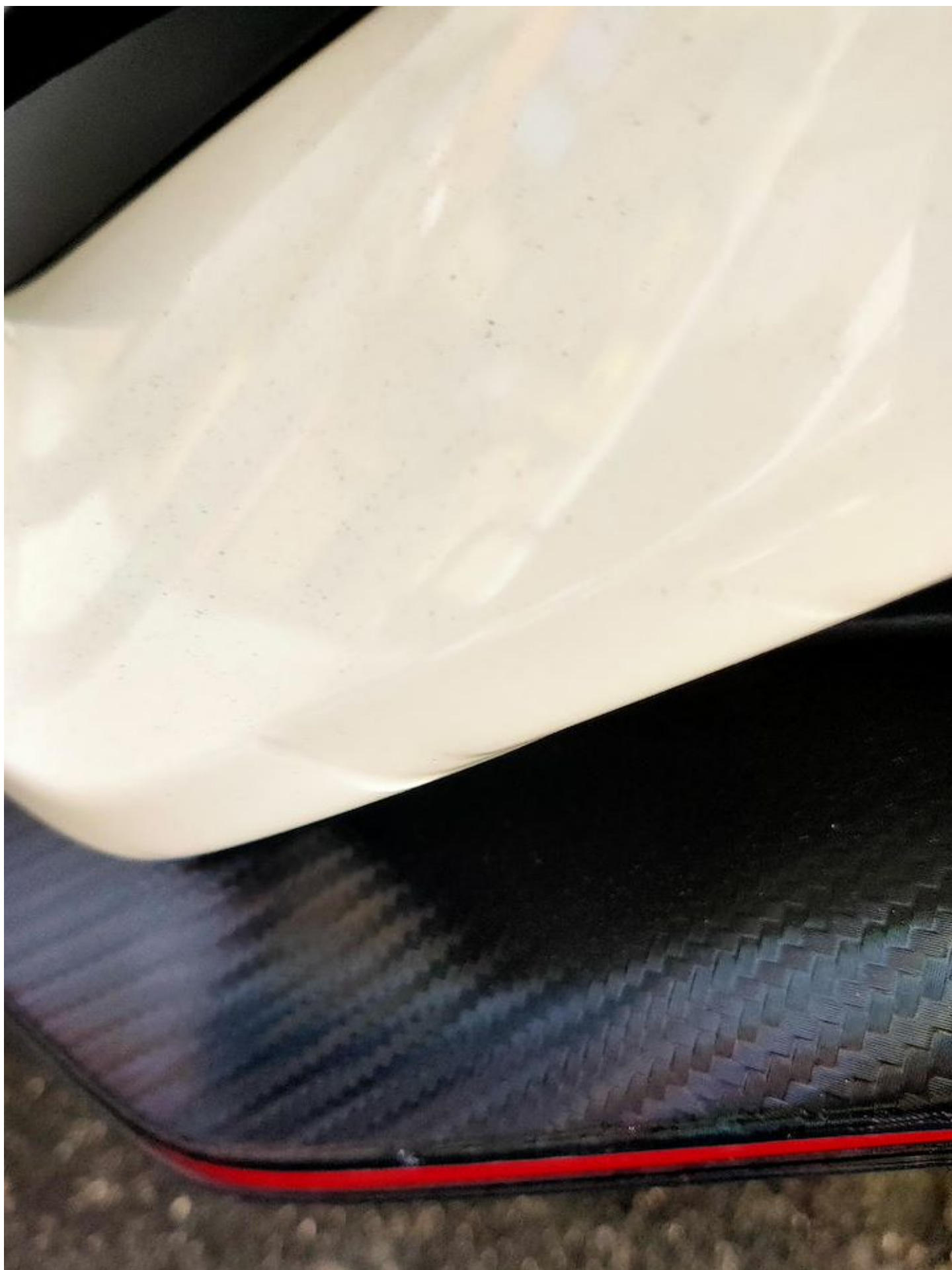


















For Customer Service please visit
1 Pickering Street
#01-01 Great Eastern Centre
Tel: +65 6248 2668 Fax: +65 6327 3080



Certificate of Insurance

ORIGINAL

Policy No. : 2011-20115443-VU-2001
Policy Type : Drive And Save Plus

Risks : 0001
Cover : Comprehensive w/ Workshop

DESCRIPTION OF VEHICLE:

Vehicle Registration : 20033316
Vehicle Make & Model : HONDA CIVIC TYPE-R 1.8CC 5DR

Name of Insured : LIM EUNG HUI

Period of Insurance : 05-02-2021 0000HRS to 04-02-2022

PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE:

1. The Policyholder.

The Policyholder may also drive a motor car not belonging to or hired under a hire purchase agreement or otherwise to him/her or his/her employee or partner partner.

Any other person who is driving on the Policyholder's order or with his/her permission.

Within the event of the death of the Policyholder, if any member of the Policyholder's family, or a paid driver who has been driving the car during the lifetime of the Policyholder & permission to drive has not been withdrawn prior to the death of the Policyholder, or any other person who has been given permission to drive the vehicle prior to the death & such permission had not been withdrawn by the Policyholder.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident, loss or damage.

EXCLUSIONS AS TO USE

Use for social, domestic and pleasure purposes and for the

Policyholder's business.

The policy does not cover use for hire or reward, racing, speed-testing, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any other trade or business or otherwise, or purpose in connection with the Motor Trade.

Liabilities rendered inoperative by Section 3 of the Motor Vehicles (Third Party) and Compensation Act (Chapter 187) and Section 25 of the Road Transport Act, 1987 (Malaysia) are not to be included under their headings.

Signed for and on behalf of the Company

Authorized Signature

05-02-2021

Great Eastern General Insurance Limited (Reg No: 1920 0000/VN)
A wholly owned subsidiary of Great Eastern Holdings Limited
1 Pickering Street, #01-01 Great Eastern Centre, Singapore 048669
Tel: +65 6248 2668 Fax: +65 6327 3080 [greinsurance.com](http://www.greinsurance.com)