### **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.

- 4. The issue and acceptance of this is form by instrained 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 27/04/2021 09:41 (SGT) Date of Accident 26/04/2021 08:45 (SGT) Exact Location of Accident Singapore Additional Location Information ANG MO KIO AVE 1 Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Yes

Vehicle Registration Number FN7887D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SIEW KUM MENG

NRIC No S2604882F

Email Address MICHAELSIEW831@GMAIL.COM

Mobile Phone No (Phone) +65-90626918

Alternative Phone No +65-90626918

VEHICLE PARTICULARS

Manufacturer Mercedes Model **GLC300** 

Variant

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?

Vehicle Category Private car Transmission Auto

CC 1991

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.

Type of Coverage Comprehensive Fleet Policy

Policy Number 2000004795-01

Cover Note Number

DRIVER

Name of Driver SIEW KUM MENG NRIC No S2604882F

Date Of Birth 08/01/1961 Occupation Indoor Date Of Driving Pass 11/06/1988 Driving experience 32 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-90626918 Alt. Phone Number +65-90626918 Email Address MICHAELSIEW831@GMAIL.COM Address 51 JALAN MENARONG Address complement Postcode 577458 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? Yes Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο FOREIGN VEHICLE 1 Vehicle Registration Number **JSY485** Vehicle Category Motorcycle PASSENGER 1 Name **UNKNOWN** Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Ang Mo Kio North Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004849999 Alt. Police Station Phone No (Fax) +65-62181399 Police Station Address 51 Ang Mo Kio Avenue 9 Singapore 569784 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT T/20210426/2104 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

No

Was there any audio recorded?

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	JSY485
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	TANG WU CHUAN
Work Permit No	405713128
Contact Number	(Phone) +65-97154509
Address	<u>-</u>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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
- 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
- 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
- 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 :
  - (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
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the
- 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 (c) agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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: (e)
  - (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

0

Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

Go Chee Han DID: 6771 4336 HP: 9181 7717 Email: chechan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd Survive Centre : Pandan Leep

Curreporting Centre Personnel's

Name

SKETCH PLAN A) EN7887D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Reser to police report: 1/20210426/2004.

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)

Policyholder's Signature

Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

Go Chee Han DID: 6771 4336 HP: 9181 7717 Email: chechan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd
Customeroring Centre Pandan Loop
Customeroring Centre Personnel's

Name:



### CERTIFICATE OF INSURANCE

#### MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : SIEW KUM MENG

Period of Insurance : 20 Jan 2021 To 19 Jan 2022

Engine No. Chassis No.

: WDC2533842F734159

: 26492030213850

Vehicle No. Policy No.

: EN7887D : 2000004195-01

Endorsement No.

Issued Date

: 01 Dec 2020

#### ABOUT THE COVER

Driver Restriction

Make/Model

: MERCEDES Benz GLC300 Coupe

Engine Capacity/Tonnage : 1,991.00 CC

Sum Insured : Market Value

First Year of Registration : 2020

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

: NA

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.

Off Peak Car : No

Age Condition

: All Age Condition

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 tation, 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 2000cc

\* 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, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

#### EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

SIEW KUM MENG - \$800 (Own Damage), \$800 (Flood Cover)

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

1.Cycle & Carriage Eunos Service Center (For accident reporting only). Add: 330 Ubi Road 3 Singapore 49855 62061518 2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair. Add: 188 Pandan Loop Singapore 128376 62061618

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.alg.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: Daimler Financial Services Africa & Asia Pacific Ltd

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).

CYCLE & CARRIAGE - JACQHO

AIG Asia Pacific Insurance Pte. Ltd.

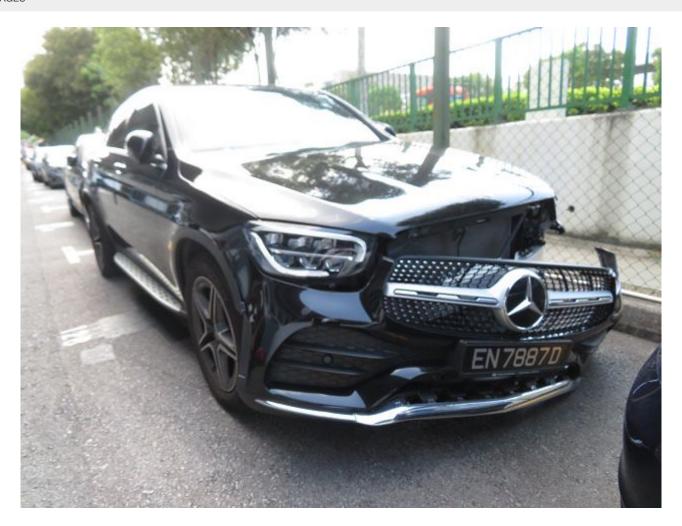
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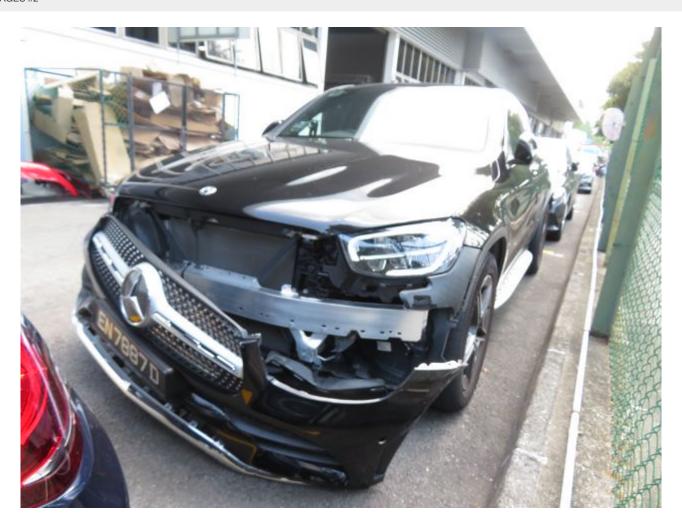
239 ALEXANDRA ROAD SINGAPORE 159930

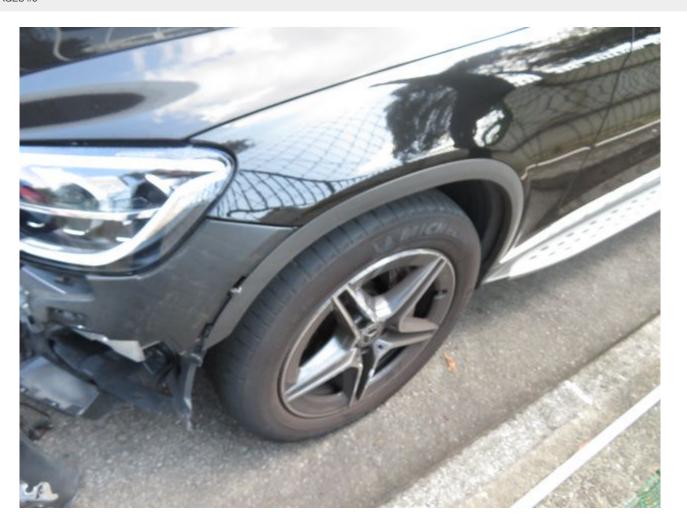
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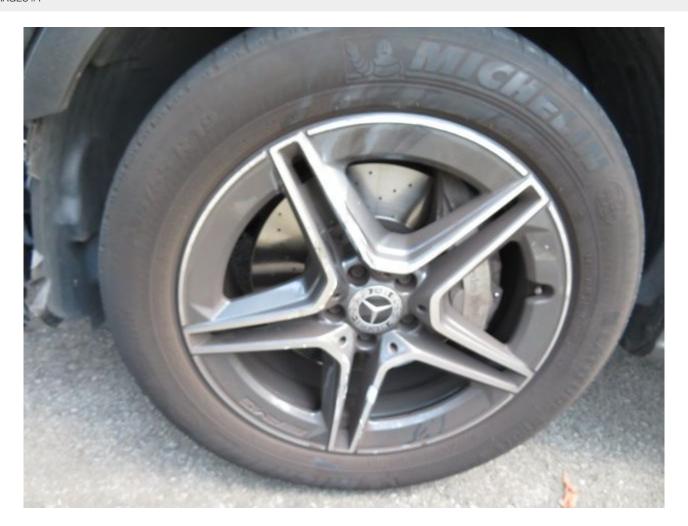
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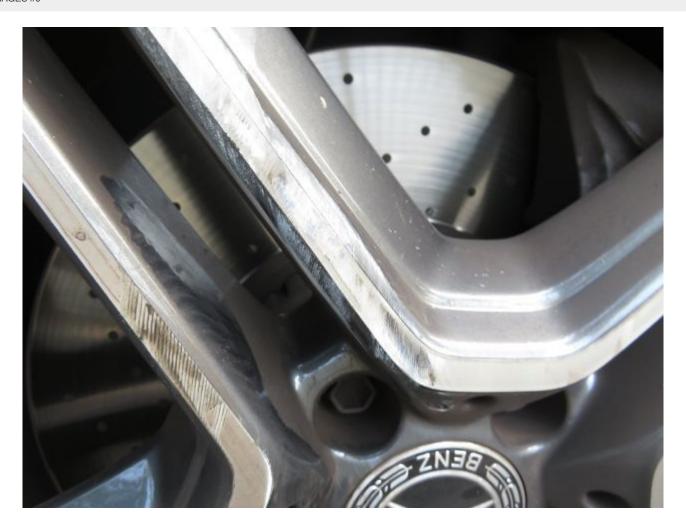


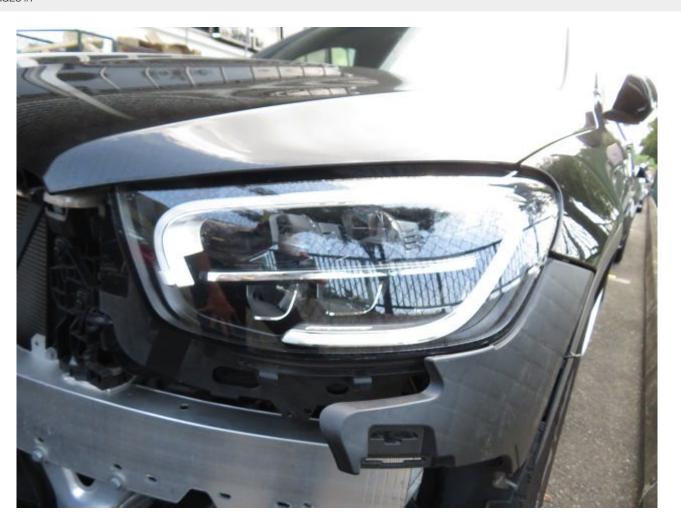








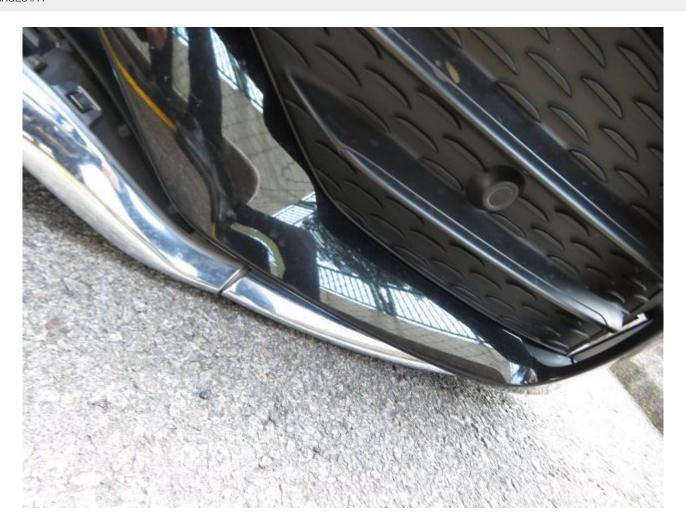


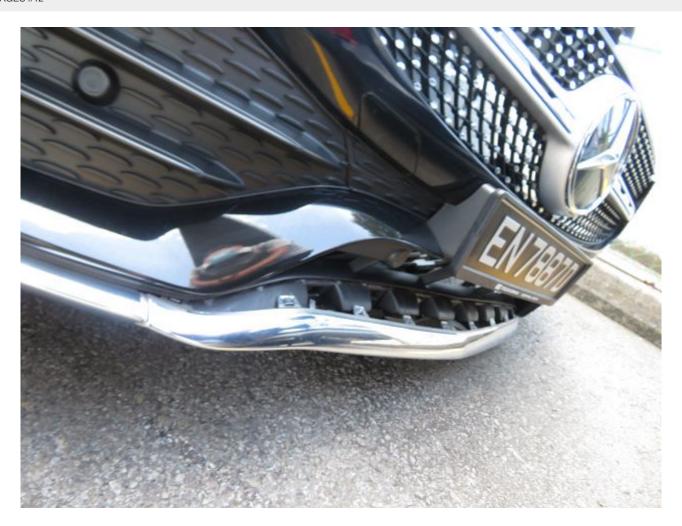


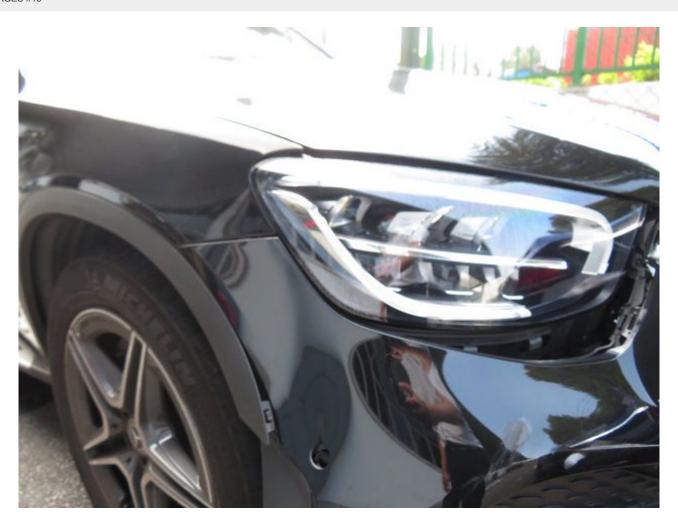


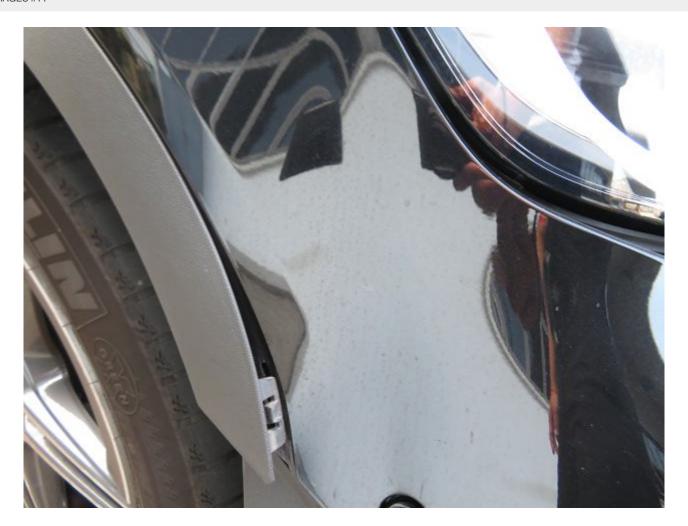




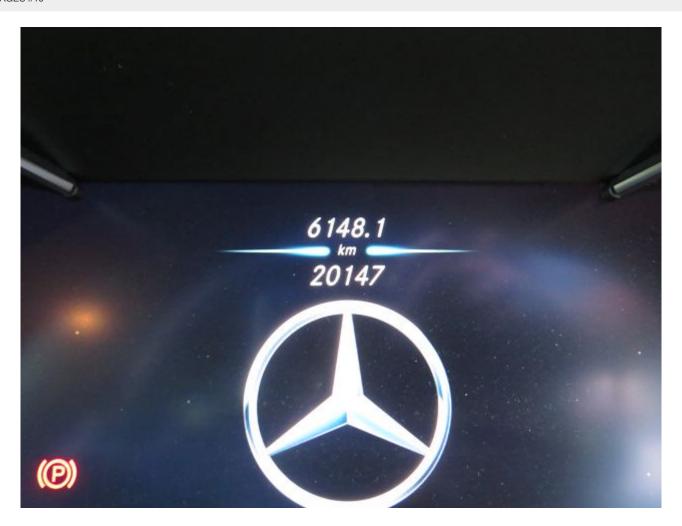


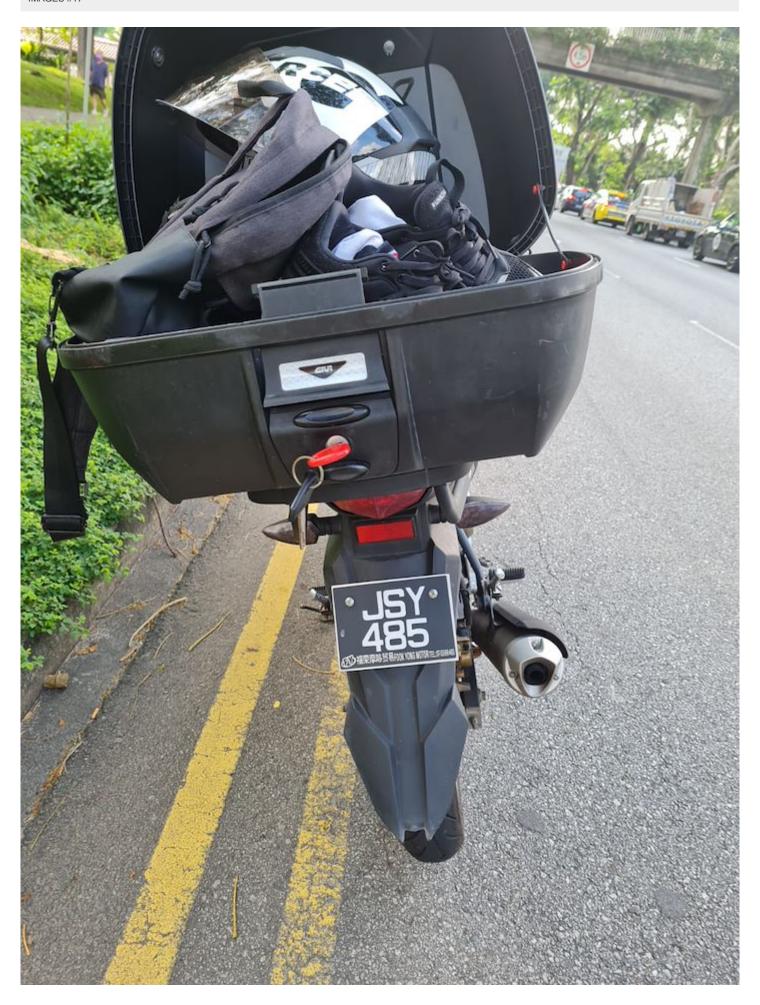




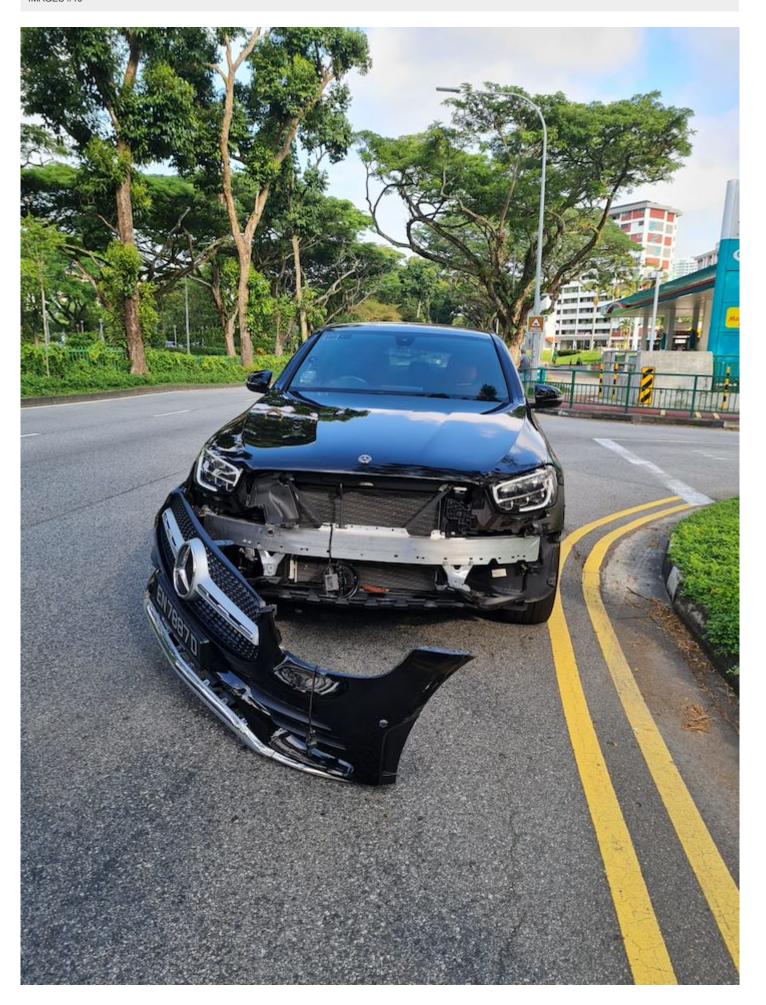














# SINGAPORE POLICE FORCE

T/20210428/2104

1 of 4 Report No. T/20210426/2104

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
26/04/2021 19:21		104

			104			
Informa	nt's Partic	ulars				
CONTRACTOR DESIGNATION	Informant: JM MENG		Address: 51 JALAN MENARONG SINGAPORE 577458			
ID Type NRIC NO	/ ID No.: D / S26048	82F	Contact No.: Home/Office: Mobile: 90626918			
National SINGAP	ity: ORE CITIZ	EN	Email:			
Sex: Male	Age: 60	Date of Birth: 08/01/1961	Type of Informant:			
Race: Chinese			Language:	Institution / School Name		
Occupation: SENIOR GENERAL MANAGER		. MANAGER	Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 26/04/2021 08:45	Type of Location Straight Road
Location:			120/04/2021 00:40	Commission of the Commission o

#### ANG MO KIO AVENUE 1

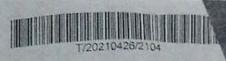
Weather: Clear	Road Surface: Dry	Road Speed Limit:
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction		Anyone conveyed by ambulance:

Lange Statement of the Control of th	ehicle Involve	The second secon		I A		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
EN7887D	Car	MERCEDES BENZ	GLC300 4MATIC COUPE (R19 LED)	Black	Slightly Damaged	1
JSY485	Motorcycle					0



## SINGAPORE POLICE FORCE

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel No: 1800-4519999



2 of 4 Report No. T/20210426/2104

CONTINUATION OF REPORT

ehicle Insurance		Effective	Expiry Date
ORIGINA TRISINGUE COMPENIA	Insurance No	The state of the s	19/01/2022
	2000004195-01	20/01/2021	18/01/2022
	Insulance Company	Insurance Company Insurance No	Insurance Company Insurance No Electric

Details of Perso	on Involved					
Any Redestrian I	nvolved No		-			The NIA
No of Pedestria	ns Injured: NIL		Use of Pe	destnar	Cross	sing: NA
Driver		SAME				000040000
Name	SIEW KUM MENG			ID No.		S2604882F
Related Vehicle	EN7887D (Car)			Contact No.		90626918
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	NIL Date Disc		charge NIL			
No. of Days grant	ed Medical Leave	NIL.	Degree of			
Rider						
Vame	TANG WU CHUAN			ID No		405713128
Related Vehicle	JSY485 (Motorcycle)			Contact No		97154509
Hospital/Clinic	NIL		Class Drivin Licence Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No of Days gran	nted Medical Leave	NIL	Degree of	Injury	NIL	

#### Brief Details.

On 26/04/2021 at about 0845hrs. I was driving my car bearing registration number EN7887D along Ang Mo Kio Avenue 1. While I was stationary on the extreme right lane along Ang Mo Kio Avenue 1, near to Blk 222 Ang Mo Kio Avenue 1, I changed to the middle lane after signaling left. After successfully changed to the middle lane, a motorbike bearing registration number JSY485 then side swiped to my left front tire. The motorcyclist did not fall however was wobbling and managed to stop at the left side of the road.

I then immediately came out of my car and checked on the motorcyclist and he informed he does not require any medical attention though I noticed that there is a small swell on his right leg after a while. We then exchanged particulars and the motorcyclist left the scene. Both myself and my wife were not injured.

Not long after, traffic police and ambulance came down to scene. However, I informed that the rider had already left. After which, traffic police informed does not require me to stay. I called for towing sequences



Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999



3 of 4 Report No. T/20210426/2104

CONTINUATION OF REPORT

As a result of the collision, my car had scratches to the left front rim. My front bumper had dislodged as well. The motorbike seems to not have any damage.

I wish to state that I have an inbuilt camera in my car.

