

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 31/05/2021 17:02 (SGT)
Date of Accident 30/05/2021 19:45 (SGT)
Exact Location of Accident Serangoon Ave 3, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGJ5796T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Tan Siew Kim
NRIC No S1315592E
Email Address jimkye@hotmail.com
Mobile Phone No (Phone) +65-93872195
Alternative Phone No +65-93872195

VEHICLE PARTICULARS

Manufacturer Toyota
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

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 0100656314-14
Cover Note Number -

DRIVER

Name of Driver Kee Yong Chye
NRIC No S1158299J

Date Of Birth	02/10/1956
Occupation	Outdoor
Date Of Driving Pass	24/05/1976
Driving experience	45 YEARS
Gender	Male
Mobile Number	(Phone) +65-93872195
Alt. Phone Number	-
Email Address	jimkye@hotmail.com
Address	133 Serangoon Ave 3 #07-12
Address complement	-
Postcode	556113
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	SGL8995E
Insurance Company of Other Vehicle Owned by Driver	NTUC Income Insurance Co-operative Ltd

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Glenda Kee Li ting
Gender	Female

PASSENGER 2

Name	Gloria Kee Li qing
Gender	Female

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 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	SMZ1560C
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

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

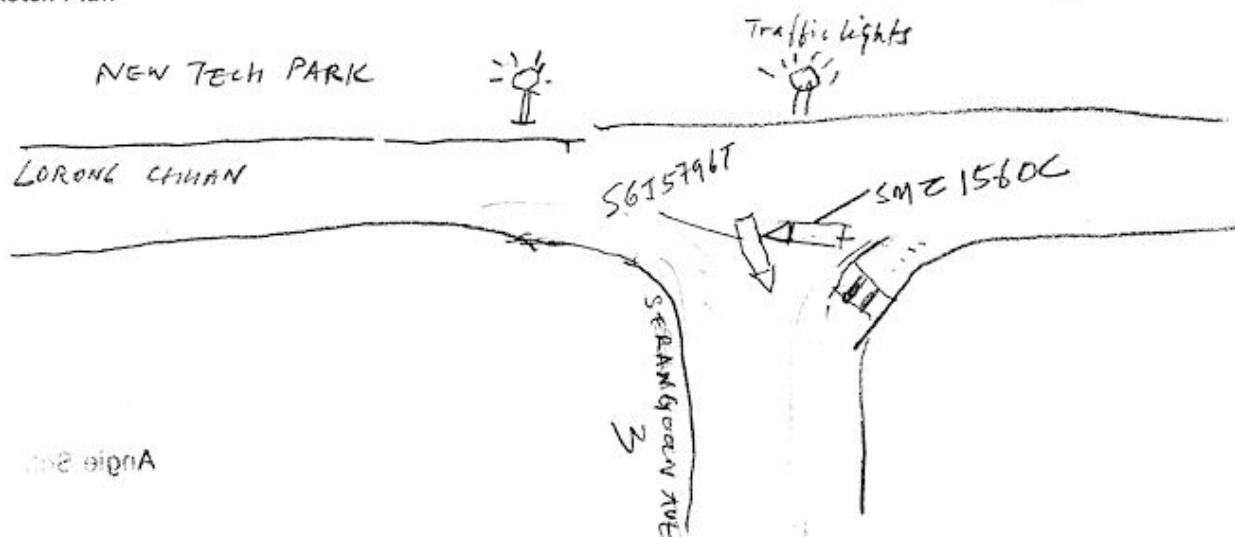
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Angie Soh

Sketch Plan



Describe Circumstances of the Accident

About 1945 hrs on 30/05/21 was waiting at the traffic light to turn from Lorong Chuan into Serangoon Ave 3. Saw oncoming vehicle signaling left and on left side of road. At that time all the other 2 oncoming lanes were empty.

Seeing that I slowly move on to turn into Serangoon Ave 3. And suddenly we heard a loud bang on the left side passenger door. This was only after we have already move going into Serangoon Ave 3.

There was no honning or any skidding sound of tyres before the collision happen.

Other party has 3 persons & I was with my daughters Gloria + Glenda Kee.

2 signA

Declaration

We declare the foregoing particulars are true in every respect.

<p>Policyholder's Signature / Date & Time</p>	<p>Driver's Signature (If driver is not the policyholder) / Date & Time</p> <p>31/05/21 1945 hrs</p>	<p>Witnessed by Reporting Centre Personnel</p> <p>Angie Soh</p>
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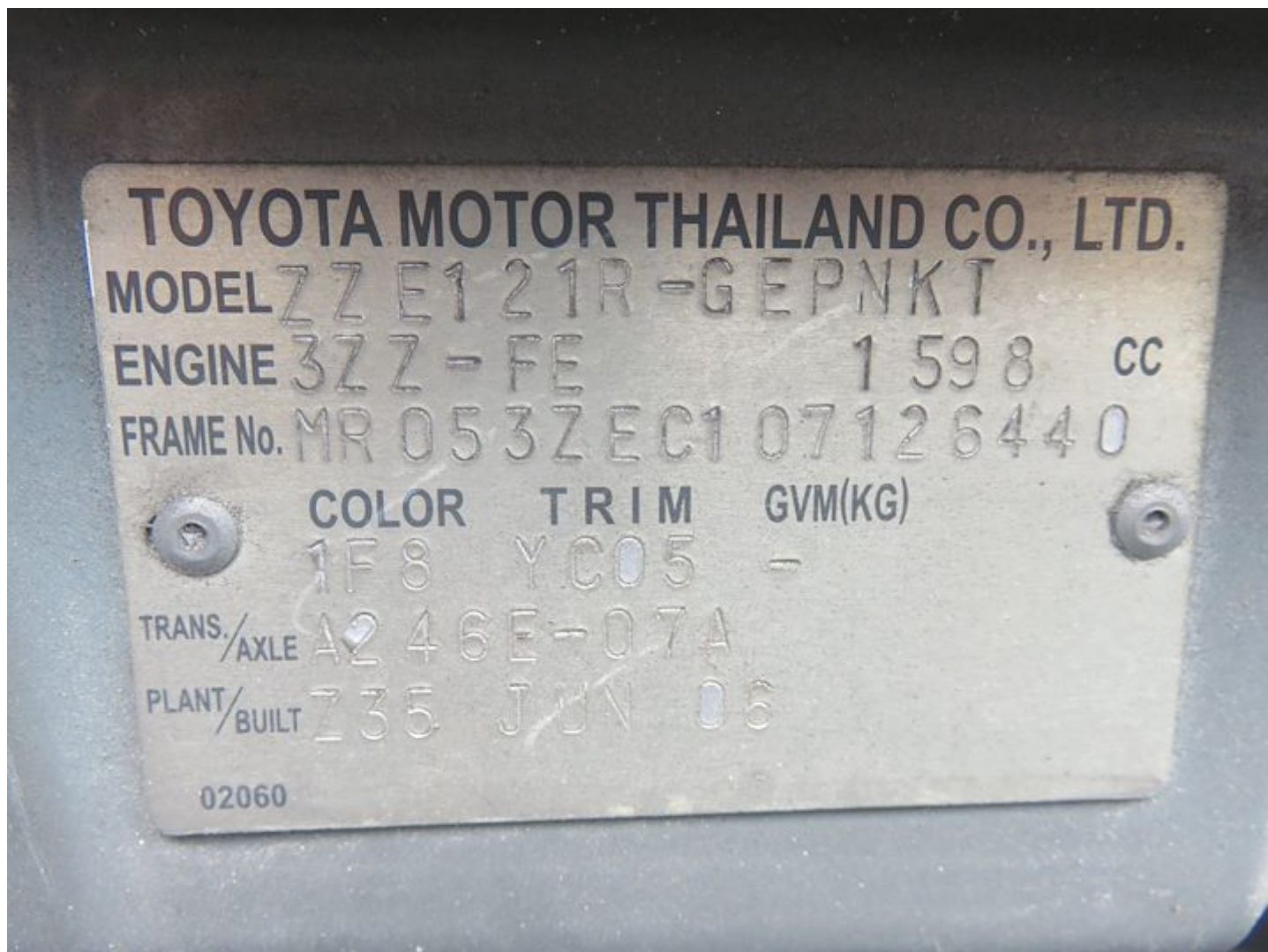














CERTIFICATE OF INSURANCE

PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

Name of Policyholder : In the estate of Tan Siew Khim
Period of Insurance : 15 Jul 2020 To 14 Jul 2021
Engine No. : 3ZZ4588106
Chassis No. : MR053ZEC107126440

Vehicle No. : SGJ5796T
Policy No. : 0100656314-14
Endorsement No. :
Issued Date : 15 Jun 2020

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2006
Insuring with COE/PAF : Yes

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.

Age Condition : All Age Condition

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.

* 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 Theft - \$0

Section 2
 Property Damage - \$0

Windscreen : NA

Named Driver and Excess (where applicable)

In the estate of Tan Siew Khim, Kee Yong Chye

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 can be carried out at the repairer of Your choice (unless specifically excluded by Us).
 For 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 or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: The Hongkong and Shanghai Banking Corporation 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).

0288000000
 SIT POH SANG STEVEN

3 TAMPINES GRANDE #04-01 AIA TAMPINES
 SINGAPORE 528799 SP-TANGIMCHEONG

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

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