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

- 9. Information provided mast by as distinct and second as positive 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 insurance Association of Singapore (GIA) for archiving the research of 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	11/06/2021 13:48 (SGT)
Date of Accident	10/06/2021 12:20 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE towards Yishun
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ3778L

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Chee Kian Kok
NRIC No	S1219513C
Email Address	vcheekk@hotmail.com
Mobile Phone No	(Phone) +65-93633183
Alternative Phone No.	+65 03633183

VEHICLE PARTICULARS

Manufacturar

Manufacturer	Honda
Model	Crossroad
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	1799

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	7210033916
Cover Note Number	-

DRIVER

Name of Driver	Tan Soh Hoon @ Chen Xin
NRIC No	S1335726I

Date Of Birth 05/03/1958 Occupation Indoor Date Of Driving Pass 22/09/1978 Driving experience 42 YEARS AND 9 MONTHS Gender Female Mobile Number (Phone) +65-96913133 Alt. Phone Number Email Address oabre@hotmail.com Address Blk 17 Seletar Road #04-16 Address complement Postcode 807019 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Other Does Driver Own Other Vehicles? Nο 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 Chain Collision 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? 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? No PASSENGER 1 Name Arlene 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 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 SCV5225J

Mercedes

Private car

Vehicle Model

Vehicle Colour

Vehicle Manufacturer

Vehicle Variant

Vehicle Category

Name of Driver NRIC No	Phua Leng Leng S7020468A
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBF1258L
Vehicle Manufacturer	Nissan
Vehicle Model	Cabstar
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

- Please report <u>correctly</u> 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 6. 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 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)

Lunderstand, 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 & Driver's Signature (If driver is not the policyholder) / Date
Time /000 am /1/06/21 & Time 11/06/21 | 10 coa.m. | Witnessed by Reporting Centre
Personnel Jenny Lim

A = 5JQ 3778L B: SCV 5225 J C: GBF 1258L

Describe Circumstances of the Accident

DATE: 10.06.21
71ME: 1220 p.m.
LOCATION: CTE TOWARDS YISHUN BEFORE A.MIL AVE 3 EXIT.
DESCRIPTION OF ACCIDENT INVOLVING VEHICLE STA 3778L
I WAS DRIVING ON THE CIE YOWARDS EXIT AMK AVE 3,
1.1101 714 Can 11 50 17 05 110 8201 50 Property
WHEN THE CAR IN FRONT OF ME BRAKED SUDDENLY.
T
I IMMEDIATELY BAAKED AND TRIED TO STOP.
11 - 07 11 7 - 2 - 0 - 0 - 0 - 0 - 0 - 0
UNFORTUNATELY, I DID NOT STOP IN TIME TO AVOID A COLLISION.
THE CAR IN FRONT OF ME HAS REGISTRATION SCV 5225T
me
THE DRIVER NAME IS PHUA LENG LENG , DRIVER LICENCE
570 204 68 A. ACCORDINGLY, I WAS INFORMED BY SAID DRIVER
SITE HAD TO BRAKE SUDDENLY DUE TO LORRY IN FRONT OF HER
BRAKING SUDDENLY. Said LORRY HAS REGN GBF 1258L
LT. V

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date
Time 11/64/21 1000 q.m.

Driver's Signature (If driver is not the policyholder) / Date
& Time 11/66/21 1000 q.m.

Witnessed by Reporting Centre Personnel Jenny Lim



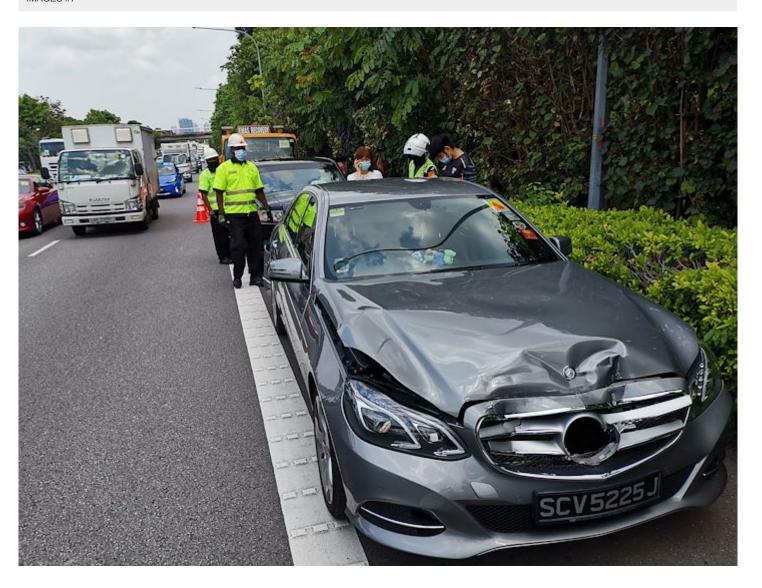
















CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : CHEE KIAN KOK Vehicle No. : SJQ3778L Period of Insurance : 17 Apr 2021 To 16 Apr 2022 : 7210033916 Policy No. : R18A3011687 Endorsement No. Engine No.

Chassis No. : RT11008620 Issued Date : 01 Apr 2021

ABOUT THE COVER

Make/Model : HONDA CROSSROAD

Engine Capacity/Tonnage : 1,799.00 CC Sum Insured : Market Value First Year of Registration : 2009 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

a) The Policyholder

a) the reacytologic 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.

: All Age Condition 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 turion, driving test, racing, pace-making, reliability trial or speed-lessing, 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, 1967 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

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

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

CHEE KIAN KOK, TAN SOH HOON, CHEE YI KEI AMANDA, CHEE YI CHENG SANDRA

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

Approved Reporting Centres/A/G 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 Centrest/A/G Authorised Repairers, please contact our 24-hour accident emergency hotine at +55 6338 6200. Alternatively, You may refer to A/G website www.aig.sg or A/G SG Mobile App. Simply search and download "A/G SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

In the 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).

0503982010

KHC HOLDINGS PTE, LTD.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

389A BALESTIER ROAD SINGAPORE 329796

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Cha Ying Lim

78 Shenton Way #09-16 AIG Building S079120 | T:+65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte, Ltd.

