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.

 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 24/06/2021 15:42 (SGT) Date of Accident 23/06/2021 19:15 (SGT) Exact Location of Accident Near 132a Changi Rd, Singapore 419719 Additional Location Information Slip Road To Turn Right To Everitt Rd N Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJN1551C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner TEO WEI EN EUGENE, (ZHANG WEIEN EUGENE) NRIC No. S8109058J Email Address eugene.teo55@gmail.com Mobile Phone No (Phone) +65-96831215 Alternative Phone No +65-96831215

VEHICLE PARTICULARS

Manufacturer Kia Model Stinger 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 2000

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 1900083590-01 Cover Note Number

DRIVER

Name of Driver TEO WEI EN EUGENE, (ZHANG WEIEN EUGENE) NRIC No. S8109058J

Date Of Birth 19/03/1981 Occupation Indoor Date Of Driving Pass 31/01/2000 Driving experience 21 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-96831215 Alt. Phone Number +65-96831215 Email Address eugene.teo55@gmail.com Address 55 JALAN SINAR BULAN Address complement **SINGAPORE** Postcode 507059 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 - 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 Was anybody injured in the Accident? 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 PASSENGER 1 Name KANCHALEE CHAMSUWAN 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 I WAS DRIVING IN A SLIP ROAD TO TURN RIGHT TO EVERITT ROAD NORTH.THERE WAS A CAR PARKED ILLEGALLY ON THE SIDE WHICH MADE MY TURN RATHER DIFFICULT.MY CAR WAS HAD TO BE POSITIONED SLANTED AT THE STOP LINE WHERE BLIND SPORT TO MAIN ROAD WAS BLOCKED. INCHING FORWARD AND SBS BUS 7 HIT MY RIGHT SIDE OF THE CAR. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SBS3850U

Volvo

Vehicle Model

Vehicle Manufacturer

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	MA HONGYUN
Passport No/FIN	G88571719M
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

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- This Formmust 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.
- 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)

2.37pm

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 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' 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 &

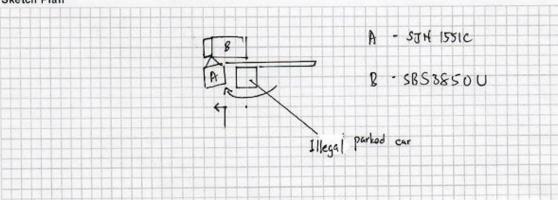
yholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

M.CO A

SERVICE

Sketch Plan

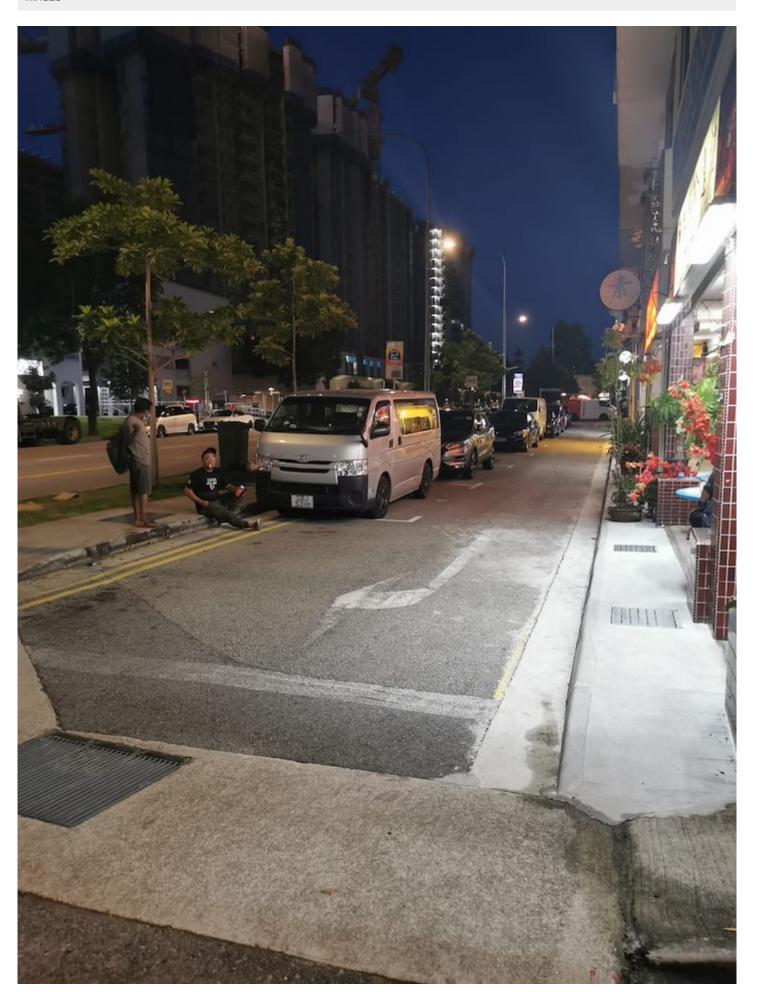


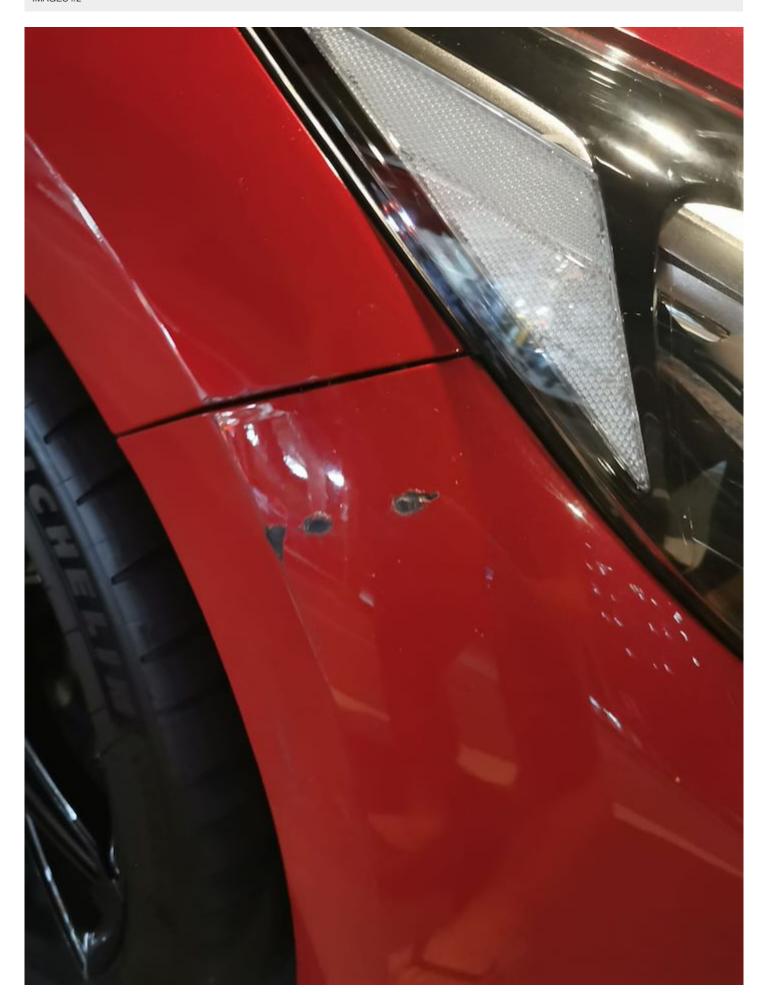
escribe Circumstances of the Accident	
road north. There was a car par	1.1
I was driving in a slip road to tur	n right to everity
Cida libral nere was a car par	rked illegally on the
side which made my turn rath	er difficult.
Sto line where his sont t	Slanted at the
berved a OCIA Assured God SDS	main road was Bus 7 & hH my
crubat side of the cons	BUS 7 & hH my
road north. There was a car par side which made my turn rath my car had to be be positioned Stip line where blind spot to blocked. Inching forward and sibs right side of the car.	
The state of the s	
eclaration	
Ve declare the foregoing particulars are true in every respect.	SECULCO MOTOR
1 22200	SERVICE
/ / Loryne	
227pm 24/6/21	- WO TO S

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

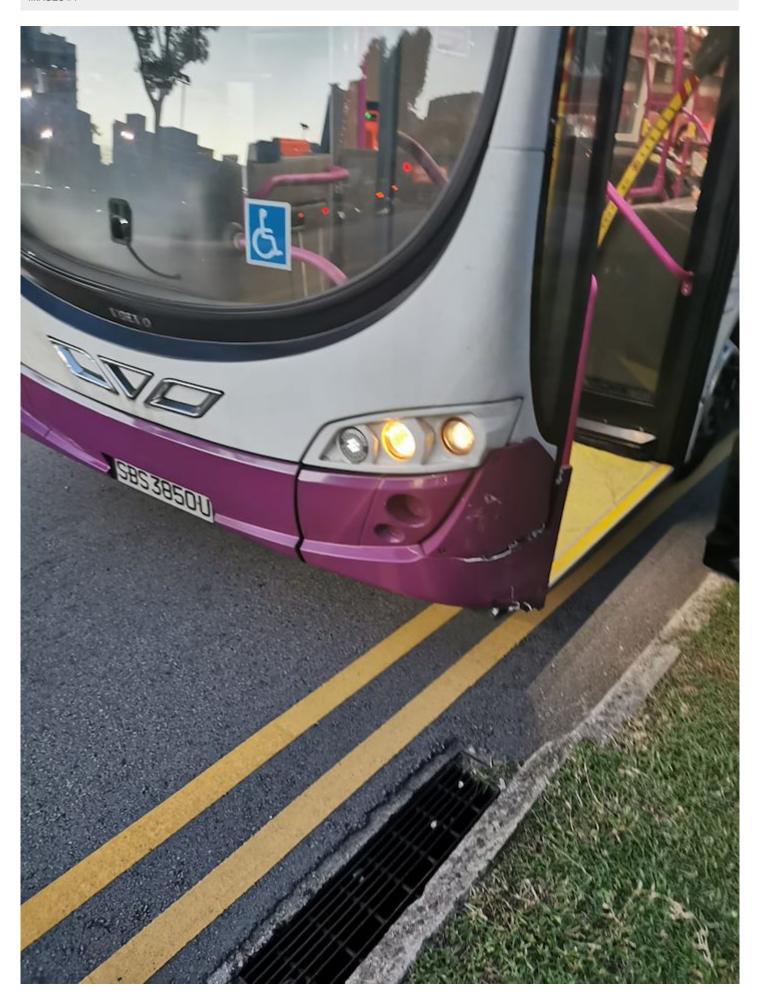
Policyholder's Signature / Date & Time

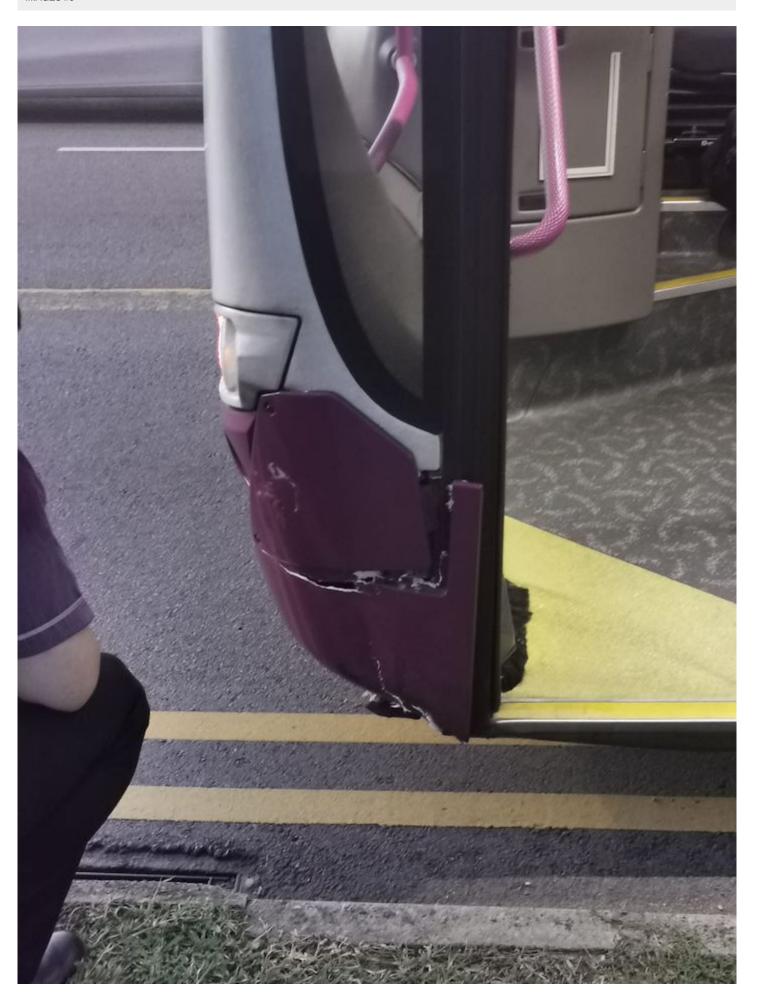
Witnessed by Reporting Centre Personnel

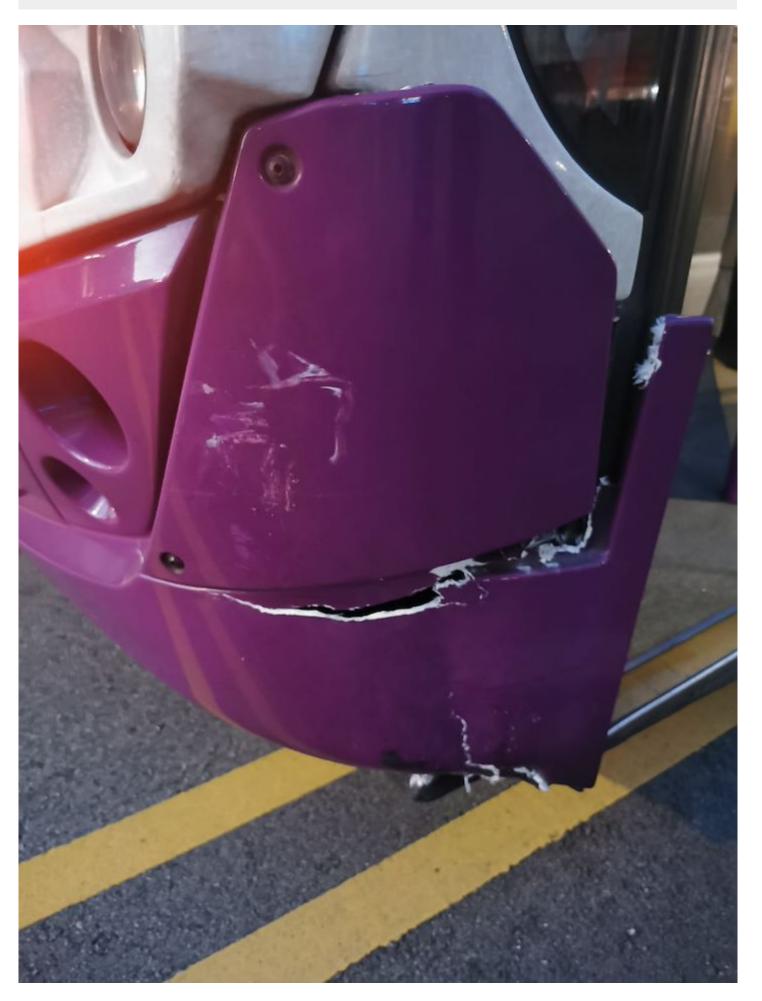


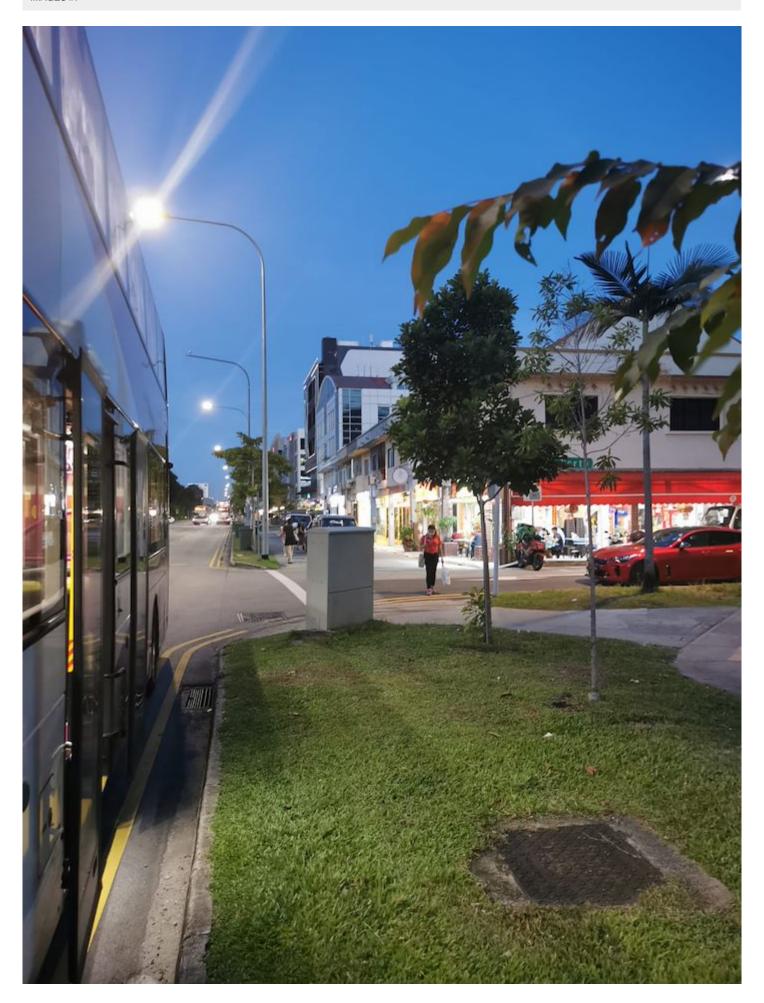












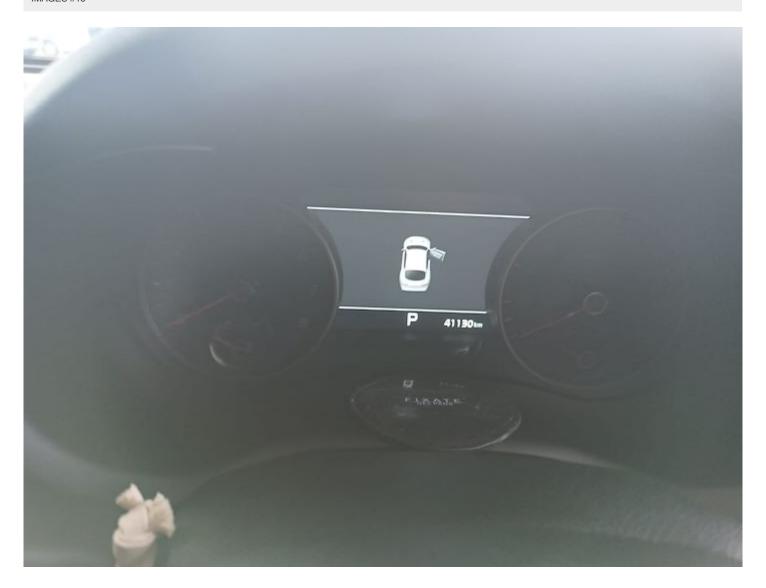
















CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: TEO WEI EN EUGENE (ZHANG WEIEN EUGENE)

Period of Insurance : 23 Apr 2021 To 22 Apr 2022

Engine No. Chassis No.

: KNAE351AMK6062612

: G4KLKH021157

Vehicle No.

: SJN1551C

Policy No.

: 1900083590-01

Endorsement No.

Issued Date

: 26 Mar 2021

ABOUT THE COVER

Make/Model

: KIA Stinger 2.0

Engine Capacity/Tonnage : 1,998.00 CC

: NA

Sum Insured : Market Value

First Year of Registration : 2019

Driver Restriction

Person or Classes of Persons Entitled to Drive*:

Off Peak Car : No

Insuring with COE/PARF : Yes

a) The Policyholder b) Any other parson 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

* 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 - \$800 Theft - \$0 Flood Cover - \$600

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

TEO WEI EN EUGENE (ZHANG WEIEN EUGENE) - \$600 (Own Damage), \$600 (Flood Cover)

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

Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 86684501
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408850 67451000
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 576733 69328000

For other Approved Reporting Centres/A/G Authorised Repairers, please contact our 24-hour ac A/G SG Mobile App. Simply search and download "A/G SG" from ITunes or Google Play. st emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.eig.sg or

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

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, 1887 (Malaysia), Road Transport (Amendment) Act 2018 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504622245

CYCLE & CARRIAGE-JEDO

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPMLU