SC1K218K0003 / ComfortDelGro Engineering Pte Ltd [579701] ENTRY DATE & TIME: 20/08/2021 15:12 (SGT) SUBMITTED BY: Rohani VERSION: 1 (20/08/2021 15:12 (SGT))

# **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.

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   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 20/08/2021 15:12 (SGT) Date of Accident 30/07/2021 13:35 (SGT) Exact Location of Accident 7 Pei Wah Ave, Singapore 597610 Additional Location Information SCHOOL CARPARK BACK GATE Country/State of Loss Singapore

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

Vehicle Registration Number SI D6122D

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SHEN YONGFENG NRIC No. S7369191E Email Address shuyan1208@gmail.com Mobile Phone No (Phone) +65-88662737 Alternative Phone No +65-94520586

#### VEHICLE PARTICULARS

Manufacturer

LandRover Model Discovery Variant SPORT S14 SE/HSE 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 1999

#### **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2100472286-05 Cover Note Number

#### DRIVER

Name of Driver ZHU CHIZHEN NRIC No. S7068761E

Date Of Birth 13/07/1970 Occupation Indoor Date Of Driving Pass 08/02/2013 Driving experience 8 YEARS AND 5 MONTHS Gender Female Mobile Number (Phone) +65-94580586 Alt. Phone Number Email Address shuyan1208@gmail.com Address 802 THOMSON ROAD #19-05 Address complement Postcode 298187 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Spouse 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 - Opening Door of Vehicle 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 vehicle 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 LIN XIA (86251778) Gender Female PASSENGER 2 Name XIA QIANG Gender Male 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 REFER TO STATEMENT AND SKETCH 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** 

SLS459T

Audi

# CACcident report SC1K218K0003

Vehicle Registration Number

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

#### IMPORTANT NOTICE

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- 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.
- 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 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.
- 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/ore 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 :
  - 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 malling 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")
- 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;
  - 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 of court orders.

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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a tiny de	t (SLS4597)	4 071 ATTE OF HEV. C	ars deeps
1			
	V. T. S.		
DECLARATION			
I/We declare the foregoing parti	culars are true in every respect.		A.A.
Policyholder's Signature	Driver's Signature	Reporting Centre Persystem	WY V
Date & Time:	(If driver is not the policyho Date & Time:	lder) Name: NRIC/FIN No.:	28 29 C TO C C C C C C C C C C C C C C C C C

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授权部.

本人計算以 (Shen Yong Teng · 573691916) 模板 製力な 大京 (2hu chi2hen · 570687614) か改

事場 (5LD6122D. Policy M. 21004)2286-05)

沁散紫茅道.

Shen Yong Teng Kir R.A.:

# CERTIFICATE OF INSURANCE

#### MEARNES AUTO PROTECTOR (LAND ROVER) PRIVATE VEHICLE

Name of Policyholder : SHEN YONGFENG

: SLD6122D

Period of Insurance

: 23 Jun 2021 To 22 Jun 2022

: 2100472286-05 Policy No.

Engine No.

: 015052215322204PT

Endorsement No.

Chassis No.

: SALCA2AG7GH613769

: 25 May 2021 **Issued Date** 

## ABOUT THE COVER

: LANDROVER DISCOVERY SPORT SI4 SE/HSE

First Year of Registration : 2016

Engine Capacity/Tonnage : 1,999.00 CC Driver Restriction

: NA

Off Peak Car : No

Sum Insured : Market Value

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

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.

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

: 40 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 hits or roward, driving fulfion, driving fest, racing, pace-making, reliability frial 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.

Less of Use 2000cc

\* Limitations rendered inoperative by Soction 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

Fire - \$0 Own Damage - \$900 Theft - \$0 Flood Cover - \$900

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

SHEN YONGFENG - \$900 (Own Damage), \$900 (Flood Cover)

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

1.Wearnes Automotive Pte Ltd. Add: 45 Leng Kee Road. Singapore 159103 63789333

For other. Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hattine at +65 6338 6200. Alternatively, you may refer to AIG website www.sig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from Tiunes or Google Play.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

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 3 the Road Transport Act, 1997 (Malaysia), Road Transport (Amendment) Act 2018 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503486641

WEARNES AUTOMOTIVE - CWC (JLR)

45 LENG KEE ROAD SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.



















