

1st September 2021

AIG Asia Pacific Insurance Pte Ltd

Attn: Motor Claim Department

Dear Sir/Madam,

Road Traffic Accident Involving SBU 1001 G (Our Ref) and SME 1383 H (Your Ref) Dated 29th August 2021, Time 1110HRS
@ Exit of Balmoral Plaza Towards To Bukit Timah Road

We represent our client; ZHANG XINGHUA, to notify you of the aforesaid road traffic accident involving our client's vehicle registration number: SBU 1001 G and your insured's vehicle registration number: SME 1383 H.

Enclosed herewith a copy of the Singapore Accident Statement filed for your reference.

We hereby give you **NOTICE** that we are claiming against **SME 1383** H for damages, costs and disbursements as a result of the aforesaid road traffic accident.

Please let us know within 2 working days from today, your insured's and your intention to conduct a pre-repair survey on our client's vehicle, along with your list of at least ten (10) motor surveyors.

If we do not receive any reply from you within the stipulated timeline, we shall proceed to appoint our own surveyor and proceed with the necessary repair for our client's vehicle without further reference to your insured or you.

Contact Person	Eric Lee 8269 9999 teamautopl@gmail.com			
Email Address				
Survey Address	160 Sin Ming Dr, #01-14 Sin Ming AutoCity Singapore 575722			

Kindly cc a copy of this letter to your insured for his/her acknowledgement.



SN08218V0001 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 31/08/2021 10:46 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (31/08/2021 10:46 (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.

- 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 31/08/2021 10:46 (SGT) Date of Accident 29/08/2021 11:10 (SGT) **Exact Location of Accident** Balmoral Plaza, Singapore Additional Location Information EXIT TOWARDS BUKIT TIMAH ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SBU1001G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ZHANG XINGHUA NRIC No SXXXX183B **Email Address** xinghuazhang667@gmail.com Mobile Phone No (Phone) +65-96744003 Alternative Phone No +65-96744003

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 - Claiming third party Vehicle Category Private car

Transmission Auto CC 1598

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number 1900158762-01 Cover Note Number

DRIVER

Name of Driver ZHANG XINGHUA NRIC No SXXXX183B



Date Of Birth 25/10/1978 Occupation Indoor Date Of Driving Pass 15/10/2007 Driving experience 13 YEARS AND 10 MONTHS Gender Male Mobile Number (Phone) +65-96744003 Alt. Phone Number +65-96744003 **Email Address** xinghuazhang667@gmail.com Address BLK 667B JURONG WEST STREET 65 #10-157 Address complement Postcode 642667 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 - Head to Rear 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 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 DETAILS OF POLICE ACTION No

Was the accident reported to the police?

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?

Was there any video captured by Car Camera?

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

 Vehicle Registration Number
 SME1383H

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Private car

 Name of Driver
 TAN PENG CHIANG

 NRIC No
 SXXXX881G

 Contact Number
 (Phone) +65-96541629

 Address

Postcode - nsurance Company Name - Nature Of Damage - Details of property damaged in accident - No. Of Passenger (Including Driver) - No.	Address complement	-
nsurance Company Name Nature Of Damage Details of property damaged in accident	Postcode	-
Details of property damaged in accident		-
	Nature Of Damage	-
No. Of Passenger (Including Driver)	Details of property damaged in accident	-
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SKETCH PLAN

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- 8 Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, soree 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 "Persional Information") and disclose and transfer such Persional 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 analor dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims

(*) investigating the accident and/or my claims

(iii) carrying out and/or dealing with my instructions or responding to any enguries 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 wiell 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

Zhang

Zhang

Witnessed by Reports

Policyholder's Signature / Date &

Sketch Plan

Driver's Signature (# driver is not the policyholder) / Date

BALMORAN MAZA TOWARDS TO BI TIMALY RO + + + + SBU 1001 9

+ Veh B SME 1383 H

Describe Circumstances of the Accident					
in 21/108/2 (at menu & 1/10 hrs) mig vol. (A) not statut bry at the					
esi of Falmort flater towards butt timet Frest . Suldaily which & relieux					
or 4 the real of a producte					
MEDICOLOGISTO SERVICIONE PROTECTION DE SERVICION DE SERVI					

Declaration

Whe declare the foregoing particulars are true in every respect

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Policyholder's Signature / Date & Time

Zhang

Diver's Signature (# driver is not the policyholder) / Date & Time

Witnessed by Reporting Cent Personnel

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

31 Aug 2021 / 09:59:29

Receipt Date/Time: 31 Aug 2021 / 09:59:29

Tax Invoice/Receipt

Receipt No.: ITNET-00000-210831-000731

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SME1383H As at 29 Aug 2021/11:10:00 Insurance Co: AIG ASIA PACIFIC INSURAN	ICE PTE. LTD.			
1 Insurance Enquiry - SME1383H		7.00	0.40	7.40
Enquiry Fee 20210831095658271365		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	426569XXXXXX8100	eNETS	Credit Card	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.