

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	12/10/2021 16:57 (SGT)
Date of Accident	11/10/2021 18:35 (SGT)
Exact Location of Accident	Mandai Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG6229C
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIAN YIHE
NRIC No	SXXXX332F
Email Address	yihe84@hotmail.com
Mobile Phone No	(Phone) +65-97588655
Alternative Phone No	+65-97588655

VEHICLE PARTICULARS

Manufacturer	Citroen
Model	C4
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	1199

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800155291-01
Cover Note Number	-

DRIVER

Name of Driver	LIAN YIHE
NRIC No	SXXXX332F

Date Of Birth	08/12/1984
Occupation	Indoor
Date Of Driving Pass	25/07/2011
Driving experience	10 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97588655
Alt. Phone Number	+65-97588655
Email Address	yihe84@hotmail.com
Address	BLK 260B ANG MO KIO STREET 21 #4-153
Address complement	-
Postcode	562260
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT L/20211011/7085

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	SJR7366K
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIAN YIHE
Gender	Male
Phone No	(Phone) +65-97588655
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMG6229C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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. 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.
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.

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' 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' 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.

Policyholder's Signature / Date & Time

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

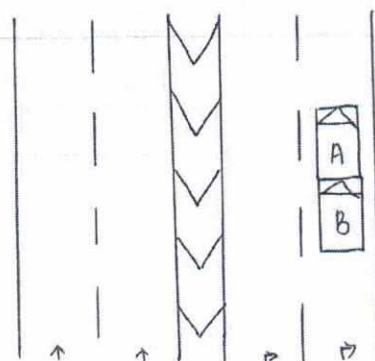
12/10/2021

Witnessed by Reporting Centre Personnel

Sketch Plan


Mandai Road before Woodlands Road Junction

Vehicle A: SMG 6229C
Vehicle B: SJR 7366K



Refer to Police Report No: L/2021/01/7085

We declare the foregoing particulars are true in every respect.


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

Witnessed by Reporting Centre Personnel

Date of Accident

11/10/2021 Accident Time: 1835hrs (24-HR-FORMAT)

Accident Place

mandai Road before Woodland Rd Junction

Vehicle Reg. No (Car plate No.)

SM6629C Vehicle Make/Model: Citroen C4

Insurance Company

AGN Policy No. 1800155291-01

Name of Registered Owner

Company / Individual Lian Yi He

ID of Registered Owner

Co Reg No: - Owner's NRIC No: S8440332F

Co Contact No: - Owner's Contact No: 97588655

DRIVER'S Name

Lian Yi He DRIVER'S NRIC No: S8440332F

DRIVER'S Date of Birth

08 Dec 1984 DRIVER'S License Pass Date 25 Jul 2011

Relationship bet. Owner & Driver

Spouse / Parents / Children / Sibling / Employee / Others: owner

DRIVER'S Address

APT. Bk 260B, Ang Mo Kio Street 21, #104-153, Singapore 562260

DRIVER'S Contact No / Alt. No.

1) 97588655 2) -

DRIVER'S Occupation

INDOOR / OUTDOOR (eg. working inside or outside of an office)

Email Address

lyhe84@hotmail.com

Weather & Road Surface

CLEAR & DRY / RAINING & WET / AFTER RAIN & WET

Reporting Type

Reporting Only / Claim Other Party / Claim Own Insurance

Number of Passengers (including Driver): 01

Passenger Name: Gender: M/F

Was the accident reported to the police? YES / NO

Passenger Name: Gender: M/F

Was there any video captured by car camera: YES / NO Any Injuries: YES / NO Injured Name: Lian Yi He

Injured Name:

Exact purpose for which vehicle was being used at the time of accident: Private use / Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: SJR7366K

Vehicle Reg No:

Vehicle Make/Model:

Vehicle Make/Model:

Name DRIVER:

Name DRIVER:

ID No. DRIVER:

ID No. DRIVER:

DRIVER'S Contact & add:

DRIVER'S Contact & add:

Other Party Driver's Particulars (if any)

Vehicle Reg No:

Vehicle Reg No:

Vehicle Make/Model:

Vehicle Make/Model:

Name DRIVER:

Name DRIVER:

ID No. DRIVER:

ID No. DRIVER:

DRIVER'S Contact & add:

DRIVER'S Contact & add:



**SINGAPORE
POLICE FORCE**



L/20211011/7085

1 of 2

POLICE REPORT (NP299)

Report No. L/20211011/7085

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 11/10/2021 23:08	Vide Report No.	Station Diary No.
Name Of Informant LIAN YIHE	Address 260B ANG MO KIO STREET 21 #04-153 SINGAPORE 562260	
ID Type / ID No. NRIC NO / S8440332F	Contact No. Home/Office: Mobile: 97588655	
Nationality SINGAPORE CITIZEN	Email Address YIHE84@HOTMAIL.COM	
Occupation Manager	Sex Male	Age 36
Institution/School Name	Date of Birth 08/12/1984	Race Chinese
Date/Time Of Incident 11/10/2021 18:35	Location Of Incident WOODLANDS ROAD	

Brief details.

On the stated date and time, I was driving my vehicle SMG6229C along Woodlands road when I had come to a stop at the traffic light junction of Woodlands Road and Mandai road.

While waiting for traffic light to turn green, I felt a massive impact from the rear causing my body to lunge forward. I had blacked out for a brief moment due to the sudden shock from the unexpected impact.

I alighted to realise that SJR7366K had crashed into the rear of my vehicle.

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:
The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
11/10/2021 23:08

Classification Of Case:



**SINGAPORE
POLICE FORCE**



L/20211011/7085

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20211011/7085

Shortly after the accident, I started experiencing pain over my neck area. As such, I proceeded to my family doctor at Esteemed Medical Clinic for treatment after reaching home.

I was given 3 days MC.

Later the same evening, I also started experiencing soreness and aches over my lower back area.

I will be following up at my family doctor for further treatment.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:

11/10/2021 23:08

Classification Of Case:



CERTIFICATE OF INSURANCE

CITROEN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : LIAN YIHE
Period of Insurance : 27 Dec 2020 To 26 Dec 2021
Engine No. : 10XVA10925668
Chassis No. : VF70PHNZWJE503296

Vehicle No. : SMG6229C
Policy No. : 1800155291-01
Endorsement No. :
Issued Date : 26 Nov 2020

ABOUT THE COVER

Make/Model : CITROEN C4 CACTUS 1.2L
Engine Capacity/Tonnage : 1,199.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PAF : 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 : 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, pece-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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

LIAN YIHE - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708600

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 8200. 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: MayBank

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).

0504621203

C&CCICP2 - CHANTE

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.

SSPCUE