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 14/10/2021 16:07 (SGT) Date of Accident 14/10/2021 09:25 (SGT) Exact Location of Accident Bedok North Rd, Singapore Additional Location Information TWDS BARTLEY ROAD EAST Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFB9292H

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NG SIEW KIONG NRIC No. S1337165B

Email Address sunharpwing@gmail.com Mobile Phone No (Phone) +65-93811623

Alternative Phone No +65-93811623

VEHICLE PARTICULARS

Manufacturer Nissan Model Qashqai

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 1200

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.

Type of Coverage Comprehensive

Fleet Policy

Policy Number 2100484920-05

Cover Note Number

DRIVER

Name of Driver NG SIEW KIONG NRIC No. S1337165B

Date Of Birth 08/07/1958 Occupation Indoor Date Of Driving Pass 15/11/1976 Driving experience 44 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-93811623 Alt. Phone Number +65-93811623 Email Address sunharpwing@gmail.com Address BLK 770 BEDOK RESERVOIR VIEW #08-179 Address complement Postcode 470770 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 Was anybody injured in the Accident? 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** Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 14/10/2021 AT ABOUT 9.25AM, I WAS DRIVING ON LEFT MOST LANE ON BEDOK NORTH ROAD TO WORK. AS THERE WERE CONES ON THE ROAD, I SLOWED DOWN TO SWITCH LANE. SUDDENLY, I FELT A HUGE IMPACT ON THE REAR LEFT PORTION OF MY VEHICLE. VEHICLE B HAD COLLIDED ONTO MY VEHICLE. WE EXCHANGE OUR PHONE NUMBER AND LEFT THE SCENE. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1**

 Vehicle Registration Number
 FBB5323B

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Motorcycle

 Name of Driver

 Contact Number
 (Phone) +65-9

(Phone) +65-93756977

Address	-
Address complement	_
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
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,
- 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
- 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
- 7. 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/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 transfersuch 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 "(nsurers"), the insurers' lawyers/law irms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - (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, involces, 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
- 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
- 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.
- 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:
 - (i) 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 or 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.:

supplemental suppl Yi Heng Motor Workshop via email: yihengmotorworkshop@yahoo.com.sg

Signature : _

SKETCH PLAN	BEDOK MORTH ROAD
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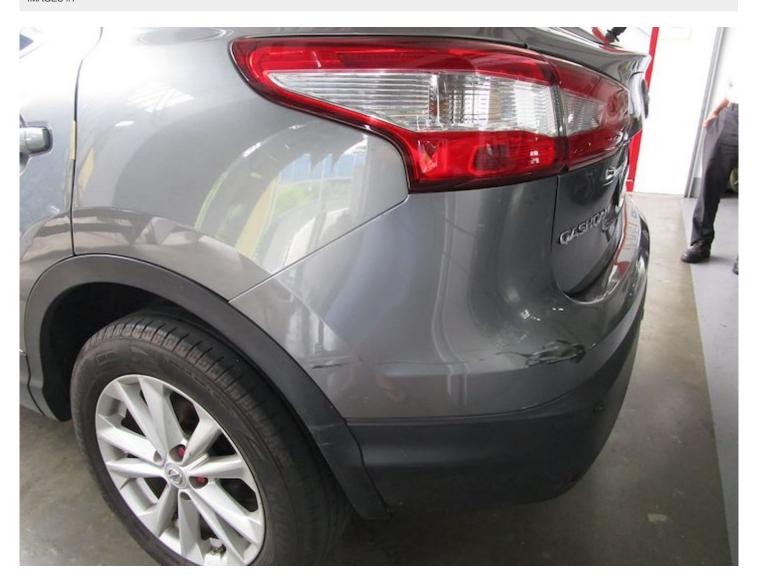




















CERTIFICATE OF INSURANCE

: SFB9292H

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ng Siew Kiong

Period of Insurance : 30 Sep 2021 To 29 Sep 2022 Policy No. : 2100484920-05

: HRA2298686A Endorsement No. Engine No.

Chassis No. : SJNFEAJ11U1705432 Issued Date : 16 Sep 2021

ABOUT THE COVER : NISSAN QASHQAI 1.2 DIG-TURBO

Engine Capacity/Tonnage : 1,197.00 CC First Year of Registration : 2016 Sum Insured : Market Value Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : No

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 "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.

Age Condition : All Age Condition Mileage Condition

Vehicle No.

: 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 trition, 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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Ng Siew Klong - \$600 (Own Damage), \$600 (Flood Cover)

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

- 1.TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
- 2.TC AutoClinic Add: No.1, Sixth Lox Yang Road Singapore 628099 62622212 3.AutoLution Inclustrial Add: 19 Util Road 4 Singapore 408529 6490986 4.Tan Chong Motor Sales Add: 919 Bulk Timah Road Singapore 688629 64694091 64694092 64694093 5.Tan Chong Motor Sales Add: 17 Lorong 6 Toa Payah Singapore 318254 63570753 63570754

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Geogle 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 the Road Transport Act, 1987 (Melaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500610525

TAN CHONG CREDIT PTE LTD - NCP

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SINGAPORE 589623 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

78 Sherron Way #69-16 AIG 6U day 5075120 | T +65 8419 3000 | www.hig.se