

NATIONAL Assessment Centre Supplies, 10/11/2001

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	03/11/2021 15:30 (SGT)
Date of Accident	02/11/2021 17:07 (SGT)
Exact Location of Accident	Moulmein Rd, Singapore
Additional Location Information	TOWARDS THOMSON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF5298P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	PATRICK HO YUEN PENG (HE YUANPING)
NRIC No	SXXXX040H
Email Address	paulinem.lim@gmail.com
Mobile Phone No	(Phone) +65-96925325
Alternative Phone No	+65-93628425

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800136669-03
Cover Note Number	-

DRIVER

Name of Driver	PAULINE MARIE LIM AI HSIA
NRIC No	SXXXX796J

* Date Of Birth	25/04/1978
Occupation	Indoor
* Date Of Driving Pass	24/02/2003
Driving experience	18 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-93628425
Alt. Phone Number	-
Email Address	paulinem.lim@gmail.com
Address	2A DERBYSHIRE ROAD #12-02
Address complement	-
Postcode	309470
Is the driver the policyholder?	No
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 - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

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?	No
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?	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	GBG8684M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	PAULINE MARIE LIM AI HSIA
Gender	Female
Phone No	(Phone) +65-93628425
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMF5298P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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' law firms/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 firms/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 firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

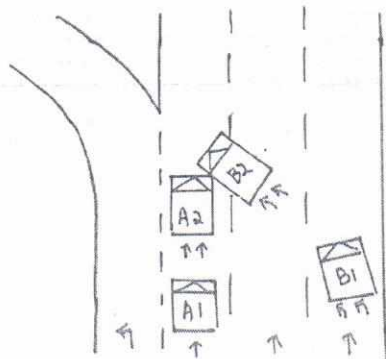
Policyholder's Signature / Date & Time

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

03/11/2021
Witnessed by Reporting Centre Personnel

Sketch Plan

Mokhlmein Road towards Thomson Road



vehicle A - SMF5298P

vehicle B - GBG8684M

Describe Circumstances of the Accident

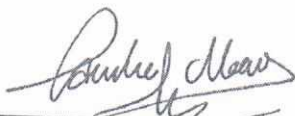
On the stated date and time, I, vehicle A (SMF5298P) was travelling straight along at the stated location on lane 3. Out of sudden, vehicle B (GBG8684M) cut into my lane to filter to the exit of CTE (SLE/TPE) from Lane 1 and collided onto the front right portion of my vehicle causing damages.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



03/11/2021

Witnessed by Reporting Centre Personnel

Date of Accident: 02/11/21 Accident Time: 1707H (24-HR-FORMAT)
Accident Place: Moulmein Road towards Thomson Road
Vehicle Reg. No (Car plate No.): SMF5298P Vehicle Make/Model: Mitsubishi Outlander
Insurance Company: AIG Policy No. 1800136669-03
Name of Registered Owner: Company Individual PATRICK HO YUEN PENG
ID of Registered Owner: _____ Co Reg No: _____ Owner's NRIC No: S7697040H
Co Contact No: _____ Owner's Contact No: 96925325
DRIVER'S Name: PAULINE MARIE LIM DRIVER'S NRIC No: S7810796J
DRIVER'S Date of Birth: AI HSIA
Relationship bet. Owner & Driver: 25/04/1978 DRIVER'S License Pass Date 24/02/2003
DRIVER'S Address: (Spouse) Parents (Children) Sibling (Employee) Others:
DRIVER'S Contact No./Alt No.: 2A Derbyshire Road #12-02 S(309470)
DRIVER'S Occupation: 1) 93628425 2) _____
Email Address: INDOOR OUTDOOR (eg. working inside or outside of an ofc)
Weather & Road Surface: paulinem.lim@gmail.com
Reporting Type: CLEAR & DRY (RAINING & WET) AFTER RAIN & WET
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: Pauline marie Lim
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: <u>GBG8684M</u>	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC 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: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____



CERTIFICATE OF INSURANCE

CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : PATRICK HO YUEN PENG (HE YUANPING)
 Period of Insurance : 15 Nov 2021 To 14 Nov 2022
 Engine No. : 4J11AA8681
 Chassis No. : GF7W0600351

Vehicle No. : SMF5298P
 Policy No. : 1800136669-03
 Endorsement No. :
 Issued Date : 12 Oct 2021

ABOUT THE COVER

Make/Model : MITSUBISHI Outlander 2.0 Elegance/Sports
 Engine Capacity/Tonnage : 1,998.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2018
 Insuring with COE/PARE : 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 authorized driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$1,000 as "Young and/or Inexperienced Driver Excess" ("YIDRE") if You are or Your Authorized Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition
 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.

Mileage Condition : Unlimited Mileage

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 5 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 - \$1000, Theft - \$0, Flood Cover - \$1000

Section 2
 Property Damage - \$0

Windscreen - \$100

Named Driver and Excess (where applicable)

PATRICK HO YUEN PENG (HE YUANPING) - \$1000 (Own Damage), \$1000 (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: 330 Ubi Rd 3 Singapore 408660 67401000
3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only), Add: 20 Leng Kee Rd Singapore 150094 64708568
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only), Add: 600 Sin Ming Ave Singapore 575733 66328000

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline 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 Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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).

AIG Asia Pacific Insurance Pte. Ltd.
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0500720721

CYCLE & CARRIAGE - LO (MIT)

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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