# **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.

- 4. The issue and acceptance of this is form by instrained 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 09/11/2021 15:00 (SGT) Date of Accident 09/11/2021 08:08 (SGT) Exact Location of Accident Singapore Additional Location Information BRADDEL ROAD HEADING BISHAN FLYOVER Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMM9127L

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SEE CHENG HWEE EDMUND NRIC No. S7039064G Email Address EDMUNDSEE70@GMAIL.COM Mobile Phone No (Phone) +65-93870714 Alternative Phone No (Home) +65-93870714

## VEHICLE PARTICULARS

Manufacturer Toyota Model Corolla Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Private car Transmission Auto CC 1600

## **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 1900122183-01 Cover Note Number

## DRIVER

Name of Driver SEE CHENG HWEE EDMUND NRIC No. S7039064G



Date Of Birth 03/11/1970 Occupation Indoor Date Of Driving Pass 11/02/1991 Driving experience 30 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-93870714 Alt. Phone Number (Home) +65-93870714 Email Address EDMUNDSEE70@GMAIL.COM Address BLK 937 HOUGANG ST 92 #12-73 Address complement Postcode 530937 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 PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGW2911D Vehicle Manufacturer **BMW** Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver SHANGUAN WEIFENG NRIC No S9104913I Contact Number (Phone) +65-91727123 BLK 7 UPPER ALJUNIED LANE #09-71

Address complement	-
Postcode	360007
Insurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

## SKETCH PLAN

## IMPORTANT NOTICE

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- 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.
- Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GA 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' 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 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 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.

Policyholder's Signature / Date &

1025

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Bradde I Road.

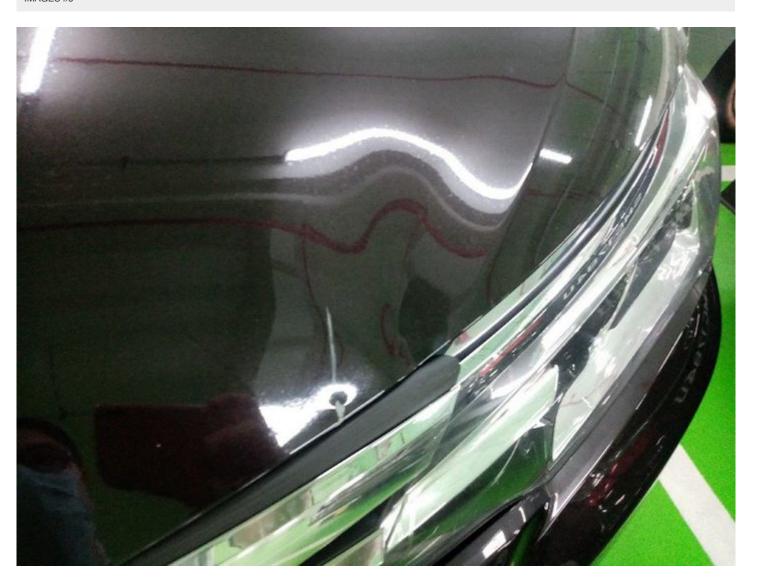
Describe Circumstances of the Accident I was on my way to work at 2 dunder road. I traverip
bradefer road heading to bishon flyover as the weather was clear
and vehicle flow was smooth. Suddenly the front BMW (56W29110)
brake and more and brake again. I was compable to brake in time.
I hit S6W2911D back. Declaration IWe declare the foregoing particulars are true in every respect. Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre

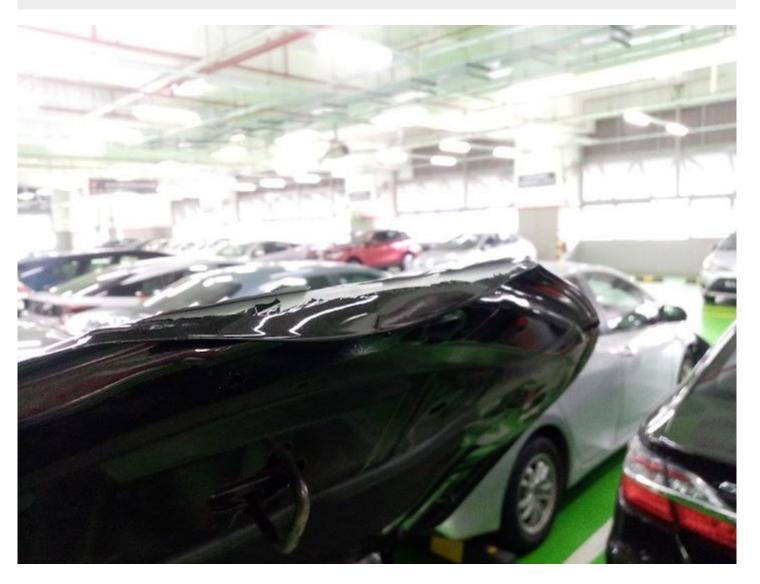




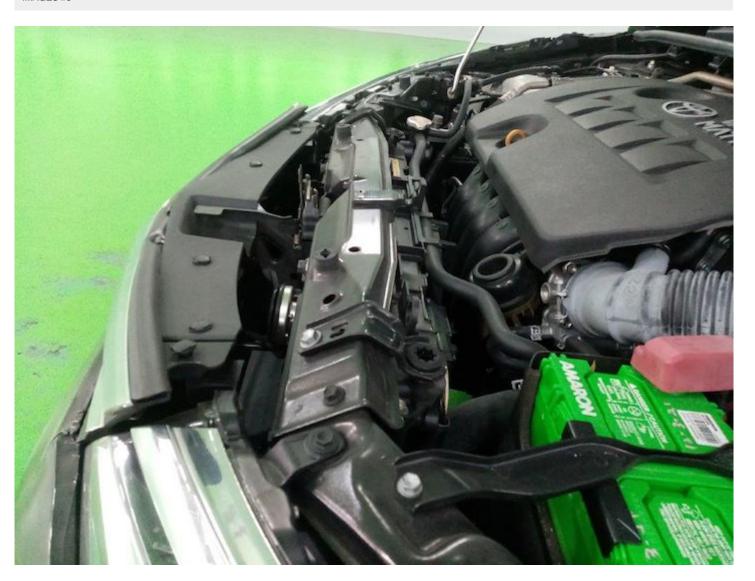






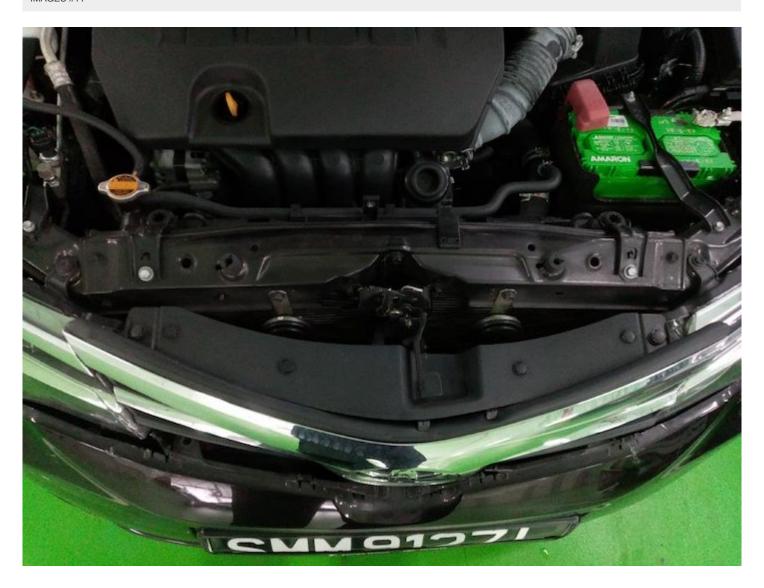


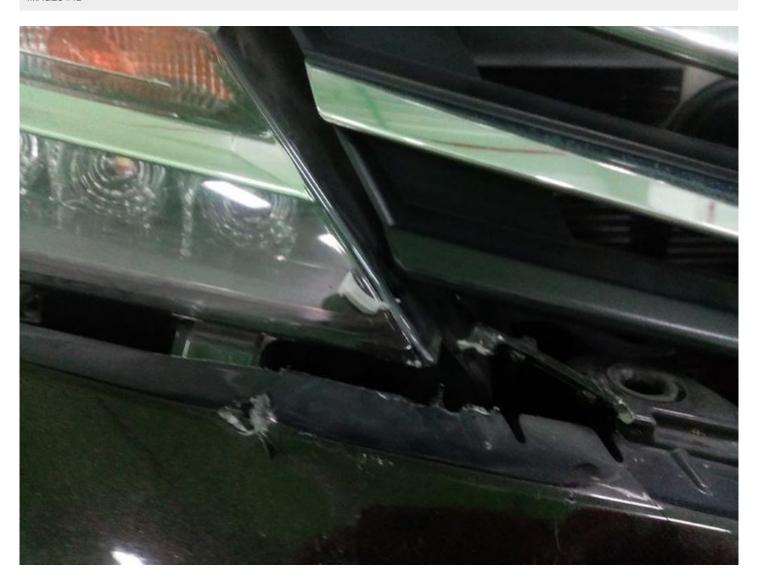








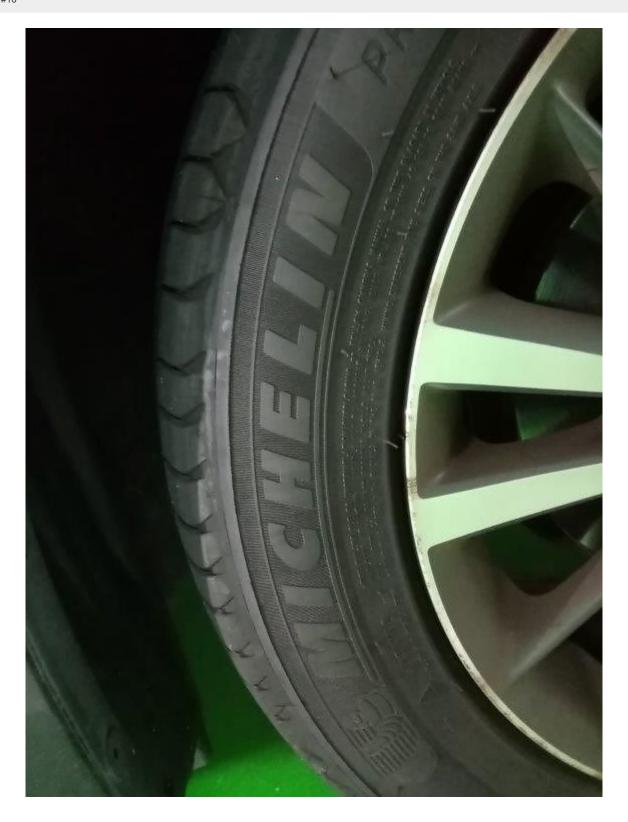




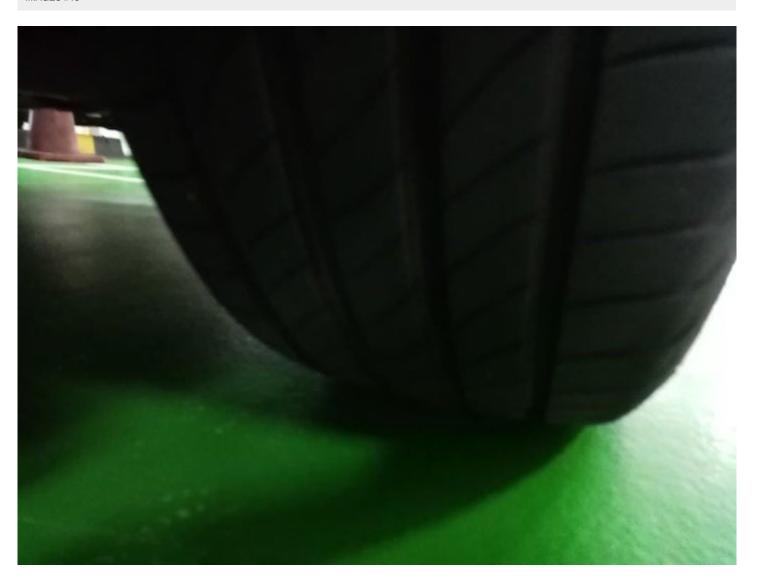


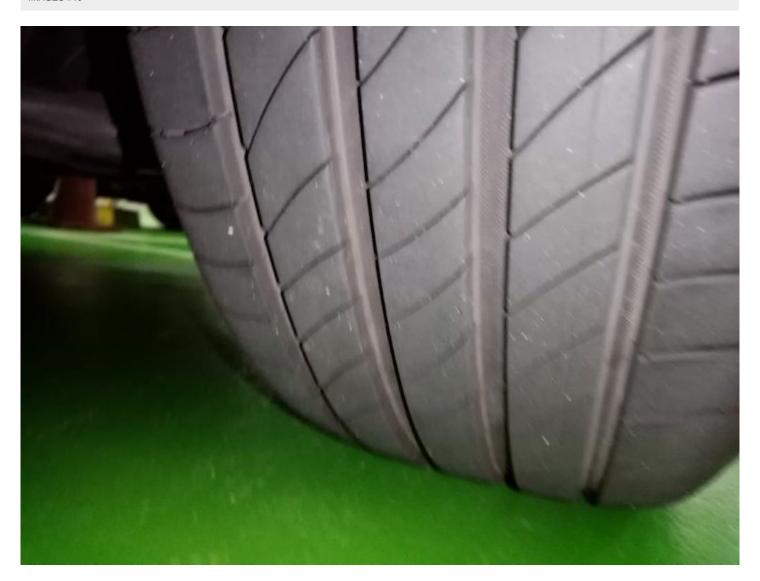








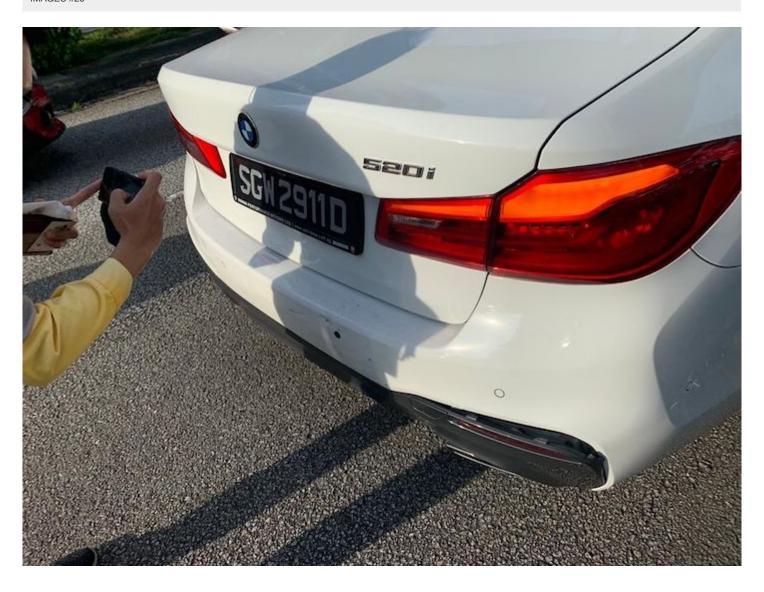






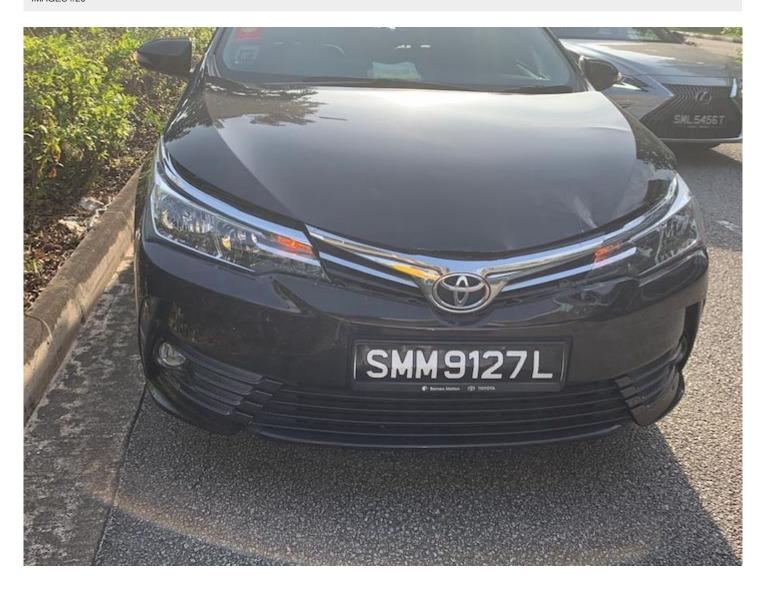
















## CERTIFICATE OF INSURANCE

#### TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : SEE CHENG HWEE EDMUND Vehicle No. : SMM9127L Period of Insurance : 19 Jul 2021 To 18 Jul 2022 Policy No. : 1900122183-01

Engine No. : 1ZR0D98242 Endorsement No.

Chassis No. : MR053REH604598204 Issued Date : 03 Jun 2021

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6

Engine Capacity/Tonnage : 1,598.00 CC Sum Insured : Market Value First Year of Registration : 2019 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

a) The Policyholder 3) 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/site 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 train 2 years' driving experience

Age Condition : All Age Condition Mileage Condition : Unlimited Mileage

Limitation as to use\* :

Use only for social, domestic and pleasure purposes and for the Policyholden's business

This Policy does not cover use for hite or reward, driving tution, driving test, racing, pace-making, reliability bial 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 55 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under those headings.

## EXCESS

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2 Property Damage - S0

Windscreen: \$100

Named Driver and Excess (where applicable)

SEE CHENG HWEE EDMUND - \$600 (Own Damage), \$600 (Flood Cover)

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

1 Toyota Bodycare Gentre (For accident repair & accident reporting). Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188 2 Toyota Bodycare Gentre (For accident repair & accident reporting). Add: 17 Ubi Road 4 Singapore 400611 Tel: 6631 1688

For other Approved Reporting Centres/A/G Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6336 6200. Alternatively, you may refer to A/G website www aig sg or A/G SG Mobile App. Simply search and download 'A/G SG' from Tunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

IWWe hereby contry 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. 159), Part IV of the Read Transport Act, 1987 (Malaysia), Read Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

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INCHCAPE AUTO TOYOTA - BSTL062

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

33 LENG KEE ROAD SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

SSPILA

