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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.

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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

15/11/2021 15:12 (SGT) 12/11/2021 17:15 (SGT) 18 Siglap Link, Singapore SEASIDE RESIDENCES CARPARK Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLJ6864P

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

TAN CHEE WEI (CHEN ZHIWEI)

SXXXX854E

eatinking1@yahoo.com.sg

(Phone) +65-98280598

+65-98280598

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category Transmission

CC

Mazda

5

Private use

No - Claiming third party

Private car

Auto

1999

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

Comprehensive

1900245348-01

DRIVER

Name of Driver

NRIC No

TAN CHEE WEI (CHEN ZHIWEI) SXXXX854E

Accident report SN0821BF0004

.Date Of Birth Occupation Date Of Driving Pass

Driving experience

Gender

Mobile Number Alt. Phone Number Email Address

Address Address complement

Postcode Is the driver the policyholder?

If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? 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? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? 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?

Reasons for not uploading a video of the accident

Was there any audio recorded?

Yes

05/05/1981

05/01/2009

+65-98280598

200026

Yes

No

Clear Dry

No

No

Yes

No

No

No

2

12 YEARS AND 10 MONTHS

(Phone) +65-98280598

eatinking1@yahoo.com.sg BLK 26 JALAN BERSEH #09-160

Collision - Head to Rear

Indoor

Yes

WITH OWNER

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category Name of Driver NRIC No

Contact Number

SKG1482T

Private car LEE HAN HUI SXXXX552A

Accident report SN0821BF0004

Page 2 of 13

Address	
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	
Details of property damaged in accident	2
No. Of Passenger (Including Driver)	8

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Formmust 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.
- 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)

Lunderstand, 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
- (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.

	Y	13	1.	H
Pol	cyholo	der's	Sigr	nature / Date &
Tim	ne		7.	20m

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

Witnessed by Reporting Centre Personnel

A:SLJ6864P

B: SKG1482T

Sketch Plan

Describe Circumstances of the Accident

I was travelling inside of seasible residences compainte. My rehible was behind of
V
rehicle B. When beinde B came to 1 Stop, I also follow suit to stop behind him
at a Safety distunce. However the next moment vehicle B started to reverse at
All a silver of state of the st
101. C . ()
a fresy fast speed. I Sounded my horn immediately but vehicle B Still continue
to reverse and eventually hit anto my variet than partion.

Declaration

I/We declare the foregoing particulars are true in every respect.

Tan Chee Wei (3/11/21)
Policyholder's Signature / Date & Time 3.2900.

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

Witnessed by Reporting Centre Personnel



Date of Accident	: 12 11 WH Accident Time: 1715 (24-HR-FORMAT)
Accident Place	: 18 Siglap Link sogside residences curpurk
Vehicle Reg. No (Car plate No.)	: SLJ6864P Vehicle Make/Model: Muzda 5
Insurance Company	Policy No. 1900245348-01
Name of Registered Owner	: Company / Individual Tan Chee Wei
ID of Registered Owner	: Co Reg No: Owner's NRIC No: 58112854E
	: Co Contact No: Owner's Contact No: 98280598
DRIVER'S Name	: Jan Chee Wei DRIVER'S NRIC No: 881128548
DRIVER'S Date of Birth	:5 5 1981 DRIVER'S License Pass Date 5 2009
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK IL Julun Bersch Hug-160 S'pone 20026
DRIVER'S Contact No./ Alt No.	:1) 9828 0598 2)
DRIVER'S Occupation	: INDOOR \OUTDOOR (eg. working inside or outside of an ofc)
Email Address	: eatinking 1 @yahoo.com.sq
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Was the accident reported to the pol Was there any video Captured by ca	r camera: YED\NO s being used at the time of accident: Private use\Work purpose
	· Party Driver's Particulars (if any)
Vehicle Reg No: SKG1482T	Vehicle Reg No:
Vehicle Make\Model:	Vehicle Make\Model:
Name DRIVER: lee Han Hui	Name DRIVER:
IC No. DRIVER: 58918552A	IC No. DRIVER:
DRIVER'S Contact & add:	DRIVER'S Contact & add:
	/



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Tan Chee Wei

Period of Insurance

: 21 Dec 2020 To 20 Dec 2021

Engine No.

: PE10410737

Chassis No.

: JM6CW1071G0124868

Vehicle No.

: SLJ6864P

Policy No.

: 1900245348-01

Endorsement No.

Issued Date

: 25 Nov 2020

ABOUT THE COVER

Make/Model

: MAZDA 5 2.0

Engine Capacity/Tonnage: 1,999.00 CC

Sum Insured : Market Value

First Year of Registration : 2016

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

a) The Policyholdin 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

Age Condition

: All Age Condition

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, 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 Optional

* 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)

Tan Chee Wei - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs) Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop. 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 Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

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 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

IADDVANTAGE PTE, LTD.

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

BLK 109 CLEMENTI STREET 11 #01-03

SINGAPORE 120109

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Si Lin Li