

# 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 ..... 21/12/2021 17:13 (SGT)  
Date of Accident ..... 21/12/2021 11:15 (SGT)  
Exact Location of Accident ..... Bedok Reservoir Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... EK52H

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... SHENG YEE ZHER (SHENG YIZHE)  
NRIC No ..... SXXXX029C  
Email Address ..... syzher@gmail.com  
Mobile Phone No ..... (Phone) +65-96956565  
Alternative Phone No ..... (Home) +65-96956565

### 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? ..... Yes  
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 ..... 1800122921-02  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... SHENG YEE ZHER (SHENG YIZHE)  
NRIC No ..... SXXXX029C

Date Of Birth .....	11/03/1978
Occupation .....	Indoor
Date Of Driving Pass .....	20/07/1998
Driving experience .....	23 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96956565
Alt. Phone Number .....	(Home) +65-96956565
Email Address .....	syzher@gmail.com
Address .....	Blk 103 Lengkong Tiga #12-379 Singapore
Address complement .....	-
Postcode .....	410103
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 .....	Collided into Bicyclist
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	LOO SIOK CHEN
Gender .....	Female

#### PASSENGER 2

Name .....	SHENG GUAN RUI, ZANE
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Kampong Kembangan Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18007489999
Alt. Police Station Phone No .....	(Fax) +65-67454676
Police Station Address .....	Blk 112 Lengkong Tiga #01-215 Singapore 410112
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO THE POLICE REPORT # T/202112221/2021

#### 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 .....	NA
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	NA / Unknown
Name of Driver .....	JEREMY
Contact Number .....	(Phone) +65-96543048
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN****IMPORTANT NOTICE**

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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

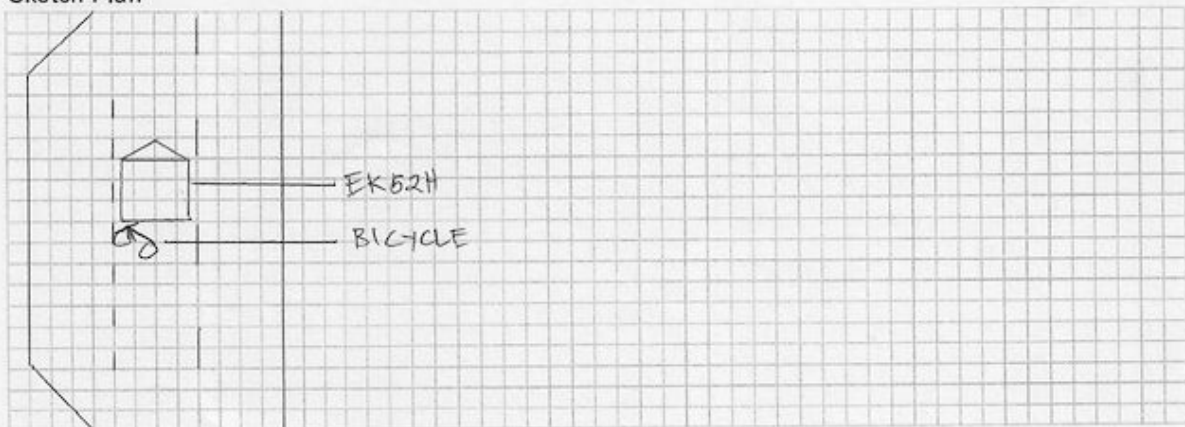
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time  
21/12/2021 16:50

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



Witnessed by Reporting Centre Personnel

**Sketch Plan**

- REFER TO THE POLICE REPORT # T/20211221/2021 -

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



Policyholder's Signature / Date &  
Time 21/12/2021 1650

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



Witnessed by Reporting Centre  
Personnel





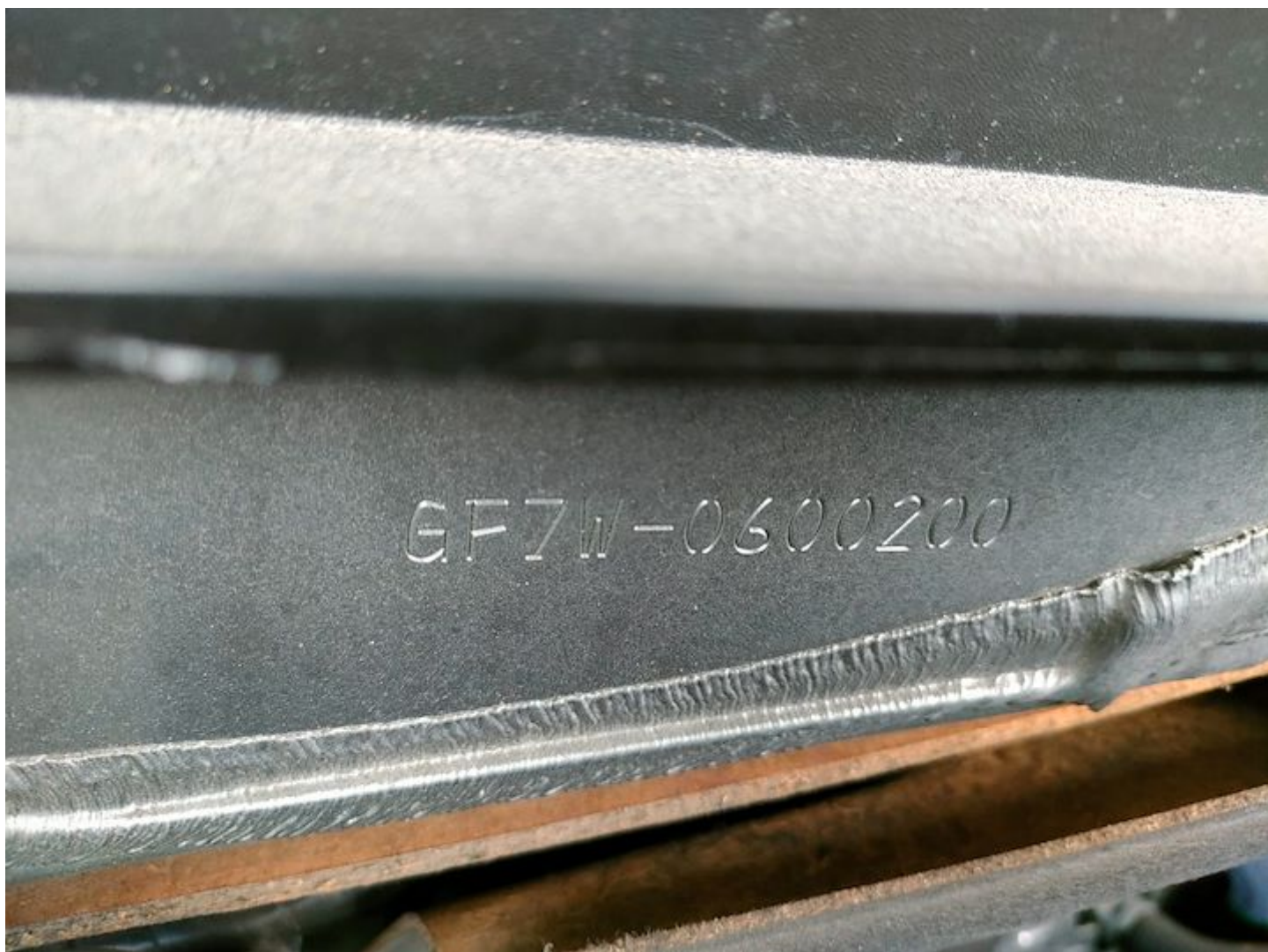
































**SINGAPORE  
POLICE FORCE**



T/20211221/2021

Police Station Of Origin:  
Kampong Kembangan NPP  
112 Lengkong Tiga #01-215 SINGAPORE  
410112  
Tel No: 1800-7489999

1 of 3

Report No. T/20211221/2021

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/12/2021 12:41		Vide Report No.:	Station Diary No.: 8
<b>Informant's Particulars</b>			
Name of Informant: SHENG YEE ZHER		Address: APT BLK 103 LENGKONG TIGA #12-379 SINGAPORE 410103	
ID Type / ID No.: NRIC NO / S7807029C		Contact No.:	Mobile: 96956565
Nationality: SINGAPORE CITIZEN		Email: syzher@gmail.com	
Sex: Male	Age: 43	Date of Birth: 11/03/1978	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: RESEARCHER		Driving Licence Information: Class: 3 Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 21/12/2021 11:15	Type of Location: Straight Road
Location:  BEDOK RESERVOIR ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Cyclist against Stationary vehicle			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EK52H	Car	MITSUBISHI	OUTLANDE R 2.0 CVT	Grey	Slightly Damaged	2

<b>Details of Vehicle Insurance</b>					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
EK52H	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800122921-02	13/11/2021	12/11/2022	





**SINGAPORE  
POLICE FORCE**



T/20211221/2021

Police Station Of Origin:  
Kampong Kembangan NPP  
112 Lengkok Tiga #01-215 SINGAPORE  
410112  
Tel No: 1800-7489999

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Report No. T/20211221/2021

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	SHENG YEE ZHER	ID No.	S7807029C
Related Vehicle	EK52H (Car)	Contact No.	96956565
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Cyclist</b>			
Name	JEREMY	ID No.	NIL
Related Vehicle	NIL	Contact No.	96543048
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

**Brief Details.**

On the 21/12/2021 at about 1115hrs, I was driving along Bedok Reservoir Road towards Ubi, there was a traffic light after the bus stop opposite B/646 which turn red, hence, I stopped my vehicle before the yellow box. When I stopped my vehicle, suddenly, felt an impact from the rear of my vehicle. I alighted my vehicle and made a check. A grab dispatch rider who was wearing helmet fall from his bicycle and I assisted him to the side of the road. He informed that sustain some bruises on him and hit his head onto something during the collision. He do not require any immediate medical attention. We exchange phones number and left the vicinity.

There was a dent on the rear of my vehicle and the passenger side of the rear bumper ripe off and out of alignment.



**SINGAPORE  
POLICE FORCE**



T/20211221/2021

Police Station Of Origin:  
Kampong Kembangan NPP  
112 Lengkong Tiga #01-215 SINGAPORE  
410112  
Tel No: 1800-7489999

3 of 3

Report No. T/20211221/2021

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report  
G /  
Sr Staff Sgt HO CHUAN SAN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
21/12/2021 12:41

Officer In Charge Of Case:  
TP / AEIT /  
SSI TAY CHUN KEEN  
Contact No.: 65476436

Classification Of Case:

Authentication Stamp  
NP168







# CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : SHENG YEE ZHER (SHENG YIZHE)  
**Period of Insurance** : 13 Nov 2021 To 12 Nov 2022  
**Engine No.** : 4J11AA4180  
**Chassis No.** : GF7W0600200

**Vehicle No.** : EK52H  
**Policy No.** : 1800122921-02  
**Endorsement No.** :  
**Issued Date** : 20 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/PARF** : 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 "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** : 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**

\* 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)

SHENG YEE ZHER (SHENG YIZHE) - \$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 606339 65684501
2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408660 67461000
3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708668
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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](http://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:** DBS BANK LTD

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).

0504620206

C&CMICP2 - FLOREN

239 ALEXANDRA ROAD  
 SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

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