

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process
- This Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability
- 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.
- This report will be forwarded by the insurers of the insurers of the G A Records Management Centre established by the General Insurance Association of Singapore (G A) for archiving and that copies of this report will for a fee be made available upon application by interested parties
- 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 Report	08/07/2016 14:46
Date Of Accident	07/07/2016 21:10
Exact Location Of Accident	LOYANG AVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDE2200C
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#### Insured/Policyholder

Name Of Registered Owner	
NRIC No	
Email Address	NOEMAIL
Mobile Phone No	(LOCAL)
Alternative Phone No	Office

#### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	B180
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
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

#### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

#### Driver

Name of Driver	
NRIC No	
Date Of Birth	
Occupation	
Date Of Driving Pass	
Driving Experience	
Gender	

Mobile Number (LOCAL) + [REDACTED]  
Fax Number

Contact Number OFFICE [REDACTED]

Email Address NOEMAIL

Address [REDACTED]

Postcode [REDACTED]

Was driver an employee of the Insured's Company [REDACTED]

If No, Relationship of the Driver with the Insured [REDACTED]

Vehicle Registration Number of Driver's Own Vehicle -  
-  
-

Insurance Company of Driver's Own Vehicle -  
-  
-

#### General Information of the Accident

Type Of Accident UNKNOWN - REFER TO ATTACHED

Weather Conditions CLEAR

Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? NO

Was any other material or property damaged? YES

Was there any video captured by Car Camera? NO

Number of Passengers (Including Driver) 1

#### Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

Are accident photos available for attachment? YES

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number MID21238

Vehicle Make/Model/Colour

#### Details Of Properties

Name of Driver LCP LOW JON HON

NRIC/Passport Number S9436932J

Contact Number 84997375

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Details of Witness

Name

Phone Number

Email Address



# CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1980  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

MERCEDES-BENZ MOTOR INSURANCE

CERTIFICATE NO. [REDACTED]

OWN DAMAGE EXCESS S\$800.00 (1)

WINDSCREEN EXCESS S\$100.00

(for policies with effect from 1st November 2002)

SUM INSURED Market Value

INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO. [REDACTED]

2) NAME OF INSURED [REDACTED]

3) EFFECTIVE DATE OF THE COMMENCEMENT  
OF INSURANCE FOR THE PURPOSES OF THE ACT 29 May 2016

4) DATE OF EXPIRY OF INSURANCE 28 May 2013

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE \*  
SUBJECT TO AGE CONDITION: All Age Condition

a) The Insured.

b) Any other person who is driving on the Insured's order or with his permission.

This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions.

A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the

Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said

Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE \*

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability and speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

APPROVED REPORTING CENTRES / MERCEDES-BENZ AUTHORISED REPAIRERS

1. Cycle &amp; Carriage Pandan Loop Service Center - 188 Pandan Loop (Tel: 6777 8358)

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

2. ComfortDelmo Engng - 205 Brandell Rd (Tel: 63837118) 3. Edinaz - 30 Bukit Batok Cres (Tel: 66547777)

4. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only 5. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560)

6. Lai Hui (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538101) 7. Mova Automotive - 1005 Bukit Merah Lane 3 (Tel: 62723892)

8. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336) 9. SME Motor - 1 Kaki Bukit Ave 6 BK D (Tel: 67476106)

LOSS OF USE 15 Days Replacement Car only for repairs at C &amp; C. Refer to policy wordings for details.

NAMED DRIVER NA

HIRE PURCHASE COMPANY MERCEDES-BENZ FINANCIAL SERVICES (S) LTD  
EMPLOYER'S LOAN

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 96 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 11 May 2016

AIG Asia Pacific Insurance Pte. Ltd.

500650-432  
CYCLE & CARRIAGE - JASTAN  
239 ALEXANDRA ROAD  
SINGAPORE 159930  
ANSP-MOTOR

AUTHORISED REPRESENTATIVE

ORIGINAL

SSCANW.



## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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 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' 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

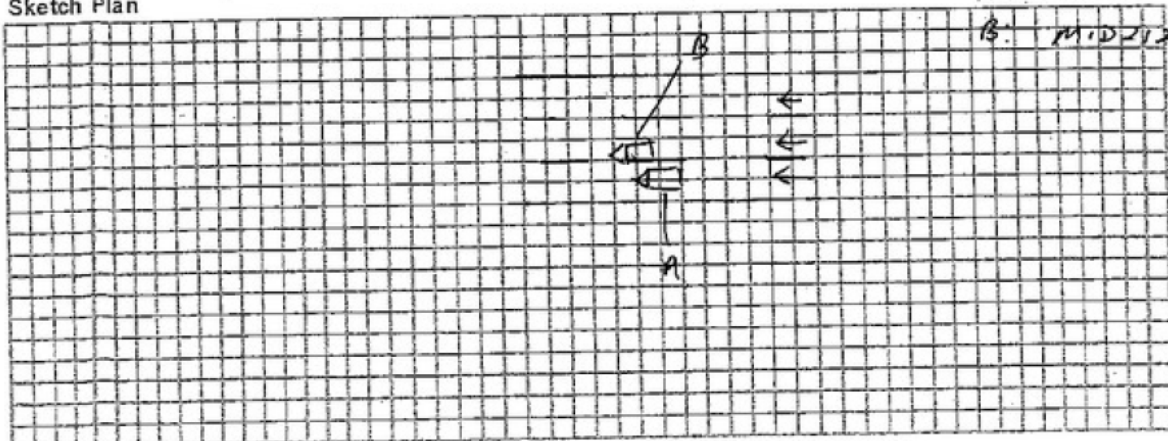
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

08/07/16 11:10 am  
Policyholder's Signature / Date & Time

8/7/16  
Driver's Signature (If driver is not the policyholder) / Date & Time

Vincent Seah  
Cycle & Carriage Industries Pte Ltd  
Body Care & Repair Center  
DID: 6771 4401 HP: 8332 0062 Fax: 6872 1272  
Email: vincent.seah@cyclecarriage.com.sg  
Witnessed by Reporting Centre Personnel

#### Sketch Plan



Sketch Plan #3

Describe Circumstances of the Accident

ALONG LOYANG AVE AROUND 9.07 PM ON THUR  
7/7/16. MY CAR ON LEFT HAND SIDE STOP BECAUSE  
OF RED COLOR TRAFFIC LIGHT BEFORE I ABOUT TO  
DRIVE OFF GREEN LIGHT AND ARMY MID TRUNK  
COME IN CONTACT ON BY DRIVER'S SIDE.

Declaration

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

**Vincent Seah**  
Cycle & Carriage Industries Pte Ltd  
Body Care & Repair Center  
DID: 6771 4401 HP: 8332 0062 Fax: 6872 1272  
Email: vincent.seah@cyclecarriage.com.sg

08/07/16 11:10 am  
Policyholder's Signature / Date & Time



8/7/16

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

Witnessed by Reporting Centre Personnel

RESTRICTED

ANNEX A

**PROCEDURE TO FOLLOW AFTER ACCIDENT INVOLVING  
BETWEEN MINDEF AND CIVILIAN VEHICLES**

Dear Potential Claimant,

We refer to your vehicle reg. SDE2200C involved in an accident on 21/2/38 on 07/07/16 (accident date).

In order to speed up the claim process, we would appreciate it if you could follow the procedure as follows:

1. To contact DAF Auto Claims at the 1st Floor immediately after the accident and forward all claim documents to LKY.
2. LKY staff will liaise with you for the claim procedure.

For enquiries, please contact us at Tel: 6256 3601 (Ext. 101 & 115) / Fax: 6243 4188 / Email: [klm@lky.com.sg](mailto:klm@lky.com.sg).

DAF Auto Claims Section  
1st Floor, DAF Centre for the 1st  
51 Bras Basah Road, 11th Floor, The Esplanade Park, Singapore 408033

**ERN - Paya Ubi (HQ)**



21, Old Airport Road, Singapore 408033

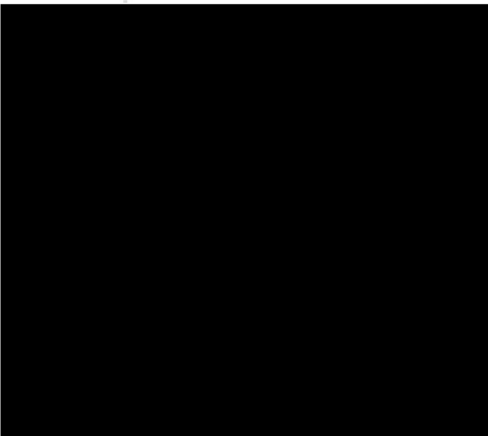
**ERN - Yompa Jurong (Branch)**



No. 5, Yompa Jurong Road, Singapore 618520

A-1  
RESTRICTED

Sketch Plan #5



Army VEH mID 21238  
LCP Low Jon HON  
S 9436932J  
H/P 84997375



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:**

Class	Description	Pass Date
Class 2B	Motorcycles not exceeding 200 cc	14 Dec 1979
Class 2A	Motorcycles between 201 cc and 400 cc	14 Dec 1979
Class 2	Motorcycles exceeding 400 cc	14 Dec 1979
Class 1	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	19 Jun 1975

NP 428A

License No: S1115105A

0735644

NSIC No: [REDACTED]

Group: [REDACTED] Date of Issue: 16-01-1993

12-2001 No: S1175307A

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

1090393328E

13 Jan 1955

17 Apr 2003

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. [REDACTED]

王仔兴

Race: CHINESE

Date of Birth: 13-01-1955

Country of Birth: SINGAPORE

Sex: M



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





**Accident Photo**



**Accident Photo**

