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.

 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 Date of Accident Exact Location of Accident	18/04/2022 10:31 (SGT) 16/04/2022 08:40 (SGT)
Exact Location of Accident	Joo Koon Cir, Singapore
Additional Location Information	TWDS PIE (INFRONT OF BUILDING WONG FONG ENG WORKS P/L)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA9761D
INSURED/POLICYHOLDER	

Honda

Is company?	No
Name Of Registered Owner	CHUA CHENG LUNG CARLOS
NRIC No	S7526999D
Email Address	CARLOS@TONESGRP.COM
Mobile Phone No	(Phone) +65-94894232
Alternative Phone No	+65-94894232

VEHICLE PARTICULARS

Manufacturer

	Horiau
Model	Stream
Variant	1.8 A
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	1799

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy	AIG Asia Pacific Insurance Pte. Ltd. Comprehensive
Policy Number Cover Note Number	No 7210077543 -

DRIVER

Name of Driver **CHAN KER SING**



NRIC No S7540391G Date Of Birth 07/12/1975 Occupation Outdoor Date Of Driving Pass 02/07/1997 Driving experience 24 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-92347518 Alt. Phone Number Email Address KELVIN@TONESGRP.COM Address 619 WOODLANDS DR 52 #04-72 Address complement Postcode 730619 Is the driver the policyholder? Nο If No, Relationship of the Driver with the Insured **COLLEAGUE** 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 Chain Collision 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? No 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? PASSENGER 1 Name POON YI SENG Gender 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 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 SHD3231P Vehicle Manufacturer

Vehicle Variant
Vehicle Colour

Vehicle Model

Vehicle Category	Taxi
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer	YQ3097R
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)	_

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
- 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)

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 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")

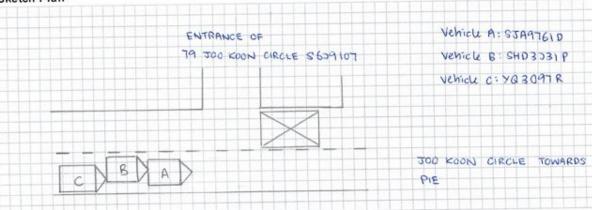
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Europses.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan



cribe Circ	cumstances o	f the Acciden	t			-16	i. A /0-	01010
On	16/4/30	or at ab	out 8.40 a	m, I was	diving	My Venic	A K (2)	H-11013
long T	Too koon	Circle tow	aids PIE.	I Slowe	9 gomu	my vehicl	modere	tely
	before I	change +	o the left	lane be	cause the	tiattic	Was , he	avy.
Suddenly	J. I felt	an impact	from behin	d. I e	xited to	om my ve	hicle an	d saw
he vehic	L B (SH	032318)	bit on my	rear vel	nicle, the	rt was	another	vehicle
70309	1R) WH (in the veh	ich B.					

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

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : CHUA CHENG LUNG CARLOS Period of Insurance : 21 Jul 2021 To 20 Jul 2022 Engine No. : R18A1753223

Engine No. : RN61047499 Chassis No.

: SJA9761D Vehicle No. : 7210077543 Policy No.

Endorsement No.

: 21 Jul 2021 Issued Date

ABOUT THE COVER

: HONDA STREAM 1.8 First Year of Registration : 2007 Make/Model Sum Insured : Market Value Engine Capacity/Tonnage : 1,799.00 CC Insuring with COE/PARF : Yes Off Peak Car : No

Driver Restriction : NA

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder b) Any other person who is deving on the Policyholder's order or with his/her permission.
b) Any other person who is deving on the Policyholder or any authorised driver only if heisthe meets the specified age condition.
This Policy will indemnify the Policyholder or any authorised driver only if heisthe meets the specified age condition. You have to pay an additional sum of \$3,000 as "Young and/or Inexpenienced 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.

: All Age Condition Age Condition

Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, doministic and pleasure purposes and for the Policyholder's business.

Use only for social, doministic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for here or reward, driving suiton, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with Motor Trade.

* 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. Loss of Use 1500cc - 1600cc Optional

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)

CHUA CHENG LUNG CARLOS - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centres/ ASG 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 epairs carried out at the Sole Agent's workshop For other Approved Reporting Centres/NG Authorised the first registration of the Vehicle in Singapore, You have the option of having the accident epairs carried out at the Sole Agent's workshop For other Approved Reporting Centres/NG Authorised Repairs, please contact our 24-hour accident emergency hotine 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: NA

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, 1989 (Malaysia).

0504369000

LOW CHIEH YAN ANGELYNA

BLK 10F BEDOK SOUTH AVENUE 2 #05-540

SINGAPORE 465010

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

To Scientish Way #09-16 AIG Building \$079120 | T.+65 6419 3000 | v

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

CHIER YAN ANGELYNA LOW

AIG Asia Pacific Insurance Ple. Ltd.

Accident report SA1C224I0001













