# **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 Actual 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 29/08/2022 17:29 (SGT) Reported by Date of Accident 27/08/2022 11:55 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG PIE TOWARDS TUAS Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Volkswagen

Vehicle Registration Number SKH4994H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner MONG PUAY BOON, WILFRED NRIC No S7913754E Email Address wilfredmong@gmail.com Mobile Phone No (Phone) +65-97465897 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Tiguan 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 No - Claiming third party

your vehicle? Vehicle Category Private car Transmission Auto CC 1395

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210065422-01

DRIVER

Name of Driver MONG PUAY BOON, WILFRED NRIC No S7913754E Date Of Birth 01/05/1979 Occupation Indoor

Date Of Driving Pass 16/05/2006 Driving experience 16 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-97465897 Alt. Phone Number Email Address wilfredmong@gmail.com Address 49 WHAMPOA SOUTH Address complement #11-12 Postcode 330049 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Bukit Merah East Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002369999 Alt. Police Station Phone No (Fax) +65-62204360 Police Station Address 391 New Bridge Road Police Cantonment Complex Block A

Singapore 088762 Was notice of intended Prosecution given? No

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT & VIDEO

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SMF4872M Vehicle Manufacturer Honda Vehicle Model Jazz

Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
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)	-
No. Of assenger (including Driver)	-

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	SKC881C Volkswagen Golf
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
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

- 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 Actual Driver,
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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.
- 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")

licyholder's Signature / Date & Time

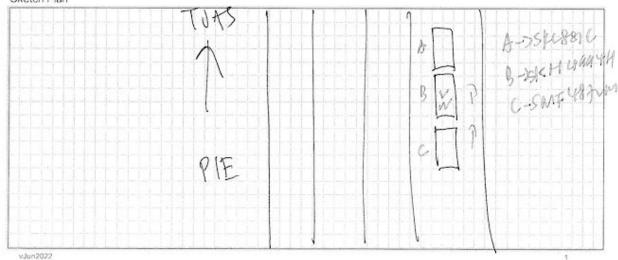
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



escribe Circumstance of the Accident					
1691	refer	40	Police	veport.	
V					

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

vJun2022



# CERTIFICATE OF INSURANCE

### AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MONG PUAY BOON WILFRED Vehicle No. : SKH4994H Period of Insurance : 16 Jul 2022 To 15 Jul 2023 Policy No. : 7210065422-01

Engine No. : CZDA93908 Endorsement No.

: WVGZZZ5NZLW861388 Chassis No. Issued Date : 16 Jun 2022 13:13

ABOUT THE COVER

: VOLKSWAGEN TIGUAN 1.4 Make/Model

Engine Capacity/Tonnage : 1,390.00 CC Sum Insured : Market Value First Year of Registration : 2020 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

Age Condition

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with his/her permission. This Policy will indeminify the Policyholder or any authorised driver only if helizhe meets the specified age condition.

You have to pay an addisonal sum of S\$\$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.

: All Age Condition

Mileage Condition : Unlimited Mileage

Limitation as to use\* :

Loss of Use 1500cc - 1600cc Optional

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for this or reward, driving tudion, driving test, racing, pace-making, reliability shall 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.

\* 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 - S0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

MONG PUAY BOON WILFRED - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centrus? 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 Siepapore, You have the option of having the accident repairs carried out, at the Sole Appnt's workshop For other Approved Reporting Centres/MS Authorised Repairers, please confact our 24-hour accident emergency hottine at +65 6336 6200. Atternatively, You may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and Sgreen and Sgreen are Google Play.

# IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK 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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) (Rules, 1959 (Malaysia).

0504650000

ALL INS AGENCY PTE LTD

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

22 SIN MING LANE #05-78 MIDVIEW CITY SINGAPORE 573969

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

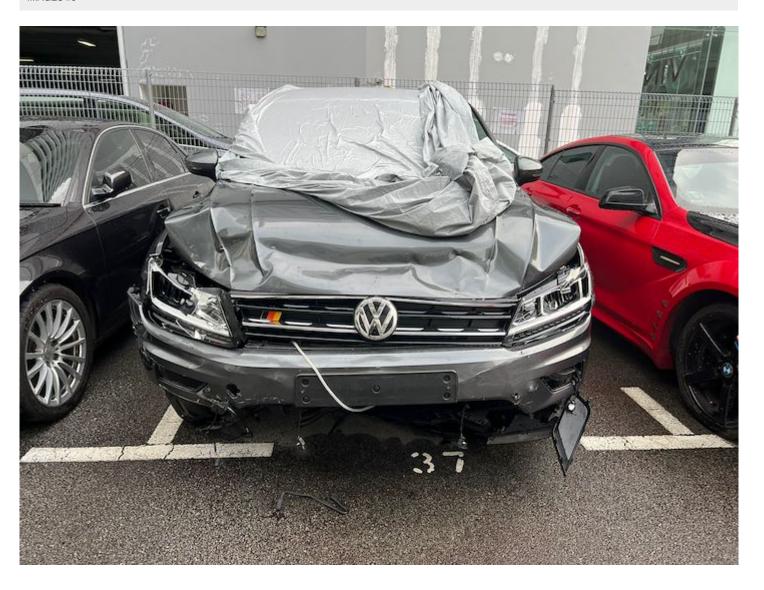
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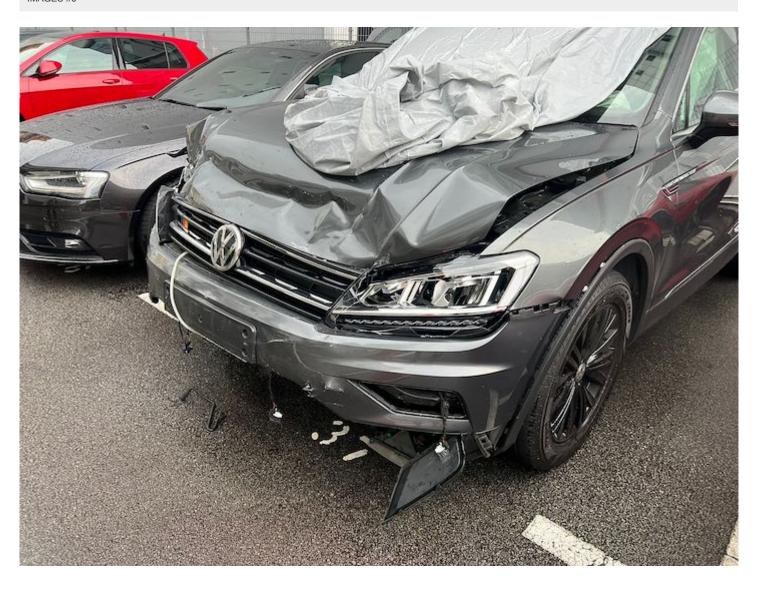


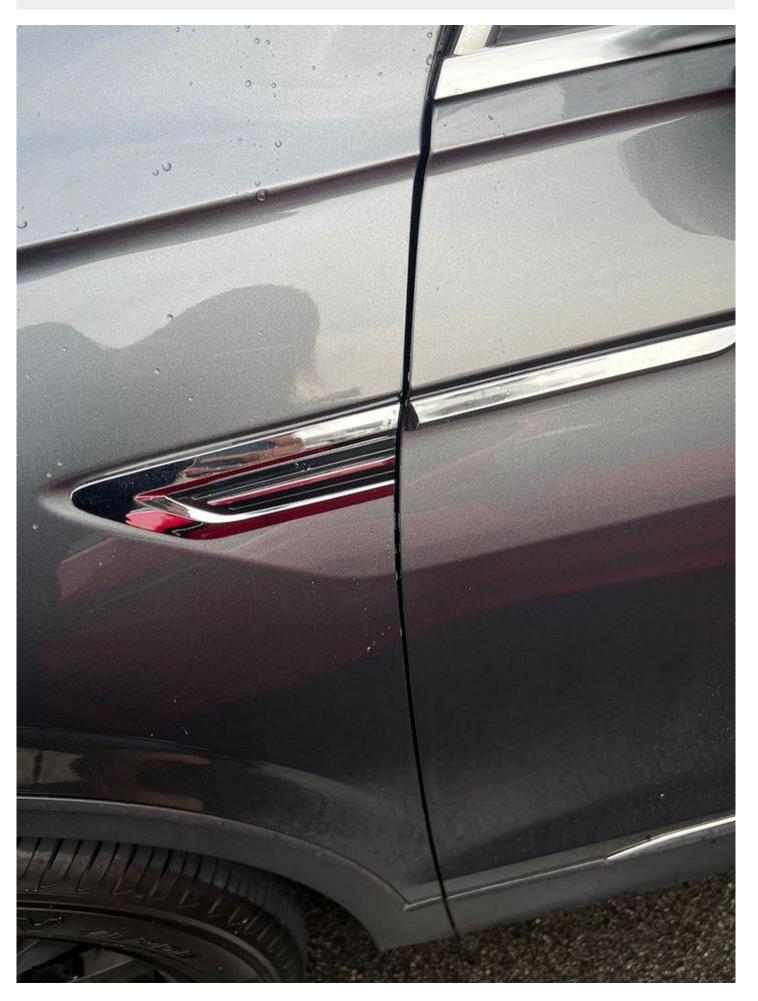


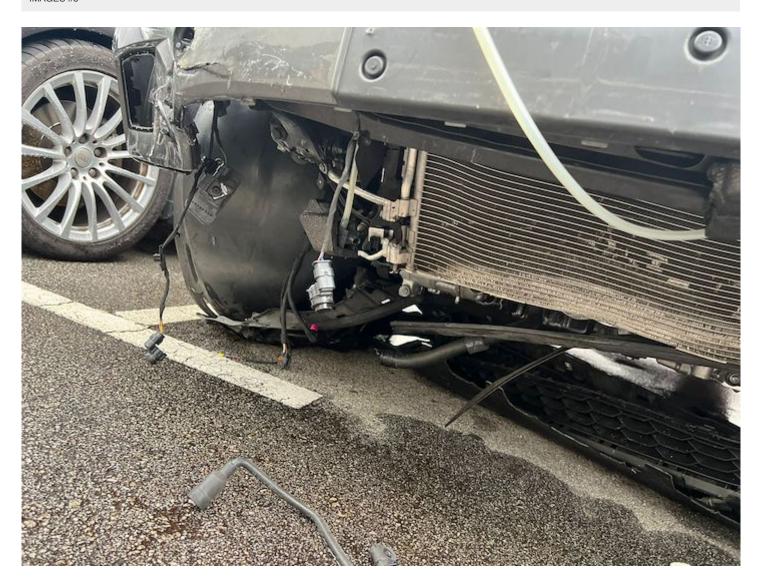


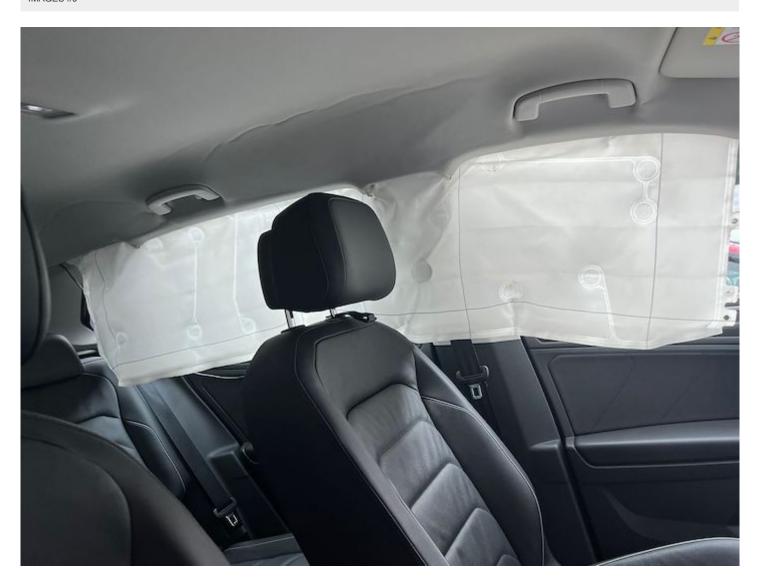








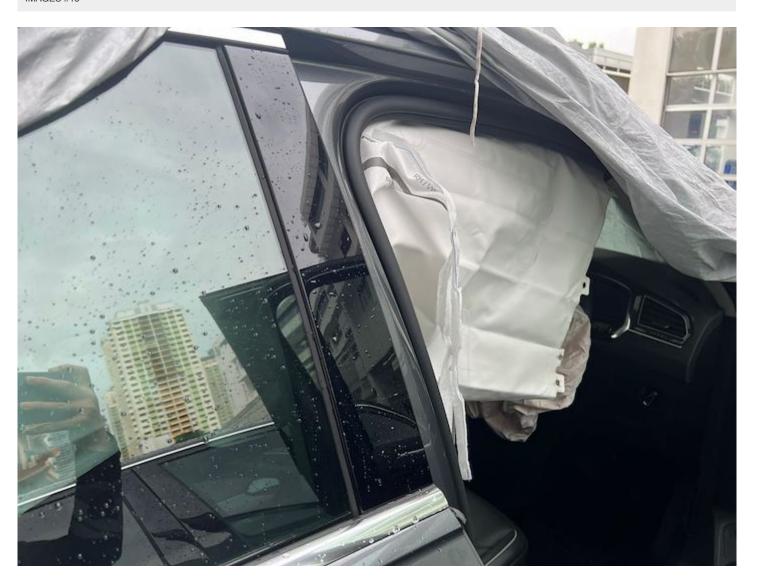




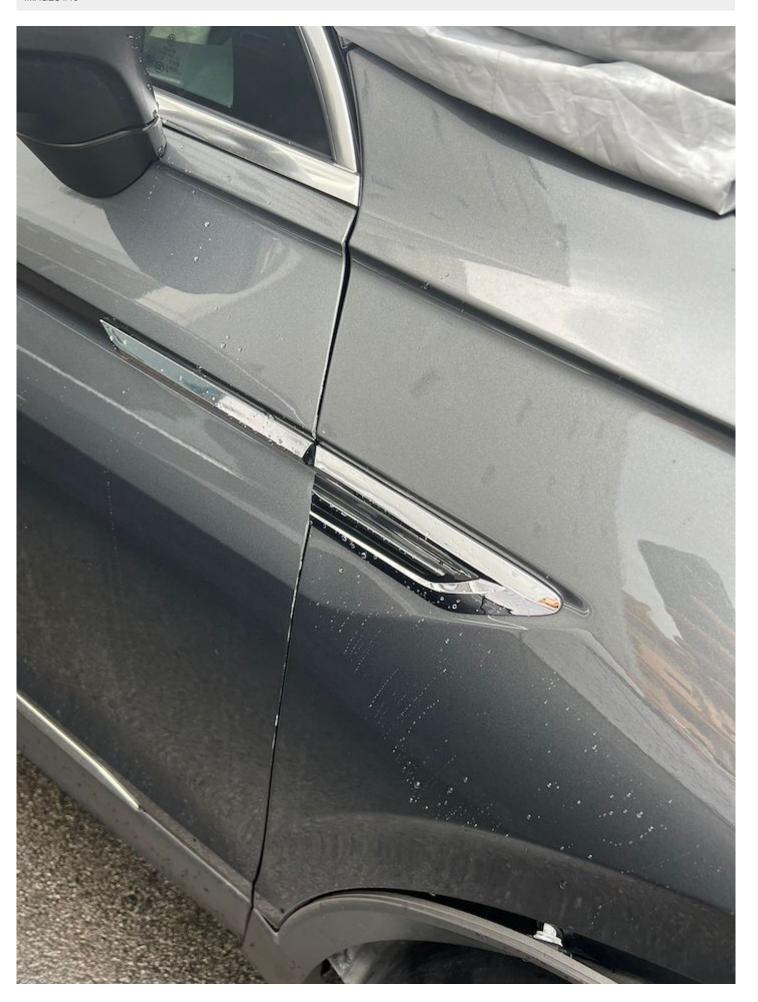


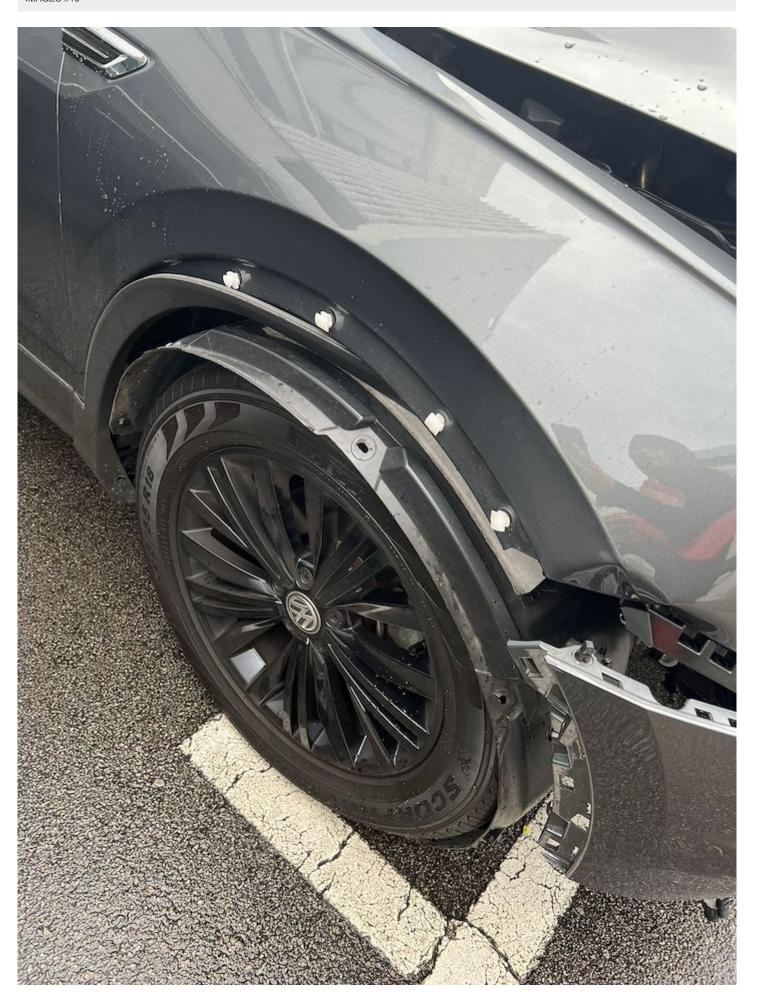


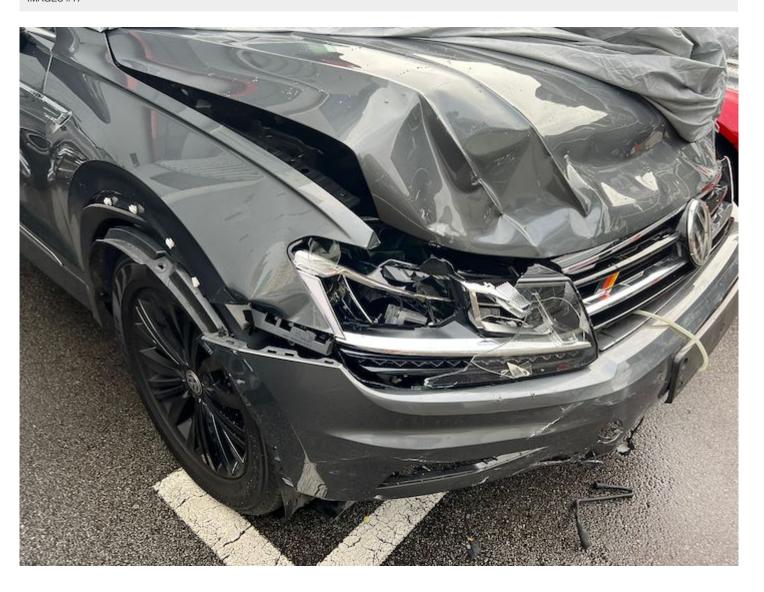


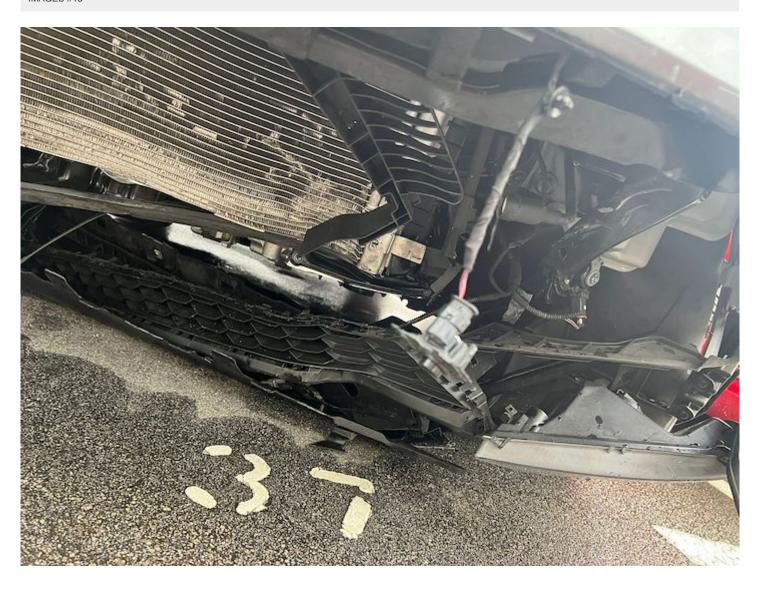


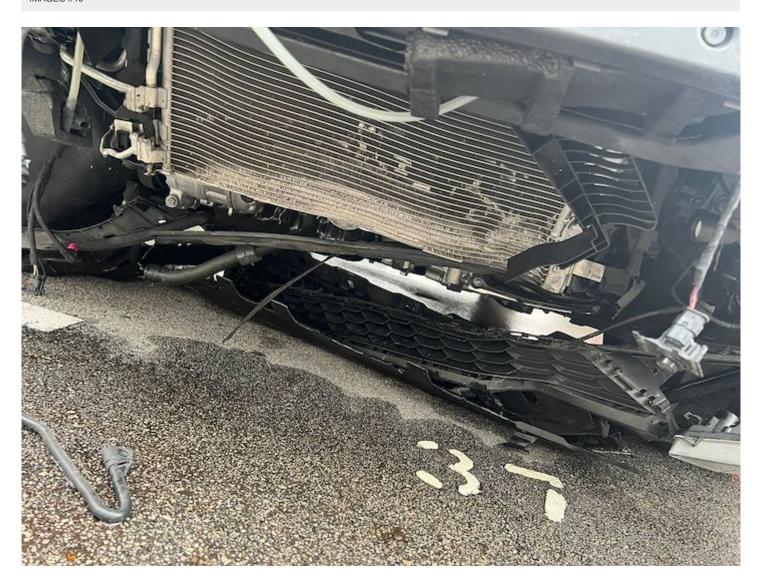


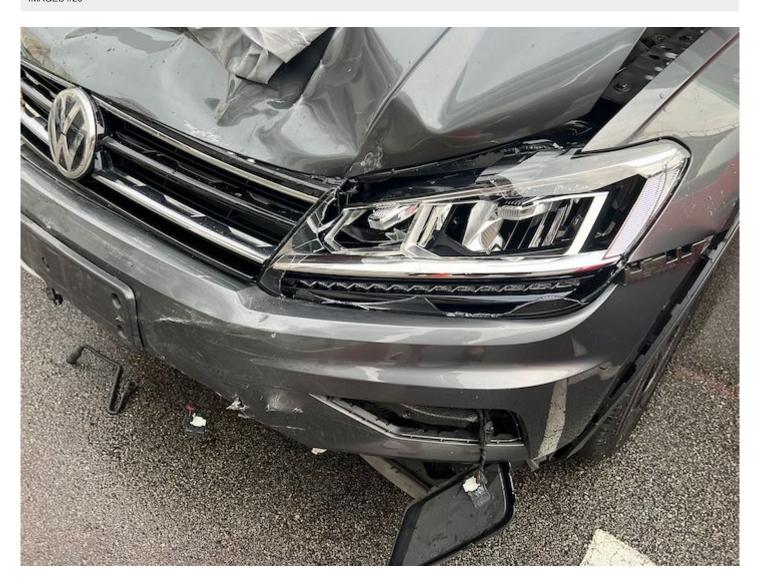


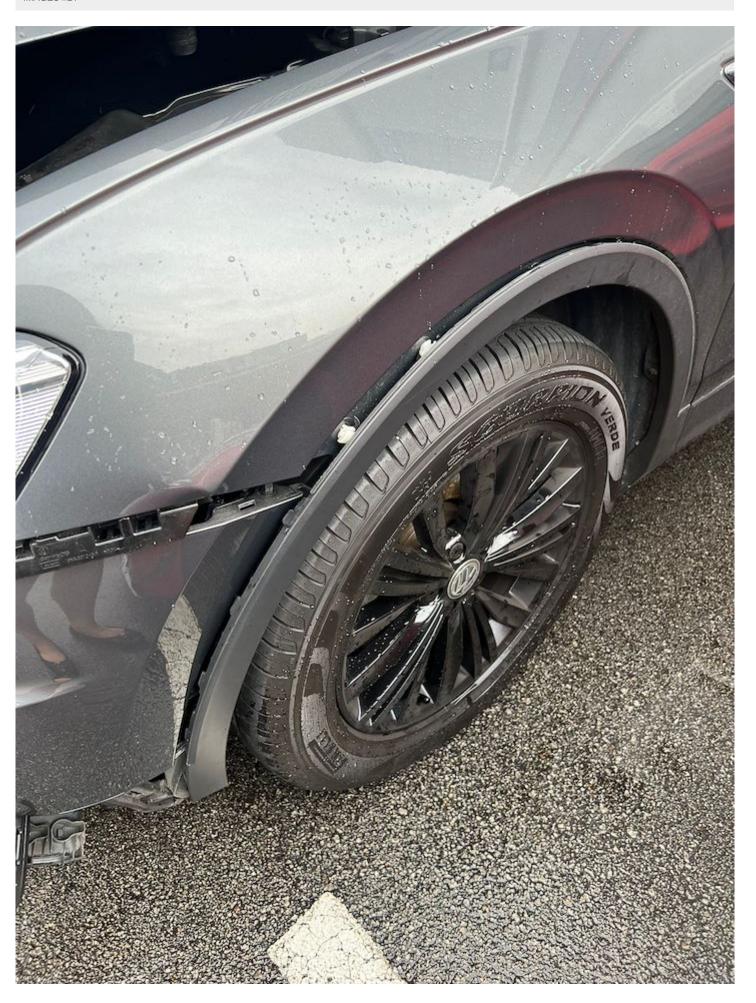


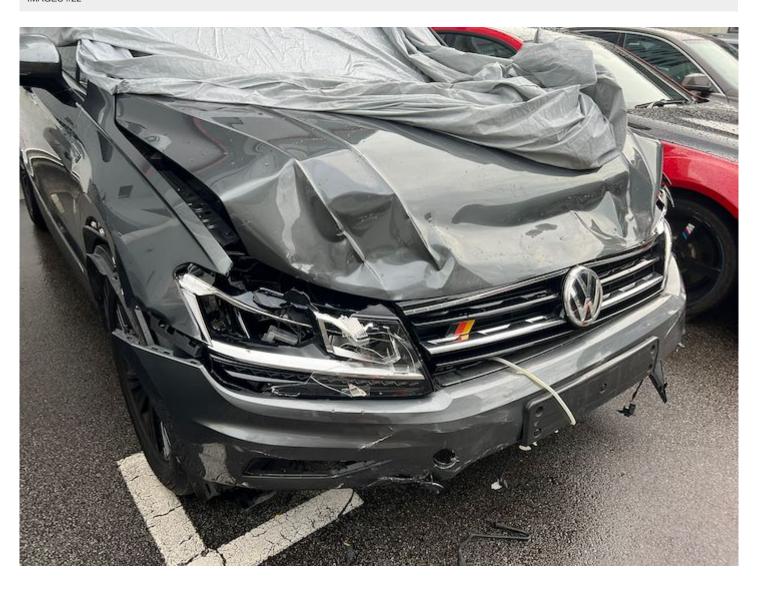






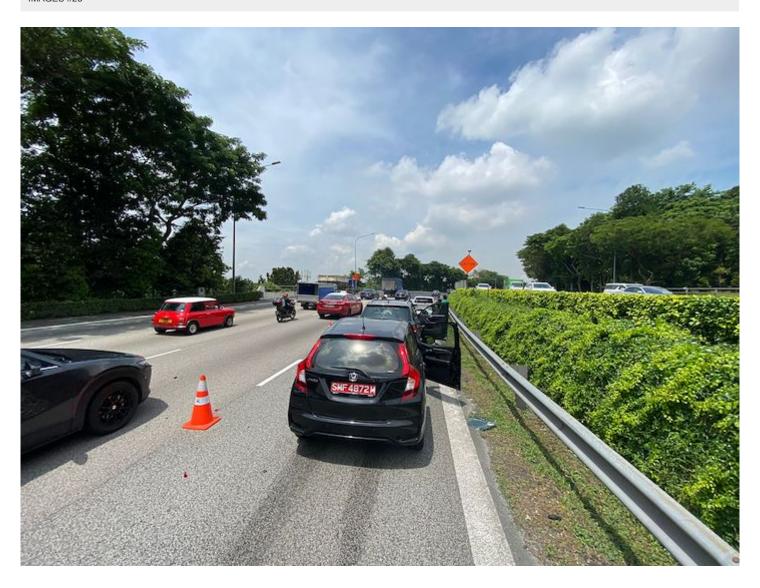


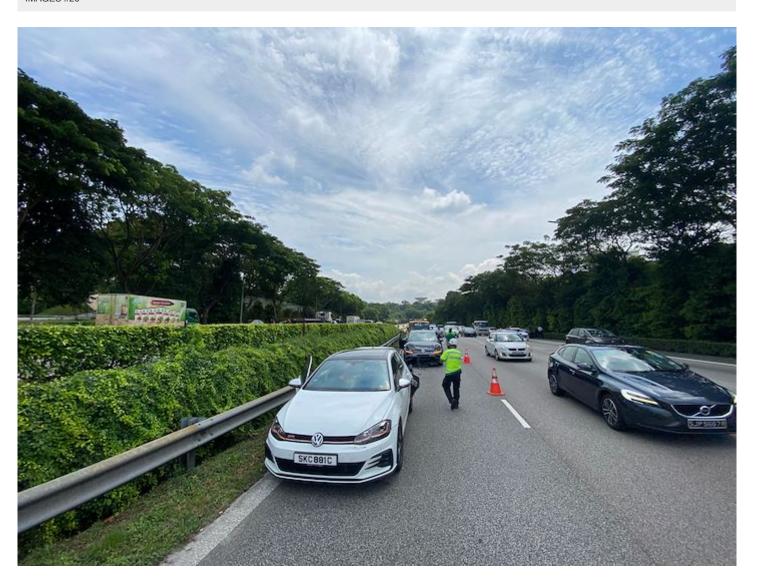


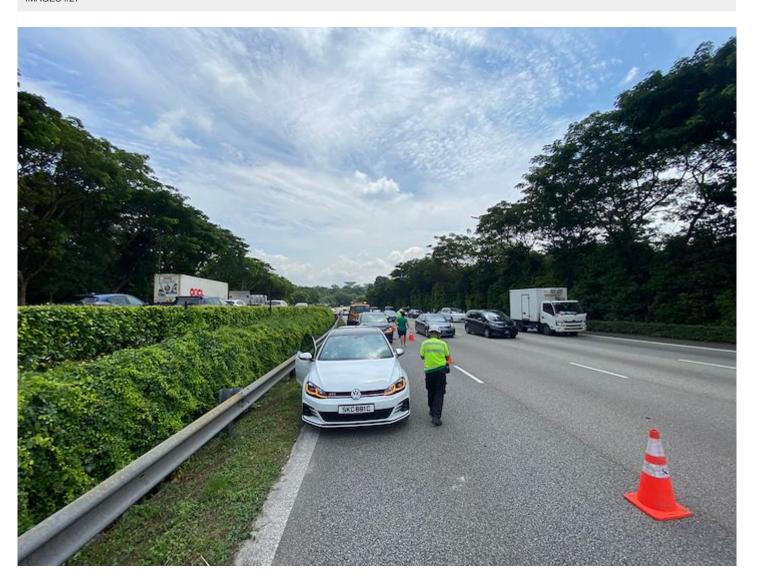


















Report No. T/20220827/2083

Police Station Of Origin: Bukit Merah East N.P.C 391 New Bridge Road Police Cantonment Complex SINGAPORE 088762 Tel No: 1800-2369999

REPORT C	F A TRAFFIC	CACCIDENT			
Date/Time Report Made: 27/08/2022 16:40		lade:	Vide Report No.: J/20220827/0072	Station Diary No.: 91	
Informa	nt's Particu	ulars			
Name of Informant: MONG PUAY BOON, WILFRED			Address: APT BLK 49 WHAMPOA SOUTH #11-12 SINGAPORE 33004		
ID Type / ID No.: NRIC NO / S7913754E			Contact No.: Home/Office:	Mobile: 97465897	
	Nationality: SINGAPORE CITIZEN		Email: wilfredmong@gmail.com		
Sex: Age: Date of Birth:		Date of Birth: 01/05/1979	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Marketing manager			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/08/2022 11:55	Type of Location Straight Road	
Location: PAN-ISLAND	EXPRESSWAY				
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 90 Km/h	
Traffic Flow: Traffic Control:  Dual Carriage Way Not Controlled			1	Traffic Volume: Moderate	
Type of Collis			Anyone conveyed by ambulance: Yes		

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SKC881C	Car	VOLKSWAGO N	GOLF GTI 2.0 DSG	White	Seriously Damaged	2
SKH4994H	Car		TIGUAN 1.4 TSI HL STD ROOF	Grey	Seriously Damaged	1
SMF4872M	Car	HONDA	JAZZ 1.3 CVT	Black	Slightly Damaged	1

Dotails of V	ehicle Insurance		2123 11511	
		Insurance No	Effective	Expiry Date
Venicle No.	Insurance Company	Hitotronico		





Report No. T/20220827/2083

Police Station Of Origin: Bukit Merah East N.P.C 391 New Bridge Road Police Cantonment Complex SINGAPORE 088762 Tel No: 1800-2369999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKH4994H	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210065422-01	16/07/2022	15/07/2023

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestriar	ns Injured: NIL		Use of Pe	Use of Pedestrian Crossing: NA		
Driver					DE UNIVERSE	
Name	MONG PUAY BOON, WILFRED		ID No		S7913754E	
Related Vehicle	NIL			Conta	ict No.	97465897
Hospital/Clinic	NIL			Class Drivin Licen Expir	g	Class; 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc		NIL		
No. of Days granted Medical Leave NIL			Degree o	f Injury	NIL	

## Brief Details.

On 27/08/2022 at about 1155hrs, I was driving my car (SKH4994H) along PIE towards Tuas along the first lane and the car (SKC881C) in front of me suddenly slowed down to almost a halt. I did not have time to react. I then realised I crashed my car into his car. The airbags of my car were deployed and the impact from it injured my left hand which caused it to suffer from scratches and bruising. Afterwards, I felt a hit from the back. A car (SMF4872M) rear ended me. Driver of SKC881C was conveyed to hospital. My car has an in-car camera which recorded both front and back footage of the incident. The SD Card was taken by TP Officer SGT3 T09700 Imran. My car was then towed. Thereafter, I was instructed by TP officers to lodge a Traffic Accident Report.





3 of 3 Report No. T/20220827/2083

Police Station Of Origin: Bukit Merah East N.P.C 391 New Bridge Road Police Cantonment Complex SINGAPORE 088762 Tel No: 1800-2369999

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: A / SGT 2 MUHAMMAD MUSTAQIM BIN ABBAS	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 27/08/2022 16:40
Officer In Charge Of Case: TP / GIT / SI CHONG GUAN FATT Contact No.: 65472077	Classification Of Case:
NP168	