# 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.

  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 05/09/2022 15:25 (SGT) Reported by Date of Accident 03/09/2022 10:50 (SGT) Exact Location of Accident Ang Mo Kio Ave 3, Singapore Additional Location Information OPP AMK MRT. Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SGD880Y

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LIM HIANG KUANG JIMMY NRIC No. S7118857D Email Address LIMJIMMY@OUTLOOK.SG Mobile Phone No (Phone) +65-91858008 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Camry

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 2487

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 2070121134

DRIVER

Name of Driver LIM HIANG KUANG JIMMY NRIC No S7118857D Date Of Birth 07/06/1971 Occupation Indoor

Date Of Driving Pass	09/11/1989		
Driving experience	32 YEARS AND 10 MONTHS		
Gender	Male		
Mobile Number	(Phone) +65-91858008		
Alt. Phone Number	-		
Email Address	LIMJIMMY@OUTLOOK.SG		
Address	BLK 2 HOUGANG ST 11 #09-02		
Address complement	-		
Postcode	538751		
Is the driver the policyholder?			
If No, Relationship of the Driver with the Insured	Yes		
	-		
Does Driver Own Other Vehicles?	No		
Vehicle Registration Number of Other Vehicle Owned by Driver			
Insurance Company of Other Vehicle Owned by Driver	-		
insurance Company of Other Vehicle Owned by Driver	-		
GENERAL INFORMATION OF THE ACCIDENT			
Type of Accident	Collision - Change/cross lane		
Weather Conditions	Clear		
Road Surface	Dry		
Tiodd Gallace	Diy		
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)	2		
Has the driver been approached by unknown person(s)	2		
soliciting/offering accident claims assistance?	No		
Translator's name	NO		
Translator's ID	•		
	-		
Translator's phone number	-		
Translator's email	-		
Original language used in the statement	-		
PASSENGER 1			
Name	WEE LEE		
Gender	Female		
DETAILS OF POLICE ACTION			
BETALLO OF TOLIOLATION			
Was the accident reported to the police?	No		
Was notice of intended Prosecution given?	No		
If yes, against whom?	-		
CIRCUMSTANCES OF ACCIDENT			
	ANG MO KIO MRT ON 03/09/2022 AT ABOUT 10.50AM, AS I WAS		
	ONTO MY VEHICLE LEFT PORTION. WE ALIHTED, EXCHANGE		
PARTICULARS AND LEFT THE SCENE.			
ATTACHMENT(S)			
Are accident photos available for attachment?	Vac		
Was there any video captured by Car Camera?	Yes		
vvas uicie any viuco captureu by Car Callleta?	No		
DETAILS OF OTHER	VEHICLE PROPERTY 1		
DETAILS OF OTHER	VEHICLE PROPERTY 1		
Vehicle Registration Number			

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	PEH BENG GUAN
Contact Number	(Phone) +65-81684813
Address	_
Address complement	=
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2



#### 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 Authorised 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.
- 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.
- 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.
- By the lodgment 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:
  - 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, involves, 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Lights & Time:

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signatur

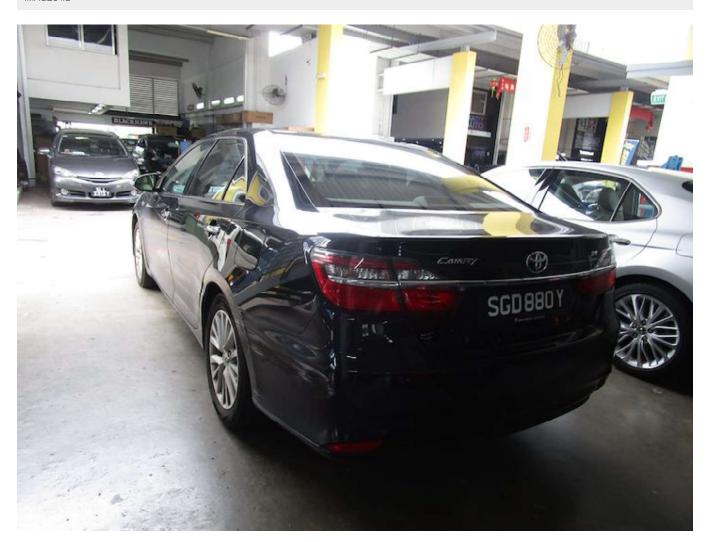
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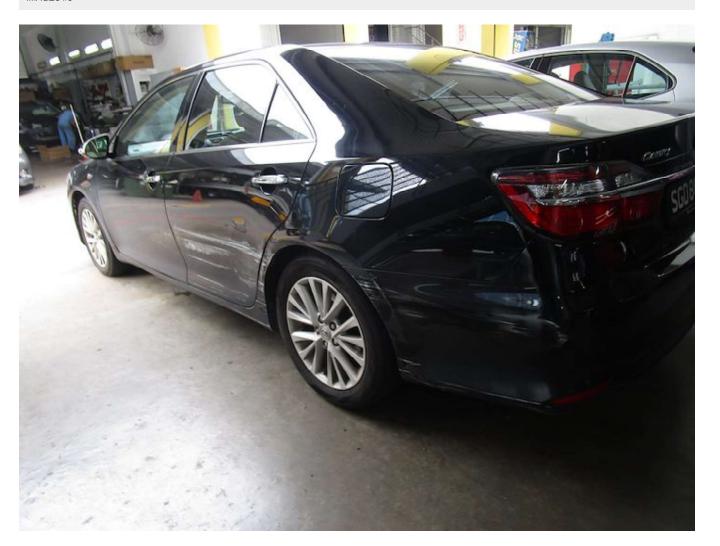
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ECLARATION				
We declare the foregoing partic	ilars are true in every resp	ect.		
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olicyholder's Signature	Driver's Signature		Reporting Ce	rtre Personnel's Signature
ste & Time: \	(If driver is nothing pr	oltcyholder)	Name:	
	Date & Time:		NRIC/FIN No.	

GDI/MCShetchPlanForm\_V\$











## CERTIFICATE OF INSURANCE

#### AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Lim Hiang Kuang Jimmy Vehicle No. : SGD880Y Period of Insurance : 20 Sep 2021 To 19 Sep 2022 Policy No. : 2070121134-01

Engine No. : 2ARU332392 Endorsement No.

: MR053AK5004011230 Chassis No. Issued Date : 20 Aug 2021

#### ABOUT THE COVER

Make/Model : TOYOTA CAMRY 2.5

Engine Capacity/Tonnage : 2,487.00 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
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 far social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tution, chining test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with harry 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 1987

### EXCESS

Section 1 Fire - \$0 Own Damage - \$1000 Theft - \$0 Flood Cover - \$1000

#### Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Lim Hiang Kuang Jimmy - \$1000 (Own Damage), \$1000 (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 Reparting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hottine 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 iTunes or Google Play.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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. 169), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504389000

DS INSURANCE AGENCY

AIG Asia Pacific Insurance Pte, Ltd.

This computer generated document does not require a signature.

131 PASIR RIS GROVE #06-16

SINGAPORE 518130

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.