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 13/09/2022 13:39 (SGT) Reported by Owner Date of Accident 12/09/2022 16:40 (SGT) Exact Location of Accident Lor 23 Geylang, Singapore Additional Location Information LOR 23 GEYLANG LOT.25 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

No - Reporting only

Vehicle Registration Number **SLJ4023M**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LESLIE NG ENG HIONG NRIC No S7413494G Email Address leonardnjl@gmail.com Mobile Phone No (Phone) +65-93835613 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Corolla 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?

Vehicle Category Private car Transmission Auto CC 1600

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210137598

DRIVER

Name of Driver NG JOO LING NRIC No S0187400D Date Of Birth 26/05/1945 Occupation Indoor

Date Of Driving Pass 14/04/1970 Driving experience 52 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-91886536 Alt. Phone Number Email Address leonardnjl@gmail.com Address BLK 118 CLEMENTI ST 13 #02-93 Address complement Postcode 120118 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Parent 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 Collision - Head on 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? No Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SHF33D

Vehicle Registration NumberSHF33DVehicle ManufacturerToyotaVehicle ModelPriusVehicle Variant-Vehicle Colour-Vehicle CategoryTaxiName of DriverTAN WEE MENGNRIC NoS1629096C



Contact Number	(Phone) +65-96192812
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.
- 2. 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 companies.
- 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' law yers/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 Purposes.

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident
was about to exit from Parking lot 425. 1 looked
out and saw the taxi with its hazard light on.
I thought he was going to use my lot I to park as
the whole lorong of bareing loss were occupied.
I inched my way out but realised too late that
the cab driver was still forward moving. He hit my vehicle on my front right. His vehicle suffered a
vehicle on my front right. His vehicle suffered a
Dut and saw the laxi with its hazard light on. I thought he was going to use my lot to park as the whole lovong of barking lots were occupied. I inched my way out but realised too late that the cab driver was still forward moving. He hit my vehicle on my front right. His vehicle suffered a scratch. My vehicle was damaged on the front door on at the bottom.
mathe botton.
Declaration
We declare the foregoing particulars are true in every respect.

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

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre

Personnel



CERTIFICATE OF INSURANCE

PATE STATE OF THE SECOND

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Leslie Ng Eng Hiong Vehicle No. : SLJ4023M Period of Insurance : 09 Dec 2021 To 08 Dec 2022 Policy No. : 7210137598 Engine No.

: 1ZRY346869 Endorsement No.

Chassis No. : MR053REH104562372 Issued Date : 25 Nov 2021

ABOUT THE COVER

: TOYOTA COROLLA ALTIS 1.6 Engine Capacity/Tonnage : 1,598.00 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*:

Make/Model

at The Policy's littler
(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 \$553,000 as "beexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has lines than 2 years' driving experience.

Age Condition : 40 years old and above Mileage Condition : Unlimited Mileage

Limitation as to use*

Loss of Use 1500cc - 1600cc Optional

Use only for social, demostic and pleasure purposes and for the Policyholder's bosiness.
This Policy does not cover use for this or reward, driving feator, driving test, racing, pace-making, reliability that or speed-testing, the carriage of goods other than samples in connection with Most Trade.

Displays on the for any purpose in connection with Most Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Ripod Transport Act, 1987 (Malaysia) and Road Transport (American Indiana).

EXCESS (

Section 1 Fire - \$0 Own Damage - 50 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - S0

Windstroan : \$100

Named Driver and Excess (where applicable)

Loslie Ng Eng Hiong

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

Approved Reporting Centrest AIG Authorised Repairers (For claims related repairs) Any accident repairs to the Vehiclo must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehiclo in Singapore. You have the option of having the accident repairs carried out at the Sole Agent's workshop For other Approved Reporting Centrest/AIG Authorised Repairs; (News contact our 24-hour accident emergency hotline at +65 6336 6200. Alternatively, You may refer to AIG woods www.aig.sg or AIG SG Mobile App. Simply search and dewnload "AIG Simply search and dewnload" AIG.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

16We harreby centry that the policy for which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Rosks and Compensation) Act (Cop. 189). Part IV of the Road Transport Act, 1807 (Malaysia), Road Transport Actainsport Actainsport Actainsport Actainsport (Amendment) Act 2019 and Motor Vehicles (Third Party Rises) Roles, 1079 (Malaysia).

CONTEGO CONSULTANTS PTE. LTD.

2 ESSEX RD #11-02 LION TOWERS

SINGAPORE 309330

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte, Ltd.

This computer generated document does not require a signature.

Ny Eng Hong Leste

≪ Reply all
✓

□ Delete
◇ Report
✓
…

Authorization to drive SLJ4023M

CAUTION: This email originated from an external party outside ComfortDelGro. Do not click on links or open attachment unless you know the sender.

Hi,

Please be informed that my father, Ng Joo Ling, NRIC S0187400D, is authorized to drive my Toyota Corolla SLJ4023M.

Regards, Leslie Ng Eng Hiong S7413494G 93835613























