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TP Insurer:	Ass't Report	by Fax / Hand t	o Owner/Wksp	1	age death Manager to your control of the control of	
Preferred Wksp / INC Assign Wksp / QW	: (Tel:	Fax:		
TP Particulars: Veh No:	SLX 32496	INC ()/Non-INC (j		
Owner / Driver: (Tel:)	
Policy No: (Period: ()	Cover Type: (
Confirmed by : (Date:	Time:) 1	
Insured/Driver Liability: (%) [Note-Est. Status	visit manual man		P; 50-10070]	
Year of Registration: () Warranty: YES () ON \()	Asserted to the same of the sa		
Excess: (S) Loading	: \$1,000 () / \$2,00	00 ()	-	A SECURITY OF STREET,	A the second of	
General Remarks:-						
() Walk-In Customer : Customer	's information strictly C	Confidential & S	trictly NO rater of	repairer.	** ** ** *** ** ** ** ** ** ** ** ** **	
() Total Loss Case : to e-mail I	nsurer URGENTLY		-	come make in the agency payments.		
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SN09229J000G-03 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 19/09/2022 18:55 (SGT) SUBMITTED BY: IRFAN VERSION: 4 (22/09/2022 11:04 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 19/09/2022 18:55 (SGT) Reported by Driver 16/09/2022 17:35 (SGT) Date of Accident **Exact Location of Accident** Singapore JUNCTION OF TAMPINES AVE 5 AND TAMPINES AVE 4 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SMJ688J**

INSURED/POLICYHOLDER

No Is company? JAYANTA NG WEI QIANG Name Of Registered Owner NRIC No SXXXX788C TANWENLI.JASMIN@GMAIL.COM **Email Address** Mobile Phone No (Phone) +65-96207345

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Subaru Model Forester Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

Auto 1995 CC

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company 1900013176-03 Policy Number / Cover Note Number

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TAN WEN LI JASMIN SXXXX206C 23/07/1987 Indoor

Private use

Private car

No - Claiming third party

Date Of Driving Pass 12/04/2014 Driving experience 8 YEARS AND 5 MONTHS Gender Female Mobile Number (Phone) +65-90629590 Alt. Phone Number TANWENLI.JASMIN@GMAIL.COM **Email Address** Address BLK 163 TAMPINES ST 12 #11-269 Address complement Postcode 521631 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? No 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 Side Swipe Weather Conditions Clear Road Surface Dry 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? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 2 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 PASSENGER 1 JAYANTA NG WEI QIANG Name Gender Male DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 (Fax) +65-65474900 Alt. Police Station Phone No 10 Ubi Avenue 3 Singapore 408865 Police Station Address Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

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

Yes No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLX3249L Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour 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)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person TAN WEN LI JASMIN Gender Female Phone No (Phone) +65-90629590 Address BLK 163 TAMPINES ST 12 #11-269 Address Complement Post Code 521631 Approximate Age Years Old 35 Injuries Sustained BACK NECK SHOULDER PAIN Injured person in which vehicle? SMJ688J Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person JAYANTA NG WEI QIANG Gender Male Phone No (Phone) +65-96207345 Address BLK 163 TAMPINES ST 12 #11-269 Address Complement Post Code 521631 Approximate Age Years Old 45 Injuries Sustained BACK NECK SHOULDER PAIN Injured person in which vehicle? SMJ688J Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

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.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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' 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 & Time	Driver's Signa & Time		ver is not the policyh		Personnel	19/09 Reporting Centre
Sketch Plan		Before	Junition of	Tamines	Aves and	Tampines Ave 4
			BA			(A) SMJHFT (B) SLX 3249L
	9	1	1 1	P .	111	

Describe Circumstances of the Accident
and.
attached 19 Report. The 220918 For 4
attacvico
20918 7054
7 2020
Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your
your own comprehensive policy. Please check your policy for more information.

Declaration

I/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





1 of 4

Report No. T/20220918/7054

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time 18/09/2022		de:	Vide Report No.:	Station Diary No.:		
Informant'	s Particul	ars		124155		
Name of In TAN WEN		N	Address: 163 TAMPINES STREET 12 #11-269 SINGAPORE 521163			
ID Type / ID No.: NRIC NO / S8722206C			Contact No.: Home/Office:	Mobile: 90629590		
Nationality: SINGAPORE CITIZEN			Email: tanwenli.jasmin@gmail.com			
Sex: Female	Age: 35	Date of Birth: 23/07/1987	Type of Informant: Driver			
Race: Chinese			Language: English	Institution /	School Name:	
Occupation:			Driving Licence Information: Class: Date of Expiry:			

General Informati	on of the Accident					
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 16/09/2022 17:35	5	Type of Location: X-Junction
Location:						
TAMPINES AVEN	NUE 5					
Weather:		Road S	Surface:		Road	Speed Limit:
Clear		Dry				
Traffic Flow:		Traffic	Control:		Traff	ic Volume:
Two Way Traffic Light - Working Heavy					/y	
Type of Collision: Between Moving	Vehicles - Side Swipe	- Same	Direction			ne conveyed by ulance:

Color	Conditio	
		No of
-		0
	Seriously	1
	-	Seriously Damaged





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 4 Report No. T/20220918/7054

CONTINUATION OF REPORT

Details of Perso	on Involved			11.64	AFA	
Any Pedestrian I	nvolved: No			ACT 255		
No. of Pedestrian	ns Injured: NIL		Use of Pe	destriar	Cross	sing: NA
Passenger		美国工作经验		41.6		
Name	JAYANTA NG WEI QIANG			ID No.		S8741788C
Related Vehicle	SMJ688J (Car)			Contact No.		96207345
Hospital/Clinic	W Y TEH FAMILY CLINIC AND SURGERY			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	17/09/2022		Date	1 7	NIL	
No. of Days gran	ted Medical Leave	04	Degree of		Serio	us
Driver	开放了 医电流压度电池	47 李基安传播》		111	5-2 fr	
Name	TAN WEN LI, JASMII	N		ID No.		S8722206C
Related Vehicle	SMJ688J (Car)			Contact No.		90629590
Hospital/Clinic	W Y TEH FAMILY CLINIC AND SURGERY			Class Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL
Date	17/09/2022		Date	. ,	NIL	
No. of Days gran	ted Medical Leave	05	Degree of		Serio	us

Brief Details.

On 16/09/2022 at abut 5.35pm, I was driving my vehicle, SMJ688J, with my husband - Jayanta Ng Wei Qiang (S8741788C) as the passenger. Our car was travelling along Tampines Avenue 5 in the second lane from the right and I had stopped at the traffic light junction as we were waiting for the right turn arrow to turn green so as to turn right towards Tampines Avenue 4. When the green right turn arrow came on, I proceeded to drive ahead but all of a sudden, I felt a very strong impact coming from the left side and realised that a vehicle, SLX3249L, had cut into our lane and collided into our car from the left, where my husband was seated at. Immediately after the accident, our car started leaking fluid profusely.

The sudden and hard impact had caused my right shoulder to hit against the car door while my husband had hit his head against the car door. We were also thrown forward and backward in our seats. After the accident, I experienced pain and discomfort in my shoulders, back and neck, as well as some tingling/numbing sensation in my right hand and fingers. My husband had pain and discomfort in his head, back, neck and shoulders so we went to see a doctor at W Y Teh Family Clinic and Surgery the next morning and we received five and four days of MC respectively.





3 of 4

Report No. T/20220918/7054

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

4 of 4 Report No. T/20220918/7054

CONTINUATION OF REPORT

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Sketch	Dlan
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Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/09/2022 23:06
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
NP168	

SINGAPORE ACCIDENT STATEMENT

Accident Date: 16 VA 2022 Time: 1335hr (hh:mm) 24 hr format
Location Junition of tampines Are 5 and tampines Are 4
The state of the s
Vehicle Number SmJ 6881
Insured Name JAYANTA NG WEI QIANG
NRIC/FIN 58741788C Contact Number 9680 7345
Make Subaru Model FORESTER 201-L CV1 AWD SR
Are you claiming under your own insurance policy for repair to your vehicle?
() Yes If No,Pls select: () Third Party () Reporting
Insurance Company MG
Type of Policy () Comphensive () Third Party Fire & Theft () TP Only
Policy Number (900013176 - 63
Name of Driver TAN WENLI, JASMIN ()Same as Insured
NRIC/FIN 587>>>06C Contact Number 906> 9590
Date of Birth 33-07-1967
Driving Pass Date 12 - APR - 7014
Occupation () Indoor () Outdoor
Gender () Male () Female
Email Address tanventi-jasmin @ gmail. Com ()NO EMAIL
Email Address tanwenti-jasmin (Grail. Com ()NO EMAIL Address of Driver BLK 163 Tampines STREET 12 #11-269 5 (528/63)
(3-165)
Was driver an employee of the Insured's Company? () Yes No
If No, Relationship of the Driver with the Insured
() Owner () Spouse () Friend () Relative () Children () Sibling
Does the Driver Own Any Other Vehicle? () Yes () No
If Yes, Vehicle Registration Number of Driver's Own Vehicle
Insurance Company of Driver's Own Vehicle
Weather Conditions (/) Clear () Raining () Others
Road Surface () Dry () Wet () Others
Was any foreign vehicle involved in this accident? () Yes () No
Was anybody injured in the accident? (/) Yes () No
If yes, injured detail 2 PAX (BALL MCKI Mander Phin)
Was there any video captured by Car Camera? () Yes () No
Was the Accident reported to the Police? (/) Yes () No If yes attach police report
DETAILS OF 3 rd party Name / Nric Contact
Veh B SLX3249L
Veh C
Veh D Veh E
Ven E Veh F
v C11 1

2 paxs including driver (M) Jayanta NO Wei glang



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Jayanta Ng Wei Qiang

Period of Insurance

: 31 Jan 2022 To 30 Jan 2023

Engine No.

: FB20YE54614

Chassis No.

: JF1SJ5KC5JG112609

Vehicle No.

: SMJ688J

Policy No. Endorsement No.

: 1900013176-03 : 000000000431694

Issued Date

: 03 Feb 2022

ABOUT THE COVER

Make/Model

: SUBARU Forester 2.0i-L

Engine Capacity/Tonnage : 1,995.00 CC

NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2019

Insuring with COE/PARF : Yes

Driver Restriction 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 needs the specified age condition.

You have to pay an additional sum of \$\$\$3,000 as: "inexpenseded Driver Excess" (10RT) if You ere or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience

Age Condition

: 30 years old and above

Mileage Condition

: Unlimited Mileage

Limitation as to use* :

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

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

Business or use for any purpose is connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Unitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1967 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under three headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Fisod Cover - \$800

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Jayanta Ng Wei Grang - \$800 (Own Damage), \$800 (Flood Cover)

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

1 Motor Image Enterprises Pte Ltd. Add. 19 Lorong 8 Toa Payoh Singapore 319255 64170100

For other: Approved Reporting Centres/AliG Authorised Repairers, please contact our 24-hour accident emergency holline at +65-6338-6200. Alternatively, you may refer to AliG website sewicarg ag or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

Whe 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. 188). Part PV of the Risks Transport Act, 1967 (Malaysia).

TAN CHONG CREDIT SUBARU-MIT

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

RINGAPORE \$89823

Underwritten by AJG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

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