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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
- 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 Point by insulance companies is not an admission of poincy nability of the part of the insulance 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

17/11/2022 16:52 (SGT) 17/11/2022 09:06 (SGT) 17 Woodlands Link, Singapore 738727 CARPARK Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMS6153Z

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No

No SEOW WEI SXXXX420J seow77wei@gmail.com (Phone) +65-96668327

Alternative Phone No VEHICLE PARTICULARS

Manufacturer Model Variant

BMW 320i

Exact purpose for which vehicle was being used at time of

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

Vehicle Category Transmission CC

Private use

No - Claiming third party Private car

Auto 1998

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd. 7220003119

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

SEOW WEI SXXXX420J 17/10/1997 Outdoor

Date Of Driving Pass 28/12/2007 Driving experience 14 YEARS AND 11 MONTHS Gender Male Mobile Number (Phone) +65-96668327 Alt, Phone Number **Email Address** seow77wei@gmail.com Address 32 FERNVALE LINK #20-09 Address complement Postcode 797531 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 Hit and run / Vandalism / Damaged whilst parked 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? Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20221117/7020 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBH4042L
Vehicle Manufacturer Vehicle Model -



Vehicle Variant	
Vehicle Colour	-
Vehicle Category	- -
Name of Driver	Commercial vehicle
Contact Number	(-
Address	-
Address complement	-
Postcode	(= 1
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passanger (Including Driver)	-
No. of Fassenger (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 Authorised Driver.
- 3. Information provided must be as <u>truthful</u> and <u>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)

l 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.

(n 1

(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.

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Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyho		Witnessed b	by Reporting Centre
Sketch Plan		17. WOOL	1 Grups	2dx1K	
HH	Soon Hong	Eating House	A 2	SMS	61537
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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





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20221117/7020

REPORT OF A TRAFFIC ACCIDENT

Date/Time 17/11/2022		ade:	Vide Report No.:		Station Diary No.:
Informant	s Particu	ars			CONTRACTOR OF THE PROPERTY OF
Name of In SEOW WE			Address: 32 FERNVALE LINK #20-09	RE 797531	
ID Type / II NRIC NO /)J	Contact No.: Home/Office:	Mobile:	96668327
Nationality SINGAPOR		N	Email: SEOW77WEI@GMAIL.COM		
Sex: Male	Age: 45	Date of Birth: 17/10/1977	Type of Informant: Driver		
Race: Chinese		•	Language: English	on / School Name:	
Occupation:			Driving Licence Information: Class: 3 Date of B		Expiry:

General Infor	mation of the Accide	-1		
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 17/11/2022 09:05	Type of Location: Car Park
Location:				
WOODLAND	S LINK			
Weather: Clear		Road Surface:		Road Speed Limit:
Traffic Flow:	raffic Flow: Traffic Control: Traffic Volum			Traffic Volume:
Type of Collis				Anyone conveyed by ambulance:

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Conditio	No of	
GBH4042L	Van					0	
SMS6153Z	Car	BMW	320I LED HL	White	Slightly Damaged	0	

Details of V	/ehicle Insurance	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





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

2 of 3 Report No. T/20221117/7020

CONTINUATION OF REPORT

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
SMS6153Z	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7220003119	10/01/2022	09/01/2023			

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestriar	ns Injured: NIL		Use of Peo	destrian	Cross	ing: NA
Driver		Section Control			0.000	
Name	SEOW WEI	SEOW WEI				S7738420J
Related Vehicle	SMS6153Z (Car)			Contac	ct No.	96668327
Hospital/Clinic	NIL			Class of Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 17.11.2022 at about 0906hrs. My vehicle (SMS 6153Z) was parking at 17 Woodlands Link Car Park Lot. When I returned to my car, I discovered that it had been damaged on the front right side. At that time, there was a van (GBH 4042L) near parking lot of my vehicle, but the driver did not get out of the vehicle to communicate when he saw us coming. Shorty, I saw the record from my in-car camera, is the van (GBH 4042L) was reversed and parked to near parking lot of my vehicle. At the same time, he collided into the front of my vehicle. Then he left as if nothing happened.





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

3 of 3 Report No. T/20221117/7020

CONTINUATION OF REPORT

Sketch Plan					
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: 17/11/2022 12:35
Officer In Charge Of Case: TP / TPIB / SUFIYAN BIN KHAIRI Contact No.: 65476148	Classification Of Case:
NP168	

Date of Accident	: 17-11.2002 Accident Time: 09:06hrs (24-HR-Format)
Who reported the accident?	: Owner / Driver / Both Soon Hong Earling Flores
Accident Place	: 17 Woodlands Link S 738727 (Carpark)
Vehicle No (Car Plate No)	: SMS 61532 Make/Model: BHW 3201 2.0
Insurance Company	: A16 Policy No: 1220003119
Fleet Policy	: YES/NO
Type of Coverage	: Comprehensive / Third Party / Third Party Fire & Theft
Name of Owner / IC No	: Seow Wei (57738420J)
Owner Contact No	: 9646 8327 Owner's HpCompany Tel
Driver Name / IC No	: As Above
Driver's Date of Birth	: 15 Mg Driver's License Pass Date: 28 Dec 2007
Relationship of Driver	: Spouse / Parents / Children / Sibling / Employee / Other: Owner
Driver's Address	: 32 Fernvale Link #20-09 5 797531
Driver's Contact No	:1)
Driver's Occupation	: INDOOR / OUTDOOR (e.g. working inside or outside office)
Email Address	: Seow 77 wei @ gmail.com
Weather & Road Surface	: CLEAR & DRY / RAINING & WET / AFTER RAIN & WET
Reporting Type	: Reporting Only / Claim Third Party / Claim Own Insurance
Number of Passenger(include Driver)	:N _o
Was ther any video footage?	: YES / NO
	: Private Use / Private Hire / Work Purpose
Any injury (If Yes, Pls State)	i No
Other Pa	arty Driver's Particular (if any)
VEHB: GBH 4647L	Name & Contact No:
VEH C:	Name & Contact No.
VEH D :	Name & Contact No:
	Name & Contact No:

*NEW - Passenger's Name & Gender:

MMV.



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder

: SEOW WEI

Period of Insurance

: 10 Jan 2022 To 09 Jan 2023

Engine No.

: F2443560B48B20A

Chassis No.

: WBA5F32040FJ17593

Vehicle No.

: SMS6153Z

Policy No.

: 7220003119 Endorsement No.

Issued Date

: 09 Jan 2022

ABOUT THE COVER

Make/Model

: BMW 320I 2.0 [Sedan]

Engine Capacity/Tonnage: 1,991.00 CC Driver Restriction

: NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2020

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

a) The Policynologer 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 S\$\$3,000 as "Inexperienced Driver Excess" ("IDR") if You are 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 tuition, driving test, racing, pace-making, reliability trial 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.

Loss of Use 1500cc - 1600cc Optional

* 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 - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

SEOW WEI

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 Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: TOKYO CENTURY LEASING (SINGAPORE) PTE 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, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0502019000

KUA YONG HUAT ELVIS

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

371 ALEXANDRA ROAD #10-08 AIA ALEXANDRA SINGAPORE 159963 SP-GDGROUP

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.