SB0K22BL0005 / Borneo Motors Pte Ltd ENTRY DATE & TIME: 21/11/2022 13:57 (SGT) SUBMITTED BY: Ashlyn Chng VERSION: 1 (21/11/2022 13:57 (SGT))

# **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 21/11/2022 13:57 (SGT) Reported by Date of Accident 20/11/2022 11:50 (SGT) Exact Location of Accident Singapore Additional Location Information TEMASEK AVE JUNCTION Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SMS6309S

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner HO WAN LENG NRIC No S2698548Z Email Address WLHO@OPTIMALCONSULTING.COM.SG Mobile Phone No (Phone) +65-98362183 Alternative Phone No

# VEHICLE PARTICULARS

Manufacturer Lexus Model Es250 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? Yes Vehicle Category Private car Transmission Auto CC 2500

## **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210048815-01

## DRIVER

Name of Driver HO WAN LENG NRIC No S2698548Z Date Of Birth 23/09/1963 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	29/12/2001 20 YEARS AND 11 MONTHS Female (Phone) +65-98362183 - WLHO@OPTIMALCONSULTING.COM.SG 20 NEWTON ROAD #21-05 - 307953 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Change/cross lane Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  Translator's name  Translator's ID  Translator's phone number  Translator's email  Original language used in the statement  PASSENGER 1  Name  Gender  DETAILS OF POLICE ACTION	NAOMI DOWDY Female
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEME	ENT.
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes Yes
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer	SHB5159M -

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	TOH CHENG HUI
NRIC No	S1776751H
Contact Number	-
Address	BLK 223A SUMANG LANE #17-201
Address complement	-
Postcode	821223
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 <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 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:

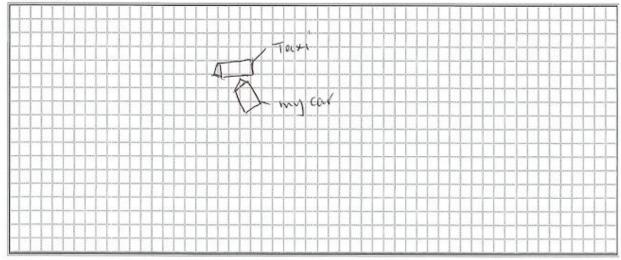
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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")
- (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.

Policyholder's Signature / Date & Time

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

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

Sketch Plan



dh a Olas	
ribe Circi	umstance of the Accident
116	2012 November 2022, I was drive towards Temps
1.	20th November, 2022, I was drive towards Temperence. It the juncture of Temper Avenue, I do to the stip road, a taki burped / hit my care then braked in front of my car.
, YVV	ince in the factor of females from , I do
In	to the sup room, a tax, superithis my car
14	e then braked intrint of my car.
li	1/11/2022 - 1150am
	* 1

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Daje & Time

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

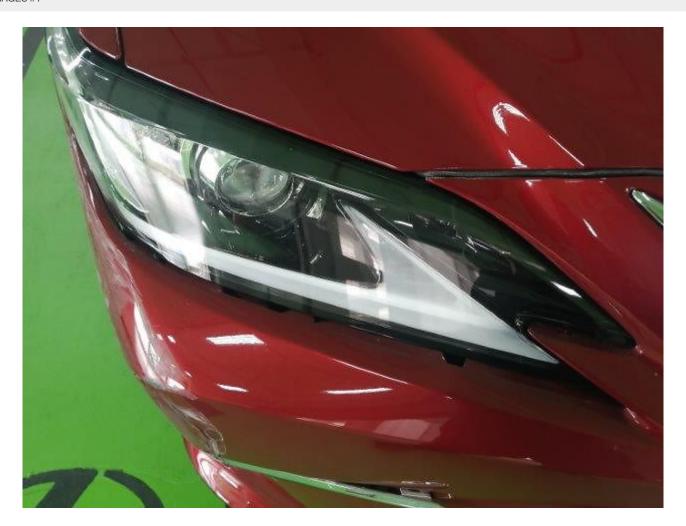
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

2









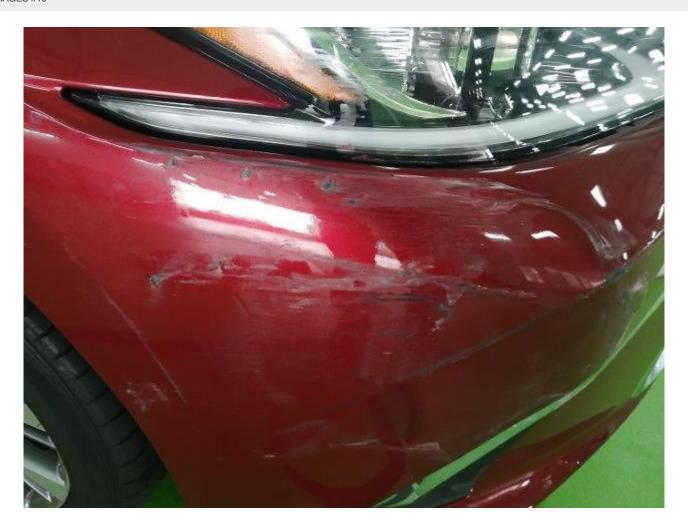






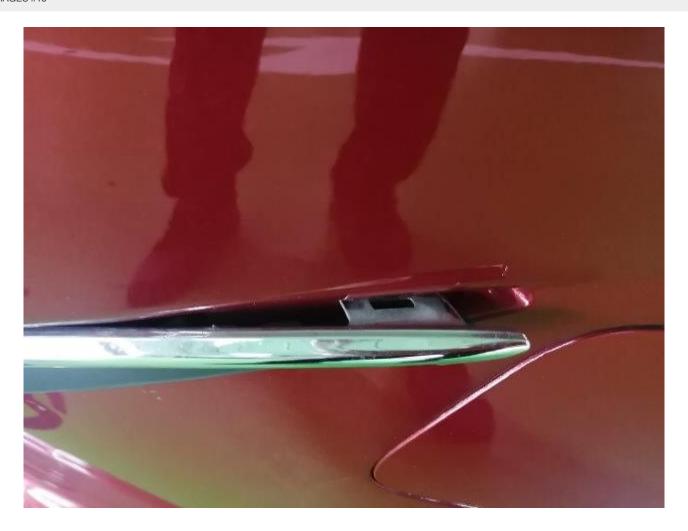


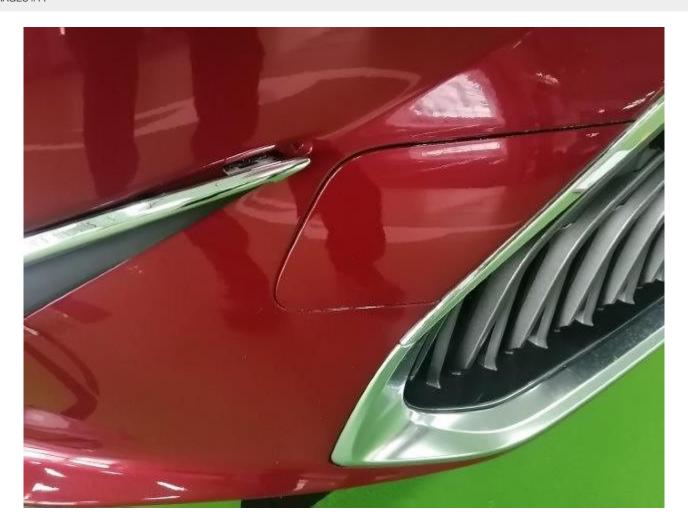


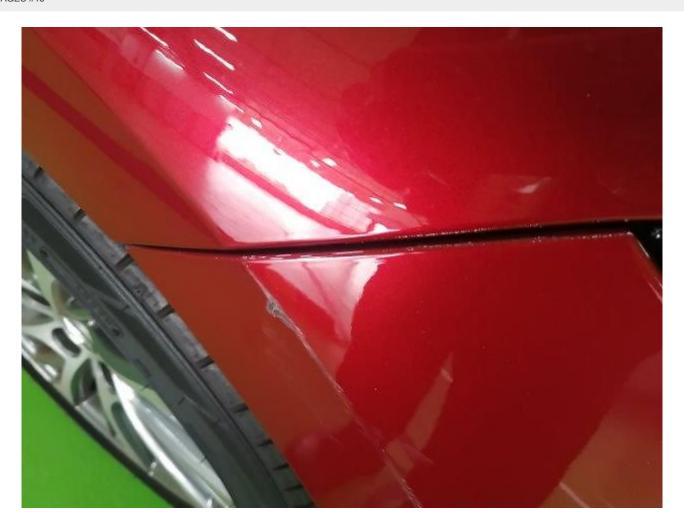


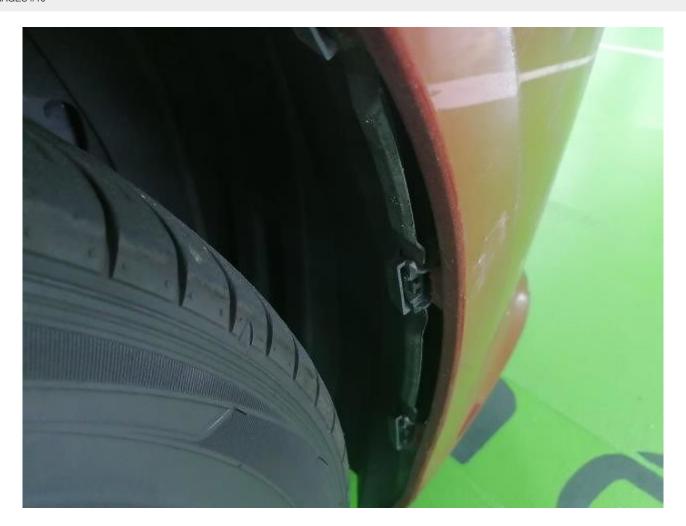


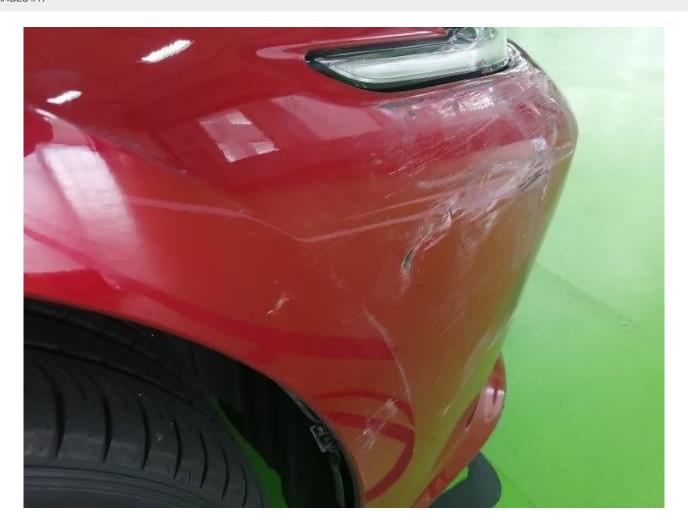






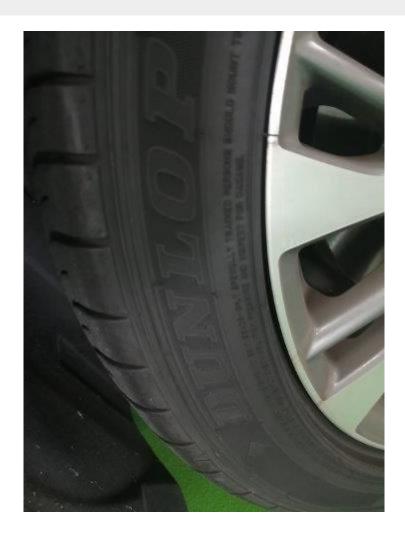






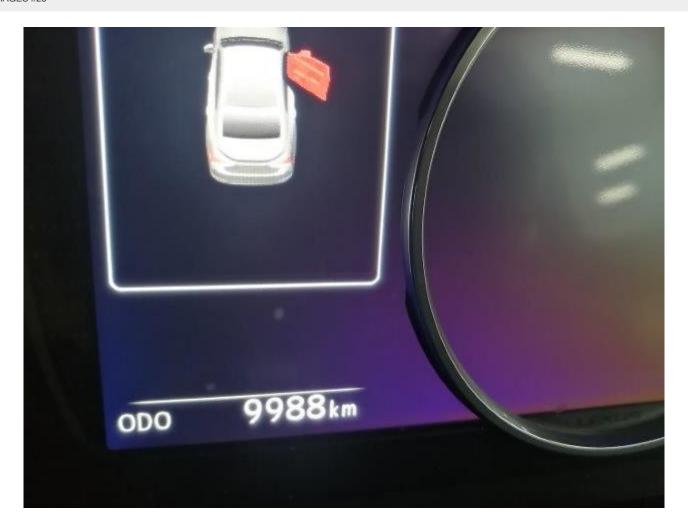




















**AUTOPLUS PRIVATE VEHICLE** 

Name of Policyholder : HO WAN LENG

Vehicle No. : SMS6309S Period of Insurance : 12 Jun 2022 To 11 Jun 2023 Policy No. : 7210048815-01

Engine No. : TBA123 Endorsement No. :

Chassis No. : ABC123 **Issued Date** : 04 May 2022

ABOUT THE COVER

Make/Model : LEXUS ES250

Engine Capacity/Tonnage : 2,494.00 CC Sum Insured : Market Value First Year of Registration : 2020 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/sihe meets the specified age condition.

You have to pay an additional 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.

Age Condition : All Age Condition Mileage Condition

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 Motor 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 - 50 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

HO WAN LENG - \$800 (Own Damage), \$800 (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 (rejistration 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, Blease contact our 24-hour accident emergency hottine at +65 5338 5200. Alternatively, You may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from Tunes or Google Play.

# **IMPORTANT NOTES**

Hire Purchase Company/Employer's Loan: STANDARD CHARTERED FINANCE (S) LTD (Old Name)

If We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Molor 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).

0000064000

DIRECT CLIENTS 01.4.95

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

immediate assistance after an accident

AIGSGMOBILEAPP

24-HOUR AIG AUTO HOTLINE: +65 6338 6200 IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES.

What can the 24-hour AIG Auto Emergency Hotline provide for you?

What should I do in the event of an accident?

Keep calm and move your car to a safe place

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

: Unlimited Mileage



# MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	HO WAN LENG	
VEHICLE NUMBER	: SMS 6309 S	
DATE/TIME OF ACCIDENT	: 20/11/2002, 1150 AM	
PLACE OF ACCIDENT	: 20/11/2022, 1150 AM : 7EM ASEKAVENUE	
THIRD PARTY VEHICLE (IF ANY)	: SHB 5159M	
*********	我我我们的我们的我们的我们的我们的我们的我们的我们的我们的我们的我们的我们的我们	
WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?  WOOLERTON PARK TO CONRAD HOTEL		
DID YOU DRINK ANY ALCOHOLIC THE ACCIDENT? IF YES, DID TH ANALYSER TEST ON YOU? IF YES	C DRINKS BEFORE YOU DRIVE ON THE DAY OF IE TRAFFIC POLICE CONDUCT ANY BREATHE-, WHAT IS THE RESULT?	
WHAT IS THE TYPE OF COLLISIO TO ALL VEHICLES INVOLVED?	ON AND THE EXTENSIVENESS OF THE DAMAGES	
WERE YOU OR YOUR PASSENGE WERE YOU TAKEN TO THE TRAF	ER/S INJURED? IF INJURED, WHICH HOSPITAL? FIC POLICE FOR INVESTIGATION?	
Norme: HU WAN LENZ		

AIG Asia Pacific Insurance Pte. Ltd. AIG Building 78 Shenton Way #07-16 Singapore 079120 Tel: 6419 3000

I Affirmed The Above Information Is Given To My Best Knowledge.