

## 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 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.
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 .....	19/12/2022 09:45 (SGT)
Reported by .....	Both
Date of Accident .....	18/12/2022 12:28 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	233 ANG MO KIO AVE 3, CARPARK AMA13
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMX7374U
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	OH HAN PENG
NRIC No .....	S1701276B
Email Address .....	hanpeng65@gmail.com
Mobile Phone No .....	(Phone) +65-96649461
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Nissan
Model .....	Serena
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? .....	Yes
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1198

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7210009833

#### DRIVER

Name of Driver .....	OH HAN PENG
NRIC No .....	S1701276B
Date Of Birth .....	07/11/1965
Occupation .....	Indoor

Date Of Driving Pass .....	15/08/1988
Driving experience .....	34 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96649461
Alt. Phone Number .....	-
Email Address .....	hanpeng65@gmail.com
Address .....	APT BLK 764, CHOA CH KANG NORTH 5, #08-287
Address complement .....	-
Postcode .....	680764
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 .....	Collision - Cross Junction
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? .....	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) 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

Name .....	CHNG KIM TEE
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### 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 .....	SJQ4522B
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) .....	-

## SKETCH PLAN

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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' 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.

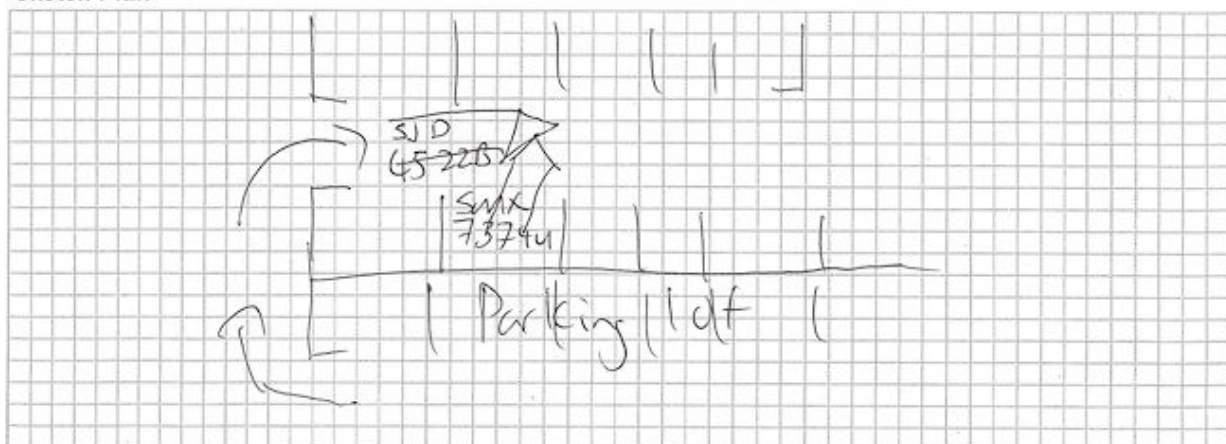
Policyholder's Signature / Date & Time

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

TC AutoClinic Pte Ltd  
1 SIXTH LOK YANG ROAD  
SINGAPORE 828099  
TEL: 6262 2212  
FAX: 6262 3092

Witnessed by Reporting Centre Personnel

## Sketch Plan



## Describe Circumstances of the Accident

As I was coming out from parking lot (A113), Vehicle No. SJQ 4522B making a U-shape turn. As I was 3/4 way out, Vehicle No. SJQ 4522B come straight after turn right on my vehicle. Hitting my front bumper & result in damaging the bumper.

## 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

TC AutoClinic Pte Ltd  
1 SIXTH LOX YANG ROAD  
SINGAPORE 628099  
TEL: 6282 2212  
FAX: 6282 3092

Witnessed by Reporting Centre Personnel





















































# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Oh Han Peng  
**Period of Insurance** : 27 Jan 2021 To 26 Jan 2023  
**Engine No.** : HR12211192K  
**Chassis No.** : JN1EBAC27Z0000901

**Vehicle No.** : SMX7374U  
**Policy No.** : 7210009833  
**Endorsement No.** :  
**Issued Date** : 08 Feb 2021

### ABOUT THE COVER

**Make/Model** : NISSAN Serena E-Power  
**Engine Capacity/Tonnage** : 1,198.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2021  
**Insuring with COE/PAF** : 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 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

\* 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)

Oh Han Peng - \$800 (Own Damage), \$800 (Flood Cover)

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

- 1.TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
- 2.TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212
- 3.Autolution Industrial Add: 18 Ubi Road 4 Singapore 408623 64509666
- 4.Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
- 5.Tan Chong Motor Sales Add: 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

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](http://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: DBS BANK LTD

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).

0500610536

TAN CHONG CREDIT PTE LTD - TBL

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

SSCNMD