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Owner / Driver: (	Tel:	}	Wilderstein Andrick
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1) Apply for Transport Allowance ( ) / Courtesy Car (	)		
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SN0823130009 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 03/01/2023 20:03 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (03/01/2023 20:03 (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

online in 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

03/01/2023 20:03 (SGT) Driver 27/11/2022 11:30 (SGT) Maju Ave, Singapore OPEN SPACE CAR PARK Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number

SGA2788J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

**Email Address** Mobile Phone No Alternative Phone No No CHOO CHIEW MOOI SXXXX028A jovinan.jm@gmail.com (Phone) +65-91696020

VEHICLE PARTICULARS

Manufacturer

Model 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 CC

Private use

Toyota

C-hr

No - Reporting only Private car

Auto 1797

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number AIG Asia Pacific Insurance Pte. Ltd. 2070080287-02

DRIVER

Name of Driver NRIC No Date Of Birth

Occupation

JOVINA NEO JIA MIN SXXXX021G 24/02/1996 Indoor



Date Of Driving Pass Driving experience	20/08/2015 7 YEARS AND 3 MONTHS	
Gender	Female	
Mobile Number	(Phone) +65-97224600	
Alt. Phone Number	-	
Email Address	jovinan.jm@gmail.com BLK 345 TAMPINES STREET 33 #04-358	Ω
Address	BLK 345 TAMPINES STREET 33 #04-336	0
Address complement	-	
Postcode	520345	
Is the driver the policyholder?	No	
If No, Relationship of the Driver with the Insured	Child	
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	No Collision	
Weather Conditions	AFTER RAIN	
Road Surface	Wet	
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)	3	
Use 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	JAYVEN	
Gender	Male	
PASSENGER 2		
Name	JAYCIA	
Gender	Female	
DETAILS OF POLICE ACTION		
A STATE OF THE STA		
Was the accident reported to the police?	Yes	
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/20211128/7035		
ATTACHMENT(S)		
	Ven	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No	
Accident report SN0823130009		Page 2 of 17

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBL308B
Vehicle Manufacturer	-
Vehicle Model	E .
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	: <del>-</del>

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly 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 <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 forw arded 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, acknow ledge, 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 & Time

Sketch Plan

Value A - SGA 2788J

Value B - GBL 308 B

ribe Circumstances of the Accident    Fulty to folia format : 7  20221  28   7035	cribe Circu	Stances of the Accident	
		efer to folile Report: 1/2021/120 /7053	
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## Declaration

WWe declare the foregoing particulars are true in every respect,

Driver's Signature (if driver is not the colloyholder, ( Care. & Time

Policy holder's Signature / Date & Time





1 of 3

Report No. T/20221128/7035

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

REPORT OF A TRAFFIC ACCIDENT Station Diary No.: Vide Report No.: Date/Time Report Made: 28/11/2022 13:18 Informant's Particulars Address: Name of Informant: 345 TAMPINES STREET 33 #04-358 SINGAPORE 520345 JOVINA NEO JIA MIN Contact No.: ID Type / ID No.: Mobile: 97224600 Home/Office: NRIC NO / S9607021G Email: Nationality: jovinan.jm@gmail.com SINGAPORE CITIZEN Type of Informant: Date of Birth: Sex: Age: Driver 24/02/1996 Female 26 Institution / School Name: Language: Race: English Chinese Driving Licence Information: Occupation: Date of Expiry: Class: Lash technician Unformation of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 27/11/2022 11:30	Type of Location:
Location:				
MAJU AVENUE	Ē			
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision	on:			Anyone conveyed by ambulance:

Details of V	emore mive		1	Color	Conditio	No of
Vehicle No.	Type	Make	Model	Color	Conditio	0
SGA2788J	Car					U

Details of Person Involved	
Any Pedestrian Involved: No	- NA
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20221128/7035

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

## CONTINUATION OF REPORT

Driver				100		THE RESIDENCE OF THE PERSON AND THE PERSON AND
Name	JOVINA NEO JIA MIN			ID No.		S9607021G
Related Vehicle	SGA2788J (Car)			Conta	ct No.	97224600
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f	NIL	

Brief Details.

On the above stated date and time, I was reversing my vehicle into a parking lot when a lady came knocking at my window and shouted that I hit onto her vehicle.

I immediately stopped my vehicle and went out to check on both of our vehicles . After I saw the huge gap between our vehicles, I argued that my car would not even touch hers even if I were to reversed fully into the parking lot . She then pointed at my old damage from my front left bumper months ago and insisted that this was the damage caused as there were no visible damage or dent on her vehicle.

After I managed to convince her and show her proof from my phone's photo gallery that the damage on my vehicle's front left portion was my old damage months ago . She kept quiet and walked away to call her husband and told me her husband will contact me and quote me for the repair the next day . I suspect something fishy so I did not wish to argue further. We then exchange particulars and left the scene .

The next morning, I receive a quotation of \$1032.55 inclusive of GST from a workshop called City Auto Pte Ltd. I decided to lodge a police report on this matter as I suspect that the lady and her husband is linked to this workshop trying to make money or involved in insurance fraud .





3 of 3

Report No. T/20221128/7035

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

CONTINUATION OF REPORT

Sketch Plan				
Informant is	not able	to	provide	sketch

NP168

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: 28/11/2022 13:18
Officer In Charge Of Case: TP / TPIB / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

JWK

Date of Accident	: 27 11 2022 Accident Time: 1130 (24-HR-FORMAT)
Accident Place	: Majn Avenue (Open Space Carparte)
Vehicle Reg. No (Car plate No.)	: SGA2788] Vehicle Make/Model: Toyota CHR
Insurance Company	: AIG Policy No. 2070080287-02
Name of Registered Owner	: Company / Individual Choo Chiew Mooi
ID of Registered Owner	: Co Reg No: Owner's NRIC No: \$6850028A
	: Co Contact No: Owner's Contact No: _9/69 6020
DRIVER'S Name	: Jovina Neo Jia Min DRIVER'S NRIC No: 596070219
DRIVER'S Date of Birth	: 24 02 1946 DRIVER'S License Pass Date 20 08 2015
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others:
DRIVER'S Address	: 61k 345 7ampines 8+33 #04-358
DRIVER'S Contact No./ Alt No.	:1) 9722 4600 2)
DIGY Est o Occupation	: INDOUR (Out IDOUK (eg. working inside or outside of an otc)
Email Address	jorinan.jm@gmail.com
Weather & Road Surface	: CLEAR & DRY I RAINING & WET WETER RAIN & WET
Reporting Type	Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including Dr Was the accident reported to the pol Was there any video Captured by ca	Passenger Name: Jayven Gender: M/F ice? YES \ NO Passenger Name: Jayven Gender: M/F Any Injuries: YES / NO Injured Name:
Exact purpose for which vehicle wa	s being used at the time of accident: Private use \ Work purpose
<u>O</u>	ther Party Driver's Particulars (if any)
Vehicle Reg NoGBL308B	Vehicle Reg No
Vehicle Make Model:	Vehicle Make Model:
Name DRIVER	Name DRIVER:
IC No. DRIVER.	IC No. DRIVER.
DP.IVER'S Contact & add	DR(VER'S Contact & add:
Oth	er Party Driver's Particulars (if any)
Vahicle Reg No:	Vehicle Reg No
Vehicle Make Model.	Vehicle Make Model:
Name DRIVER.	Name DRIVER:
IT No DRIVER.	C No DRIVER
DRIVER'S Condit & and	DRIVER'S Coman & add



## CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : CHOO CHIEW MOOI

Vehicle No.

Issued Date

: SGA2788J

Period of Insurance

: 16 Jun 2022 To 15 Jun 2023

Policy No.

: 2070080287-02

Engine No. Chassis No. : 2ZR8037644 : ZYX102013610 Endorsement No.

: 17 May 2022 11:58

### ABOUT THE COVER

Make/Model

: TOYOTA C-HR 1.8

Sum Insured: Market Value

First Year of Registration : 2017

Engine Capacity/Tonnage: 1,797.00 CC Driver Restriction

: NA

Off Peak Car: No

Insuring with COE/PARF ; 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.

to 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 expenence.

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 test, racing, pace-making, reliability that 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 - \$600 Theft - \$0 Flood Cover - \$600

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

NEO SIEW ENG - \$600 (Own Damage), \$600 (Flood Cover), JOVINA NEO JIA MIN - \$600 (Own Damage), \$600 (Flood Cover), CHOO CHIEW MOOI - \$600 (Own

Damage), \$600 (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 Approved Reporting Centres: All Auditorised Repaires (For Counts related repairs party accident repairs during the Venture Industrie Country and Count SG" from iTunes or Google Play

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank 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).

0503982000

KHC HOLDINGS PTE. LTD.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

389A BALESTIER ROAD

SINGAPORE 329796

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #09-16 AIG Building S079120 | T +65 6419 3000 | www.aig.sg