

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	09/01/2023 14:45 (SGT)
Reported by	Driver
Date of Accident	07/01/2023 12:24 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LORNIE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV6796C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG SZE HWEE
NRIC No	S8923381Z
Email Address	TJNSWEE@GMAIL.COM
Mobile Phone No	(Phone) +65-81137829
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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?	No - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220109747

DRIVER

Name of Driver	WONG TSE JIAN
NRIC No	S8701031G
Date Of Birth	18/01/1987
Occupation	Indoor

Date Of Driving Pass	06/05/2010
Driving experience	12 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91901275
Alt. Phone Number	-
Email Address	WONGTSEJIAN@GMAIL.COM
Address	BLK 842 SIMS AVE #01-778
Address complement	-
Postcode	400842
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	Collision - Major/Minor Rd
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)	4
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	NG SZE HWEE
Gender	Female

PASSENGER 2

Name	ALYSSA WONG ZHIYAN
Gender	Female

PASSENGER 3

Name	CLAIRE WONG ZHINING
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

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM9836K
Vehicle Manufacturer	Audi
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**IMPORTANT NOTICE**

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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.**
6. 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.
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:

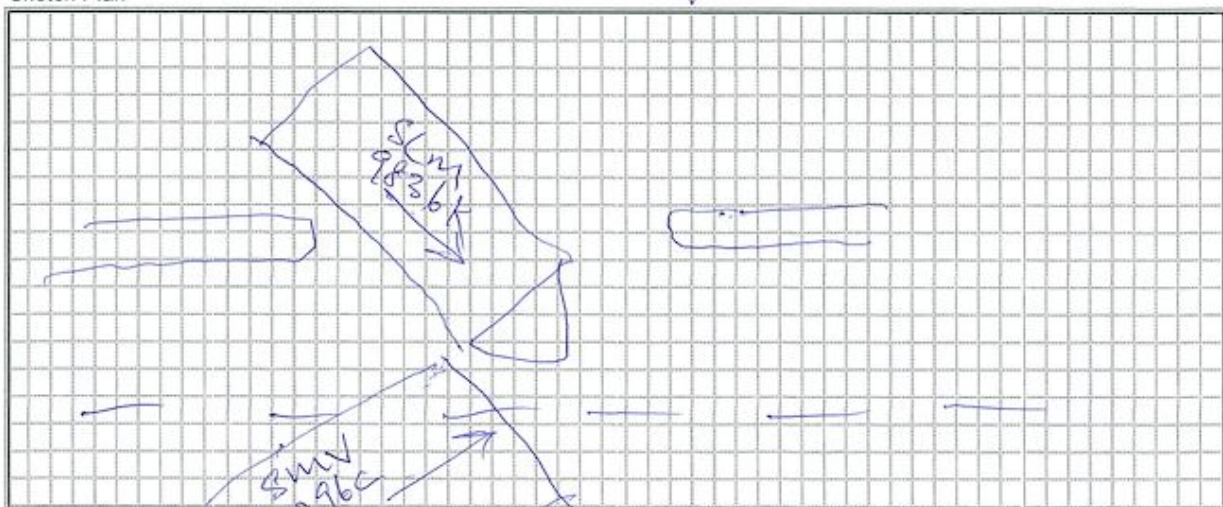
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

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

Sketch Plan



Describe Circumstance of the Accident

I was making a u-turn along Lornie Road at a u-turn opening. A red audi was tailgating me as I make the u-turn. As the u-turn opening ~~was slight~~ ~~at~~ was made into a two-lane road, my car couldn't clear the u-turn in one pass. I stopped the car to execute a short reverse to clear the u-turn. I checked the reverse camera and ~~the~~ side mirrors before ~~making the reverse~~ setting the gears into reverse. ~~I more~~ The Audi behind me shifted in front during the short period of time when I shifted the car into reverse and execute the reverse. As the audi behind was halfway into the right most lane, ~~and~~ the front right corner of the Audi's bumper was scratched slightly by the rear right corner of my rear bumper. The reverse sensor did not beep and the ~~the~~ front of the other car did not appear to be touching from the rear camera. I only reversed for shorter than 1sec and stopped immediately when the vehicles bumped into each other. On hindsight, the positioning of the cars and position had made it difficult to judge the likelihood of an accident. The car was also tailgating too closely as I have no space to reverse.

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
(Name as in NRIC/ID card)

 09 Jan 2023

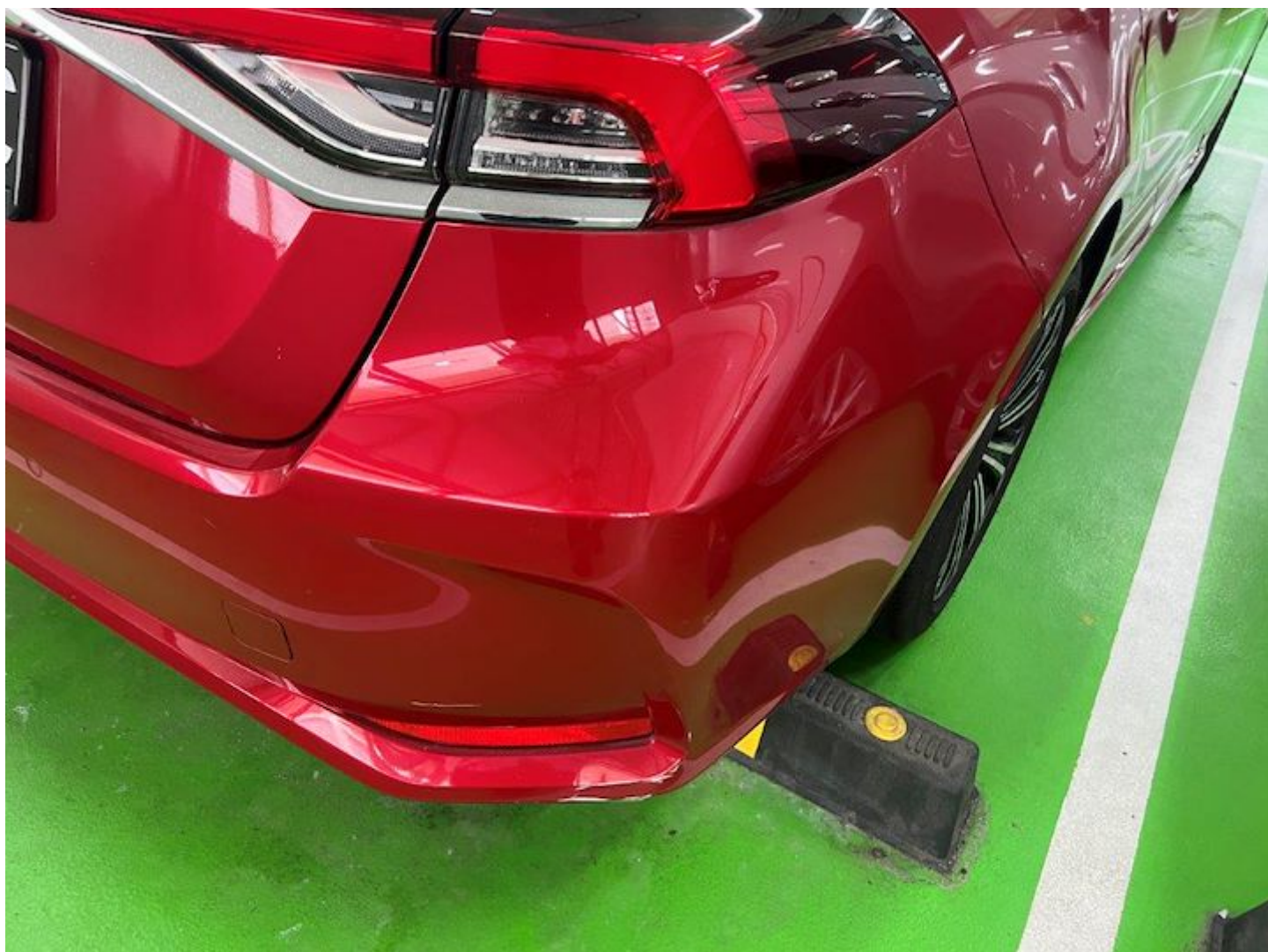
 Francis Cher
Motor Claims Assessor
Borneo Motors (S) Pte Ltd



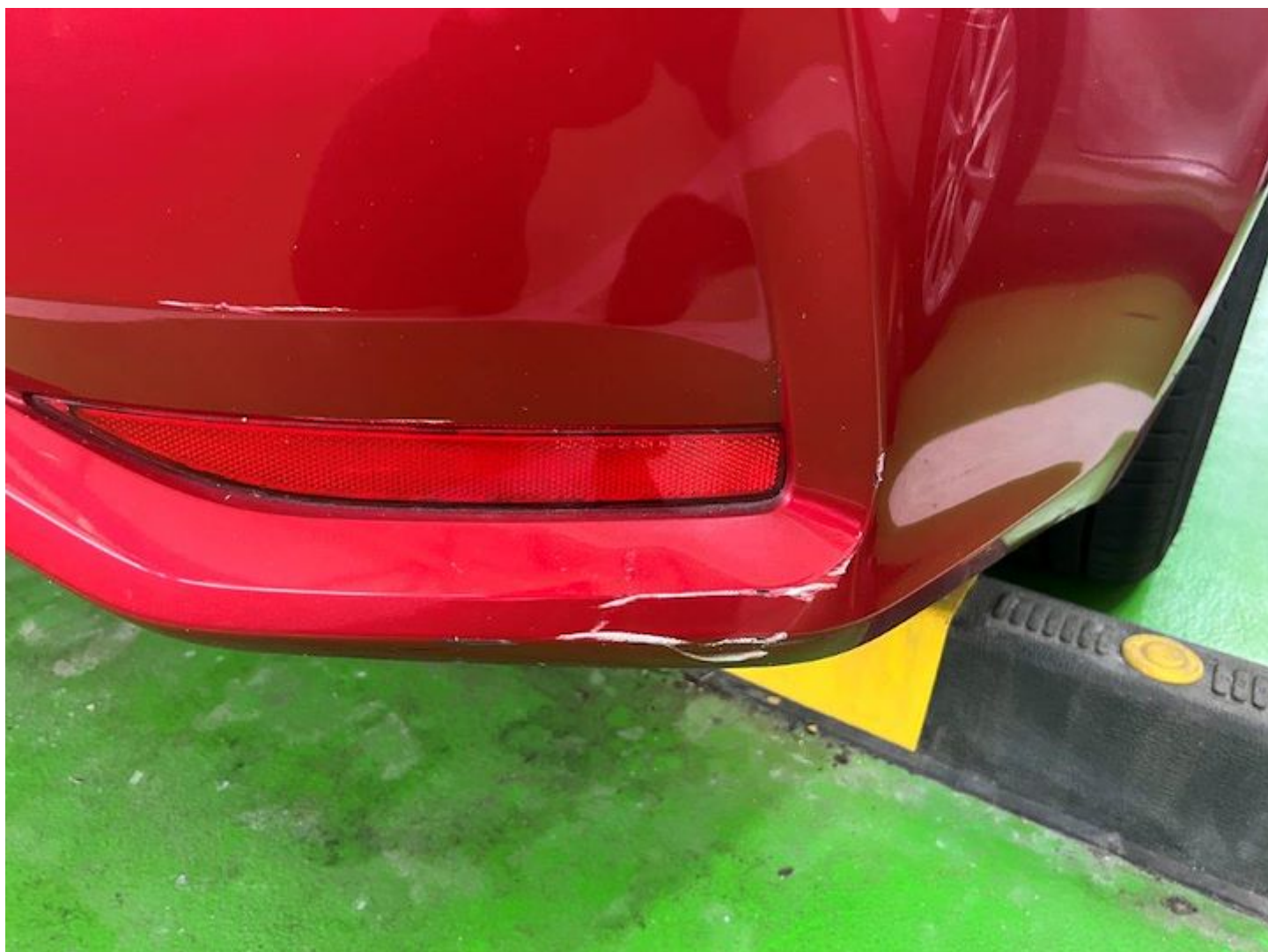




























AUTHORIZATION LETTER

Date: 09.01.2023To: Alfa

Cc: Borneo Motors (S) Pte Ltd

Attn: To Whom It May Concern

Dear Sir / Madam,

RE: Authorization to Act on Behalf for Insurance Claims Documentation

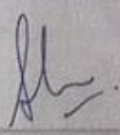
I/we, (full name) Ng Sze Hwee NRIC No. SP923381Z
hereby authorized my/our (relationship) Husband, Wong Ipe Jian (full name)
NRIC No. 88701031G to drive my
vehicle at time of accident.

He / She is also authorize to exercise and execute to sign all / any necessary transaction
documentation pertaining to my registration vehicle number SMV 6796 C as I am
currently having tight official business schedules / away from Singapore on duty overseas travel.

Please do not hesitate to contact me should you require any further clarification on the above.

Thank You

Yours truly,

Signature : Name : Ng Sze HweeContact No : 81137829

downloaded for free at iTunes or Google Play.

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CERTIFICATE OF INSURANCE

AIG CAR INSURANCE COMPLETE

Name of Policyholder : Ng Sze Hwee
Period of Insurance : 15 Oct 2022 To 14 Oct 2023
Engine No. : 1ZR0F65804
Chassis No. : MR2BE3BE100010629

Vehicle No. : SMV6796C
Policy No. : 7220109747
Endorsement No. :
Issued Date : 06 Oct 2022 14:26

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6
Engine Capacity/Tonnage : 1,598.00 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
b) Any other person who is a member of the Policyholder's household and 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 \$553,000 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 : 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.

* 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

Section 2

Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

Ng Sze Hwee - \$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. 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 SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

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AIG

78 SHENTON WAY #09-16

SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSCSAN

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AIG Asia Pacific Insurance Pte. Ltd.