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 11/02/2023 12:33 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 10/02/2023 23:30 (SGT) Exact Location of Accident Yishun Ring Rd, Singapore Additional Location Information APT BLK 118 YISHUN RING ROAD #08-675 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLQ351E

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner OH AH KIN NRIC No SXXXX133H Email Address janice0323@gmail.com Mobile Phone No (Phone) +65-97892321 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Kia Model Cerato 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 - Claiming third party Vehicle Category Private car

Transmission Auto CC 1591

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1700018136-05

DRIVER

Name of Driver OH AH KIN NRIC No SXXXX133H Date Of Birth 23/03/1967 Occupation Indoor

Date Of Driving Pass 18/06/1985 Driving experience 37 YEARS AND 8 MONTHS Gender Female Mobile Number (Phone) +65-97892321 Alt. Phone Number Email Address janice0323@gmail.com Address APT BLK 118 YISHUN RING ROAD #08-675 Address complement Postcode 760118 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 Collided into Parked Vehicle 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON FEB 2023, AT ABOUT 2330HRS. MY VEHICLE WAS INVOLVED IN AN ACCIDENT AT APT BLK 118 YISHUN RING ROAD #08-675 SG760118. MY VEHICLE WAS PARKED AT #196 PARKING LOT AND I AM NOT INSIDE THE CAR DURING THE ACCIDENT HAPPEN. ACCORDING TO TRAFFIC POLICE, VEHICLE C TURNED LEFT AND THERE WAS A CAR COMING, SO THE DRIVER OF VEHICLE C WAS PANIC AND ACCIDENTALLY HIT ONTO VEHICLE B AND VEHICLE B HIT ONTO MY VEHICLE. ATTACHMENT(S)

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

No

Vehicle Registration NumberSHC7798AVehicle Manufacturer-Vehicle Model-Vehicle Variant-Vehicle Colour-Vehicle CategoryTaxi



Are accident photos available for attachment?

Was there any video captured by Car Camera?

Name of Driver	-
Contact Number	(Phone) +65-90293965
Address	-
Address complement	_
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	SJK1781X - -
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-83382555
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



CERTIFICATE OF INSURANCE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : OH AH KIN Vehicle No. : SLO351E Period of Insurance : 27 Jun 2022 To 26 Jun 2023 Palicy No. : 1700018136-05

: G4FGGH636427 Engine No. Endorsement No.

Chassis No. : KNAFX411MJ5724978 Issued Date : 16 Jun 2022 19:46

ABOUT THE COVER

: KIA Cerato K3 1.6 EX

Engine Capacity/Tonnage: 1,591.00 CC Sum Insured : Market Value First Year of Registration : 2017 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 higher persolson.
This Policy will indemnify the Policyholder or any authorized driver only if hershe meets the specified age condition.

You have to pay an additional sum of \$\$\$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 : 40 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 hite or reward, driving tables, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trude or business or use for any purpose in connection with Moter Trade.

Lass of Use 1500cc - 1600cc

* Limitations rendered inaperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Read 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 - \$500 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

OH AH KIN - \$600 (Own Damage), \$600 (Flood Cever)

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

1 Cycle & Carriago Body & Paint Contro. Add: 209 Pandan Gardens Singapore 608339 65684501

2 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 330 Ubl Rd 3 Singapore 40850 57461000
3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 241 Alexandra Road Singapore 19931 64278800
4.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 500 Sin Ming Ave Singapore 575733 69328000

For other Approved Reporting Control/AIG Authorised Repoliers, please contact our 24-hour accident emergency helline at +85 6338 5200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from if unes or Geogle Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

VWe 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, 1997 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia).

0500709928

CYCLE & CARRIAGE - CINDY

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

SSPDAC

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 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 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)

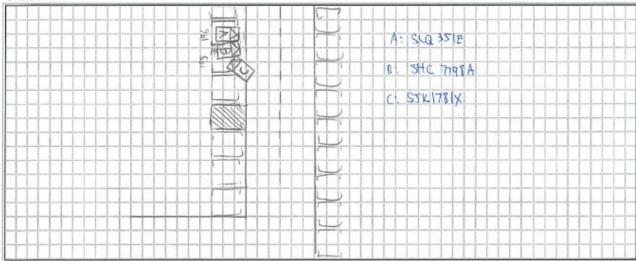
I understand, acknowledge, agree and consent that:

- (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 gnature / Date & Time

Actual Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



vJun2022

Describe Circumstance of the Accident		
On 10 Feb 2023, At about 2330 hrs. My while was involved in an accident of		
APT BUK 118 YISHON RING ROAD # 08-675 SG 760118. My while was parked of #196 parking let		
and I'm not inside the car during the accident happen. According to traffic police, when		
webble c turned left, there was a car coming, so the other of while c was partic		
and accidentally hit arts whale B, and while is hit arts my which.		
· ·		

Declaration

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

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

vJun2022

















