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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.

 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 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.

7. by the loagement of this report to the mounds, you hereby consent to the archivin	g of this report at the centre and to copies of the report being made available aloresaid.
ACCIDEN	T STATEMENT
Date of Submission Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	06/03/2023 15:44 (SGT) Driver 03/03/2023 15:30 (SGT) Jln Pelepah, Singapore - Singapore
DETAILS OF	F OWN VEHICLE
Vehicle Registration Number	SJZ8988S
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No LIM YOW LONG SXXXX081A tingkn07@gmail.com (Phone) +65-93868973
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	Mercedes E250 - Private use No - Claiming third party Private car Auto 1796
INSURANCE COMPANY	
Name of Insurance Company Policy Number / Cover Note Number	AIG Asia Pacific Insurance Pte. Ltd. 2100216723-12
Name of Driver NRIC No Date Of Birth Occupation	TING KHOR NEE SXXXX100I 27/07/1983 Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	08/04/2010 12 YEARS AND 11 MONTHS Female (Phone) +65-91467306 - tingkn07@gmail.com 19 JALAN PELEPAH - 119424 No Spouse No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Raining Wet
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	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
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 SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	GBG4796A - -

Commercial vehicle

GXXXX588X

MARIMUTHU CHEZHIYAN

Name of Driver

Passport No/FIN

Vehicle Colour Vehicle Category

Contact Number	-
Address	2
Address complement	_
Postcode	
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 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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' 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.

	M	aur 06/03/2013
Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
Sketch Plan		Total
XXXX AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	Az B=	SJZ 89885 GBG 9796A moving off from parking lot)

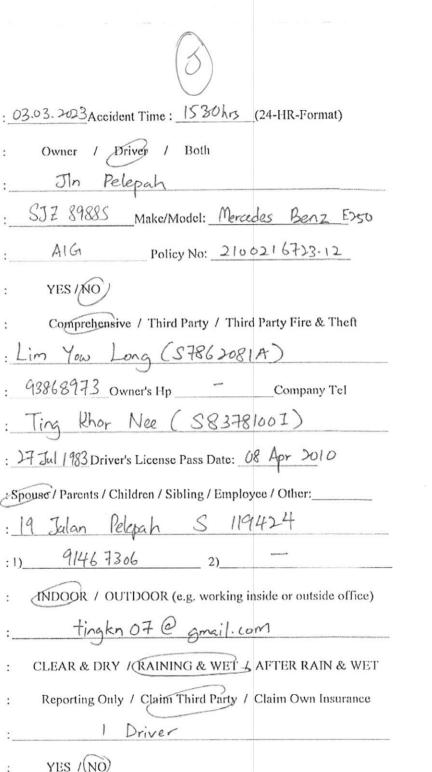
Describe Circumstances of	the Accident					
On 03.03	32023 abou	it 1530 hrs	. 1 was	: trave	lling along	Iln
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Pelepah. was					/	
side have a v	an CGBG	4796A)	illegal	parking	. Suddenly,	his
moving off from	n the lan	e and	collided	with	lest porti	on
of my vehicle	(SJZ 898)	₽S).				

		**************************************	***************************************			

Declaration		***************************************				
/We declare the foregoing particular	s are true in every res	pect.				
<u> </u>						
	W	-1			Nolalos	202
Policyholder's Signature / Date &	Driver's Signature (If	driver is not the po	licyholder) / Date	e Witness	ed by Reporting Cent	re

Personnel

Time



CLEAR & DRY /(RAINING & WET 4 AFTER RAIN & WET Weather & Road Surface Reporting Only / Claim Third Party / Claim Own Insurance Reporting Type Driver Number of Passenger(include Driver)

JIn

SJZ 8988S

AIG

YES /NO)

YES /(NO) Was ther any video footage? Private Use / Private Hire / Work Purpose Exact purpose used at time of accident Nil Any injury (If Yes, Pls State)

Other Party Driver's Particular (if any) Name & Contact No: Marimuthu Chezhiyan (G7892588X) Name & Contact No: VEH C: Name & Contact No: VEH D: Name & Contact No: VEH E:

*NEW - Passenger's Name & Gender:

Date of Accident

Accident Place

Who reported the accident?

Vehicle No (Car Plate No)

Insurance Company

Type of Coverage

Owner Contact No

Driver Name / IC No

Driver's Date of Birth

Relationship of Driver

Driver's Address

Driver's Contact No

Driver's Occupation

Email Address

Name of Owner / IC No

Fleet Policy



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder

: Lim Yow Long

Period of Insurance

: 13 Jul 2022 To 12 Jul 2023

Engine No.

: 27186030044186

Chassis No.

: WDD2120472A183054

Vehicle No.

: SJZ8988S

Policy No.

: 2100216723-12

Endorsement No.

Issued Date

: 04 Jul 2022 10:49

ABOUT THE COVER

Make/Model

: MERCEDES BENZ E250 CGI BE

Engine Capacity/Tonnage : 1,796.00 CC

Sum Insured : Market Value

First Year of Registration : 2010

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder

a) The Policymorer
 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 S\$\$3,000 as "Young and/or fnexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less

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 2000cc

* 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 - \$1000 Theft - \$0 Flood Cover - \$1000

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Lim Yow Long - \$1000 (Own Damage), \$1000 (Flood Cover), Ting Khor Nee - \$1000 (Own Damage), \$1000 (Flood Cover)

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

1.Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818 2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other. Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency holline 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: CITIBANK SINGAPORE

IWe 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).

CYCLE & CARRIAGE - ANGELA

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIGSGMOBILEAPP