

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	08/03/2023 10:31 (SGT)
Reported by	Driver
Date of Accident	04/03/2023 10:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ST.MICHAEL'S ROAD TO SERANGOON
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDR478M
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SOO ING CHOONG
NRIC No	S1517951A
Email Address	SOOEETER@LIVE.COM
Mobile Phone No	(Phone) +65-89012357
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Jaguar
Model	Xe
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	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210055098

DRIVER

Name of Driver	SOO EE TER
NRIC No	S9608362I
Date Of Birth	04/03/1996
Occupation	Indoor

Date Of Driving Pass	28/09/2017
Driving experience	5 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89012357
Alt. Phone Number	-
Email Address	SOOEETER@LIVE.COM
Address	24 J ST MICHAEL'S ROAD
Address complement	-
Postcode	327992
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	Collision - Head to Rear
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)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	SMB1408L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	THEENESH KUMAR NARAINAN
Passport No/FIN	G6625877M

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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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

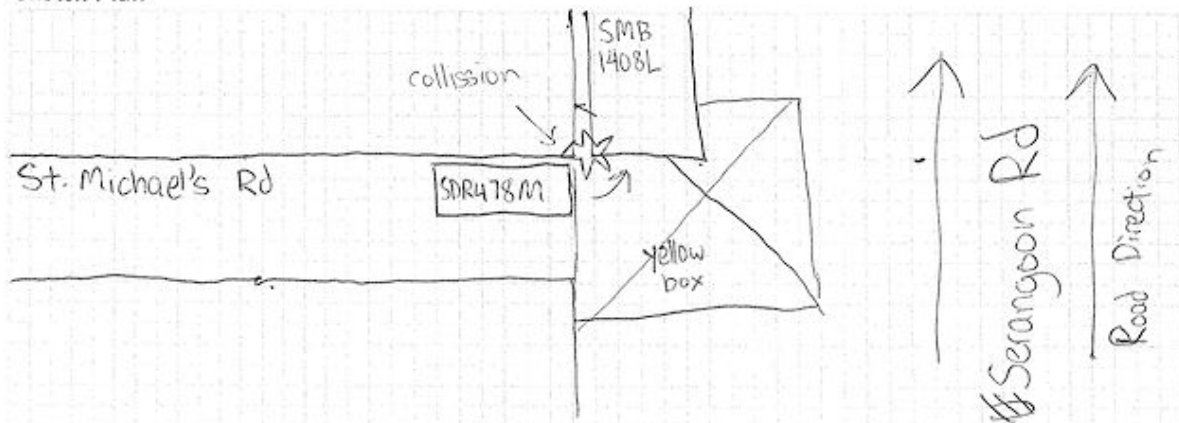
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 4 March 2023, at 10:25pm, Vehicle SDR478M on the exit of St. Michael's Rd into Serangoon Rd, hit a bus SMB1408L which was on the yellow box, the bus was on the left most lane, and suffered cosmetic damages. Vehicle SDR478M received structural damage to the front left chassis. No one was injured, low speed impact.

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

AIG			
AUTOPLAN PRIVATE VEHICLE			
Name of Policyholder	: SOO ING CHOONG	Vehicle No.	: SDR478M
Period of Insurance	: 23 Jun 2022 To 22 Jun 2023	Policy No.	: 7210055098-01
Engine No.	: 170223W0003204DTD	Endorsement No.	:
Chassis No.	: SAJAB4ANXHCP15508	Issued Date	: 23 May 2022 12:16
<div style="text-align: right;"> \$1611-28 50% </div>			
ABOUT THE COVER			
Make/Model	JAGUAR XE 2.0 PRESTIGE		
Engine Capacity/Tonnage	: 1,999.00 CC	Sum Insured	: Market Value
Driver Restriction	: NA	Off Peak Car	: No
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 S\$53,000 as "Young and/or Inexperienced Driver Excess" ("YIDER") 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.		
<small>* 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</small>			
EXCESS			
Section 1			
Fire - \$0 Own Damage - \$900 Theft - \$0 Flood Cover - \$900			
Section 2			
Property Damage - \$0			
Windscreen : \$100			
Named Driver and Excess (where applicable)			
SOO ING CHOONG - \$900 (Own Damage), \$900 (Flood Cover), SEAH BEE GEOK - \$900 (Own Damage), \$900 (Flood Cover), SOO EE RONG - \$900 (Own Damage), \$900 (Flood Cover)			
APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)			
<small>Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs) Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us). For 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 5G Mobile App. Simply search and download 'AIG SG' from iTunes or Google Play.</small>			
IMPORTANT NOTES			
Hire Purchase Company/Employer's Loan: NA			
<small>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, 1958 (Malaysia).</small>			
9503982000 KHC HOLDINGS PTE. LTD. 389A BALESTIER ROAD SINGAPORE 329796 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.		AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature	
<small>9 Shenton Way #09-16 AIG Building S078120 T +65 6419 3000 www.aig.sg</small>			



AIG Asia Pacific Insurance Pte. Ltd
AIG Building
78 Shenton Way
#07-16

MOTOR ACCIDENT INTERVIEW FORM

NAME : Soo Ee Ter
~~VEHICLE NUMBER~~ DATE/TIME OF ACCIDENT : 04 March 2023, 10.25pm
~~DATE/TIME OF ACCIDENT~~ VEHICLE NUMBER : SDR 478M
 PLACE OF ACCIDENT : St Michael's Rd into Serangoon Road
 THIRD PARTY VEHICLE (IF ANY) : SMB 1408L

 WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Journey began at St. Michael's Rd. Intended destination was Dempsey Hill.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?

No.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

SMB 1408L received cosmetic damages to the rear left side. SDR478M received structural chassis damage at the front left of the car. SDR478M is unable to turn its wheels, and left ~~door~~ front door cannot be opened.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No. Nobody was injured.

NAME: Soo Ee Ter

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

UNDERTAKING

I, Soo Ee Ter, (NRIC No. S9608362I), hereby confirm that the Singapore Accident Statement lodged by me on 6 March 2023 at 4.22pm hours pertaining to the accident involving motor car Reg. No: SDR478M, in which I was the driver are true and accurate to the best of my knowledge, information and belief.

I, Soo Ing Choong, (NRIC No. S1517951A), am the owner of motor car Reg. No: SDR478M and the policyholder of policy no. 7210055098-01.

We acknowledge that the insurer, AIG Asia Pacific Insurance Pte. Ltd. is not liable under the contract of insurance if there is (a) a breach of policy terms and conditions and/or (b) cover under the policy is excluded due to the operation of an exclusion(s) under the policy terms and conditions.

In the event that an unrelated/unreported third party property or injury claim arises or evidence emerges that:

- a) there is a breach of policy terms and conditions; and/or
- b) Cover under the policy is excluded due to the operation of an exclusion(s) under the policy terms and conditions,

we irrevocably jointly and severally undertake to absolve my insurer from all liability under the contract of insurance and we further jointly and severally undertake to re-pay any and all sums paid by my insurers pursuant to the contract of insurance upon my /our receipt of a written demand from the insurers.

Signature : _____
 Name of Policyholder : Soo Ing Choong
 NRIC No. : S1517951A
 Date : 6 March 2023

Signature : ST
 Name of Driver : Soo Ee Ter
 NRIC No. : S9608362I
 Date : 6 March 2023

AUTHORIZATION LETTER

Date: 6 March 2023

To Whom It May Concern:

I, Soo Ing Choong .IC S1517951A hereby like to
authorized Soo Ee Ter .IC S9608362I to sign all
the Forms pertaining to the accident / insurance claim forms on my behalf due to my busy work

Schedule. My vehicle number is SDR 478 M accident date on

4 March 2023

Apologize for any inconvenience caused and appreciate your kind understanding.

Yours Sincerely



Signature / Company Stamp







