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SN08233K0004 / National Assessment Centre Services [159721]

ENTRY DATE & TIME: 20/03/2023 14:59 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (20/03/2023 14:59 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.
 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.

POLICY HADBILLY.
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.

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

20/03/2023 14:59 (SGT) Date of Submission Both Policyholder and Actual Driver Reported by 17/03/2023 16:30 (SGT) Date of Accident 160 Sin Ming Dr, Singapore 575722 **Exact Location of Accident** #01-14 AUTOCITY (575722) Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

SMG168J Vehicle Registration Number

INSURED/POLICYHOLDER

No Is company? LIANG YUE Name Of Registered Owner SXXXX779Z NRIC No stevencrooger@gmail.com **Email Address** (Phone) +65-91333876 Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Bentley Continental Model Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Auto Transmission 5998 CC

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company 7220109252 Policy Number / Cover Note Number

DRIVER

LIANG YUE Name of Driver SXXXX779Z NRIC No 04/05/1991 Date Of Birth Indoor Occupation

D . O(D) ! D	40/00/0004
Date Of Driving Pass	10/08/2021
Driving experience	1 YEAR AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91333876
Alt, Phone Number	
	- to represent a series of the
Email Address	stevencrooger@gmail.com
Address	10 SUFFOLK ROAD #11-03
Address complement	•
Postcode	307786
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	
Does Driver Own Other Vehicles?	No
	NO
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
	production of the state of the
Type of Accident	Hit and run / Vandalism / Damaged whilst parked
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 anybody injured in the Accident?	-
Was any injured conveyed to hospital by ambulance?	
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
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?	
Was notice of interided Prosecution given.	
If yes, against whom?	•
CIRCUMSTANCES OF ACCIDENT	
The second secon	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTH	ER VEHICLE PROPERTY 1
Vehicle Registration Number	YL7313S
Vehicle Manufacturer	
Vehicle Variant	· ·
Vehicle Colour	•
Vehicle Category	Commercial vehicle
Name of Driver	

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

- 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 Actual Driver.
- 3. Information provided must be as <u>truthful</u> and <u>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 Traffic Police Department 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)

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 law yers/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 Personne (Name as in Nric/ID card)

Sketch Plan

A. A.

160 Sin Ming Autocity # 01-14

White A - SMG 1685

Vehicle B-12 73135

5575722

Describe Circumstances of the Accident
On the stated dute and time. My vahicle was
parked stationary on the stated location due to my
Whicle was doing repair work Changing of radiator. I
seleived a call from my workshop informing me that
a Tow trude was reversing into the parking lot and accidentally to collided onto the near left partien of my
Vehicle.

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



Send/Fax to:		Submitte	ed:	
	SINGAPORE	ACCIDENT STATEMENT		
		SIC INFORMATION	CTATE TOTAL COL	5000
Date of Accident:	17-Mar-2023	Time of Accident:	1630	
Exact Location:	160 SinMing Autocity 01		1.000	
Valida Basida di Ma		LS OF OWN VEHICLE		
Vehicle Registration No. Name of Registered Owner:	SMG 168 J LIANG YUE	NRIC / FIN / Passport no:	S9183779Z	
Owner's Email:	Stevencrooger@gmail.c			
Owner's Address:	10 SUKKOLK ROAD #1			
Vehicle Make:	BENTLEY	Vehicle Model:	FLYING SPUR	
Engine Capacitty (cc):	6.0	Transmission:	Auto / Manual	
Type of Claim:	Own Damage / Third P		Trate / Wallour	
Vehicle Category:		Motorcycle / Private Hire		
Name of Insurance Co:	AIG			
Type of Policy:		rd Party / Third Party, Fire & Theft		
Policy Number:	7220109252			
Name of Driver:		DRIVER	171	as Own
NRIC / FIN / Passport no:		Date of Birth:	104/0X/1991	as Own
Occupation:	Indoor / Outdoor	Driving Pass Date:		
Contact Number:	9133 3876	Gender:	18 08 2021 Male / Female	
Address:	10 SUPPOLK		186)	
Relationship with Owner:	Owner / Employee / Sc	pouse / Child / Hirer / Others:	186)	
Translater Name:	- Chines - Chipper - Ch	Translater NRIC:		
Translater Contact No:	1	Translater email:		
Translater Contact No.	GENERAL INFO	PRMATION OF THE ACCIDENT		
Type of Collision:		pe / Front to Rear / Others:		
Weather Condition:	Clear / Raining / Others:	Road Surface:	Dry / Wet	
Video availiable:	Yes / No	Road Surface.	Diy/ Wet	
Was anybody injured?	Yes / No	Police Report Made?	Yes / No	
No. of passenger onboard (inc		0	1,00,110	-
inc. or pubblinger official (inc	ordaning drivery.			
	DETAIL	S OF OTHER VEHICLE		
	Vehicle 1	Vehicle 2	Vehicle 3	
Vehicle Registration No:	YL 7313 S			
Vehicle Make / Model:				
Name of Driver:				
NRIC / FIN / Passport no:				
Contact Number:				
Name of Insurance Co:				
	DET	AILS OF WITNESS		Color St
Name:		Contact Info:	THE RESERVE TO SELECT A SECURITION OF THE PERSON OF THE PE	
不是在这些国际的		OF INJURED PERSON		
11 11 11 11 11 11 11 11 11 11 11 11 11	Person 1	Person 2	Person 3	
Name / in which vehicle?:				
Driver's Declaration. I declare that the info		true and accurate to the best of my collection e submitted.	and I bear full responsibility for any	
1				
8				
			-	
Signature of Driver		Date and time		



CERTIFICATE OF INSURANCE

LUXURY PRIME AUTOPLAN PRIVATE VEHICLE

Name of Policyholder

: Liang Yue

Period of Insurance

: 22 Sep 2022 To 21 Sep 2023

Engine No.

: BWR001974

Chassis No.

: SCBBE53W97C041780

Vehicle No.

: SMG168J

Policy No.

: 7220109252

Endorsement No.

Issued Date

: 22 Sep 2022

14:06

ABOUT THE COVER

Make/Model

BENTLEY CONTINENTAL FLYINGSPUR

Engine Capacity/Tonnage : 5,998.00 CC

Sum Insured : 142000

First Year of Registration : 2006

Driver Restriction

Off Peak Car : No

: Named Driver Basis

Insuring with COE/PARF

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder
 b) Any person who is named as a "named driver" under this Policy

Age Condition

: Not Applicable

Mileage Condition

: Unlimited Mileage

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

Ose drifty of section, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving test, 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 1800cc - 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 - \$14000 Theft - \$0 Theft Outside Singapore Cover - \$28000 Flood Cover - \$14000

Section 2

Property Damage - \$0

Windscreen: \$1000

Named Driver and Excess (where applicable)

Liang Yue - \$14000 (Own Damage) \$28000 (Theft Outside Singapore Cover), \$14000 (Flood Cover)

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

Any accident repairs to the Vehicle can be carned 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 SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: ZW CAPITAL PTE. 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).

0030305222

G&M PTE LTD - LUXP

20 ANSON ROAD #07-01 TWENTY ANSON SINGAPORE 079912

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Shu Ting Tan