

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	03/04/2023 16:22 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	02/04/2023 17:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION BETWEEN SERANGOON AVE 3 AND SERANGOON CENTRAL DRIVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX7772R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ALVIN HO MENG WEI
NRIC No	S8425364B
Email Address	homwa84@gmail.com
Mobile Phone No	(Phone) +65-94772180
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	A180
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1332

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220094593

DRIVER

Name of Driver	ALVIN HO MENG WEI
NRIC No	S8425364B
Date Of Birth	22/08/1984

Occupation	Indoor
Date Of Driving Pass	07/02/2006
Driving experience	17 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94772180
Alt. Phone Number	-
Email Address	homwa84@gmail.com
Address	BLK 233 SERANGOON AVE 3 #02-18
Address complement	-
Postcode	550233
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	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

I WAS EXITING CARPARK AND HAD CHECKED BOTH SIDES OF THE TRAFFIC BEFORE CROSSING THE CROSS JUNCTION TO GO STRAIGHT.
WHEN I ABOUT TO COMPLETE MY CROSSING, A BIKE BANGED INTO MY REAR DOOR.

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	FBM5288L
Vehicle Manufacturer	Yamaha
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Black

Vehicle Category	Motorcycle
Name of Driver	GU HAO
Passport No/FIN	G2066387T
Contact Number	(Phone) +65-85499116
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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.

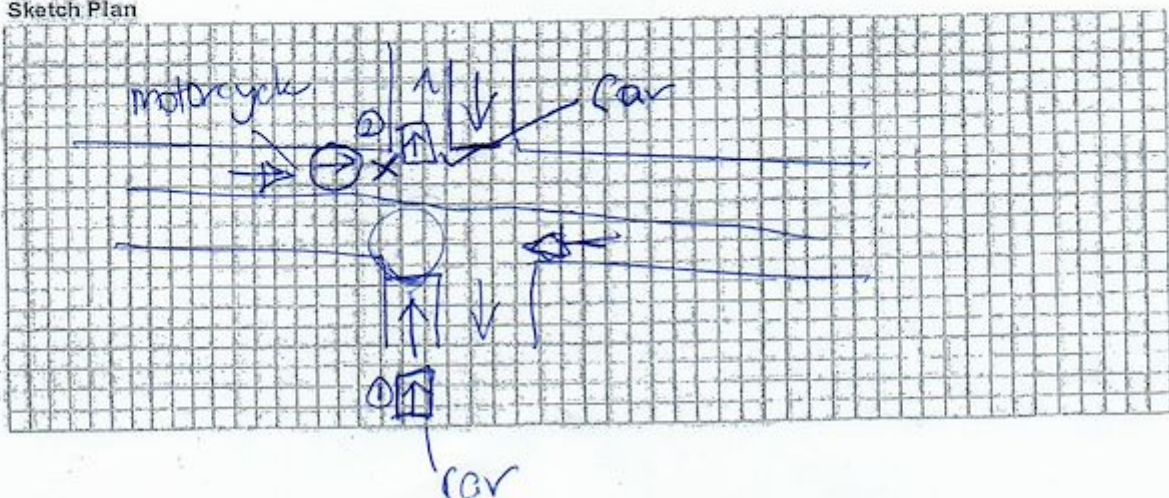
Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pansol Loop

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

I was exiting Carpark and had checked both sides of the traffic before crossing the cross junction to go straight.

When I about to complete my crossing, a bike banged into my rear door.

Declaration

We declare the foregoing particulars are true in every respect.

 3/4/23
Policyholder's Signature / Date & Time

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

Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : ALVIN HO MENG WEI
Period of Insurance : 22 Aug 2022 To 21 Aug 2023
Engine No. : 28291480836851
Chassis No. : W1K1771842J368654

Vehicle No. : SLX7772R
Policy No. : 7220094593
Endorsement No. :
Issued Date : 16 Aug 2022 9:13

ABOUT THE COVER

Make/Model : MERCEDES Benz A180 Progressive
Engine Capacity/Tonnage : 1,332.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2022
Insuring with COE/PARF : Yes

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 \$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 : 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 - \$800 Theft - \$0 Flood Cover - \$800

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

ALVIN HO MENG WEI - \$800 (Own Damage), \$800 (Flood Cover)

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

1.Cycle & Carriage Eunus 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 128375 62061818

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: DBS BANK LTD

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).

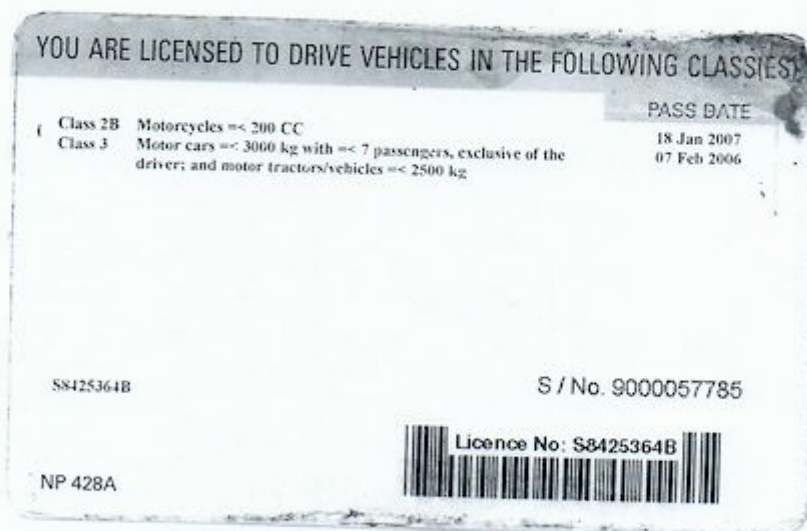
0500660332
 CYCLE & CARRIAGE - ATAY
 239 ALEXANDRA ROAD
 SINGAPORE 159930 ANSP-MOTOR
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

AIGSGM08LEAPP

78 Shenton Way #09-16 AIG Building S079120 | T: +65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.































GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SC 2023430009 Vehicle Registration No: SLX 7200K
Name (as shown in NRIC) : Phua Ho Meng Wee NRIC/FIN/Passport No : SXXXX 364K
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 09/04/2023 Time of Accident : 4:50 hrs.
Place of Accident : JBE between Singapore Ave 2 + Singapore Centre Drive.
Insurance Company: Aviva

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To amend the accident report from 4:50 hrs to 4:30 hrs.

[Signature]
Policyholder / Driver's Signature
Date:

[Signature]
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: