

NATIONAL Assessment Centre Services		Job #	Date & Time Completed	Done by
Job #	1805/2023 M-18	Job description		
Case #	1805/2023 M-18	SAS e-Milling		
Case #	1805/2023 M-18	E-mail (addressee, etc.)		
Case #	1805/2023 M-18	E-Motor Claim Form		
Case #	1805/2023 M-18	E-Motor W/O (winning or losing)		
Case #	1805/2023 M-18	E-Photo Uploaded		
Case #	1805/2023 M-18	Assessment/Survey Report		
Case #	1805/2023 M-18	Assn Report by Fax / Hand to Owner / Winner		

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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 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	18/05/2023 17:15 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	18/05/2023 12:24 (SGT)
Exact Location of Accident	505 Bishan Street 11, Block 505, Singapore 570505
Additional Location Information	MSCP LEVEL 2B
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD5020X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	WEE LIANG HWEE
NRIC No	SXXXX257H
Email Address	liang_hwee@hotmail.com
Mobile Phone No	(Phone) +65-98570237
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100471101-05

DRIVER

Name of Driver	WEE LIANG HWEE
NRIC No	SXXXX257H
Date Of Birth	05/11/1957
Occupation	Indoor

Date Of Driving Pass	14/02/1979
Driving experience	44 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98570237
Alt. Phone Number	-
Email Address	liang_hwee@hotmail.com
Address	BLK 303 SHUN FU ROAD #09-47
Address complement	-
Postcode	570303
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	Side Swipe
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

PLEASE REFER TO SKETCH PLAN (TYPE OF ACCIDENT IS HEAD TO SIDE)

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	SLF2661E
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LEW WEN JIANG
NRIC No	SXXXX457C

Contact Number	(Phone) +65-91689335
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

IMPORTANT NOTICE

- I understand, acknowledge, agree and consent that :

(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/firm/firms), which may be sited outside of Singapore, for one or more of the above Purposes.

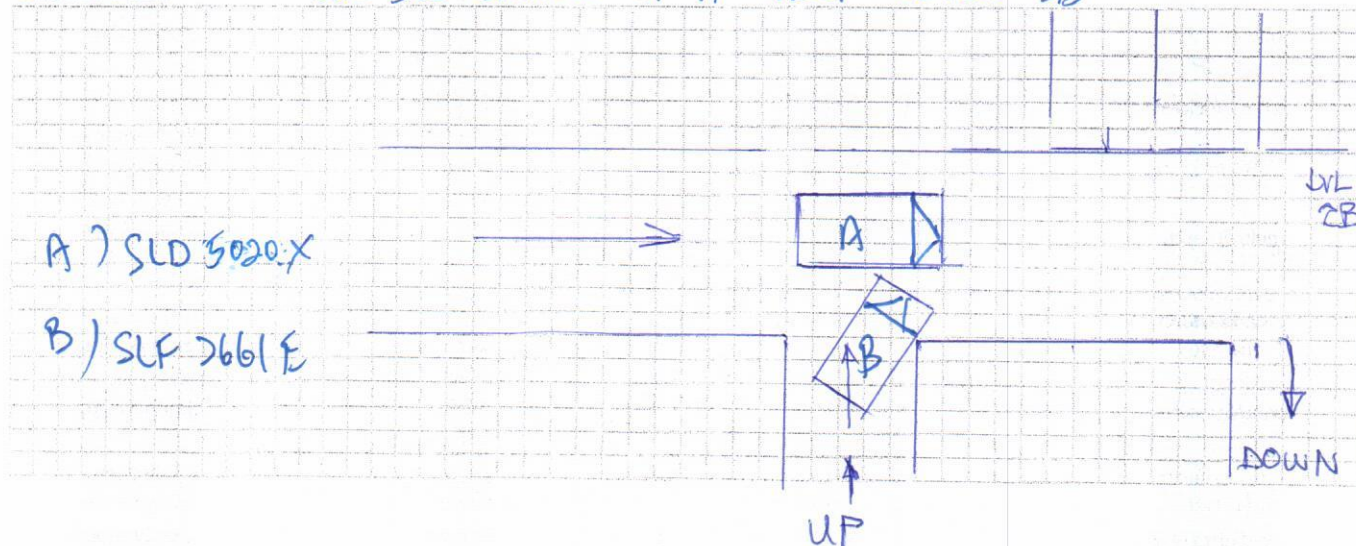
Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan

BIK 505 BISHAM ST 11 MSCP LEVEL 2B



Describe Circumstances of the Accident VEHICLE NO:

DATE OF ACCIDENT:

I was driving in the multi storey car park and was moving to the left as I will be getting out, and the ramp was on my right. As I was approaching the ramp a red car coming up the ramp ~~dash~~ from level 2A dash up and bang onto my car on the right side. Other driver alighted and said "Sorry I didn't see your car".

REPORTING ONLY ()

OWN DAMAGE ()

THIRD PARTY ()

OWN WORKSHOP ()

Declaration NOTE: DO NOTE THAT YOU MAY HAVE 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION
I/We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature / Date & Time

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

[Signature] 18/05/2023
Witnessed by Reporting Centre Personnel

NOTE IF ACCIDENT REPORT SUBMITTED AFTER 24 HOURS NCD WILL BE AFFECTED

ACCIDENT DETAILS

DATE OF REPORT: 18/5/23 ACCIDENT DATE & TIME: 18/5/23 1224pm.
ACCIDENT LOCATION: BLK 505 BISHAN ST 11 MEGA LEVE 2B
COUNTRY: SINGAPORE OR MALAYSIA

VEHICLE DETAILS/OWNER'S DETAILS

VEHICLE NO: SLW 5020X POLICY NUMBER: 2100471101-05
OWNER'S NAME: WEE LIANG HWEE HP/OFFICE: 98570237
NRIC NO: S1234257H COVERAGE: COM/TPFT/TP
EMAIL: liang-hwee@hotmail.com. AIG
INSURANCE: NTUC DIRECT ASIA AXA HL FWD BUDGET ECICS

VEHICLE PARTICULARS

MAKE & MODEL: TOYOTA ALTIS
VEHICLE CATEGORY: PRIVATE OR PRIVATE HIRE OR COMMERCIAL
PURPOSE DURING ACCIDENT: PRIVATE

CLAIM: OWN DAMAGE REPORTING ONLY THIRD PARTY

DRIVER DETAILS

NAME: WEE LIANG HWEE
NRIC NO: S1234257H
DATE OF BIRTH: 5/11/57
OCCUPATION: INDOOR OR OUTDOOR
PASSED DATE: 14/2/1979
GENDER: FEMALE OR MALE
HP NUMBER:
ADDRESS: B303 SUNFAR RD #09-47
POSTCODE: 570303
EMAIL:

R/S WITH POLICYHOLDER:

WEATHER CONDITION: DRY / CLEAR / WET / RAIN

INJURY:

DOES DRIVER OWN OTHER VEH?

IF YES, CAR NO: INSURANCE CO:

POLICE REPORT:

VIDEO FOOTAGE OR VOICE RECORD: YES (REAR)

OFFER BY OTHER WORKSHOP:

NO OF VEHICLE INVOLVED: NA

WITNESS: IF YES - NAME&HP:

NO PPL IN CAR:

PASSENGER NAME (NAME AND GENDER):

1)

2)

3)

OTHER PARTY'S DETAILS

VEHICLE NO: SLF 2661E
NAME: LEW WEN JIANG
NRIC NO: S8040457C
HP NUMBER: 91689335
INSURANCE:
ADDRESS:
MODEL: HONDA VEZEL
VEH CATEGORY: PRIVATE
PASSENGER: NIL

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Wee Liang Hwee
Period of Insurance : 20 Jun 2022 To 19 Jun 2023
Engine No. : 1ZRY291759
Chassis No. : MR053REH104550937

Vehicle No. : SLD5020X
Policy No. : 2100471101-05
Endorsement No. :
Issued Date : 23 May 2022 14:57

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6 DUAL
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
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\$3,000 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 1500cc - 1600cc Optional

* 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 - \$3000 Theft - \$0 Flood Cover - \$3000

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Wee Liang Hwee - \$3000 (Own Damage), \$3000 (Flood Cover)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)
 Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
 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

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).

1005625349/AC4

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

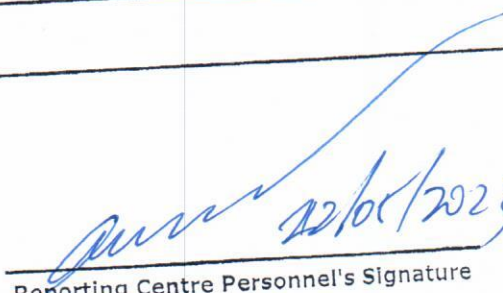
Original Report No: SLD23510003 Vehicle Registration No: SLD 5020X
Name (as shown in NRIC): _____ NRIC/FIN/Passport No: _____
(*Vehicle Driver/Policyholder) (*) Please delete as appropriate
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: _____
Email Address: _____
Date of Accident: 18/05/2023 Time of Accident: 12:24
Place of Accident: BK JTS Bldg 811 MSCP Level 2B
Insurance Company: _____

(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:

EMAIL ADDRESS TO LIAISON - HUR & HOYMAH. Com

Policyholder / Actual Driver's Signature
Date:

 12/05/2023
Reporting Centre Personnel's Signature
Name (as in NRIC/ID card):
Date: