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# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> 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 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

14/06/2023 12:20 (SGT) **Actual Driver** 12/06/2023 18:20 (SGT) 20 Ah Hood Rd, Singapore 329984 ZHONGSHAN MALL CARPARK Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SNF3998D

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

**Email Address** Mobile Phone No. Alternative Phone No

No SHU JING SXXXX699I junmin147@icloud.com (Phone) +65-91505858

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

Lamborghini Aventador

Private use

No - Claiming third party Private car Auto

6498

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd. 7220058474-01

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

GOH CHIEN SIONG SXXXX651G 14/07/1979 Indoor

Date Of Driving Pass 29/11/1997 Driving experience 25 YEARS AND 7 MONTHS Gender Male Mobile Number (Phone) +65-91505858 Alt. Phone Number **Email Address** sales@siongdoor.com Address BLK 987B JURONG WEST STREET 93 #17-569 Address complement Postcode 642987 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? 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 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 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? Police Station Name Tanglin Division Headquaters Police Station Phone No (Phone) +65-18003910000 Alt. Police Station Phone No (Fax) +65-63964900 Police Station Address 21 Kampong Java Road Singapore 228892 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT E/20230612/7054

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 Colour	-
Vehicle Category	Private car
Name of Driver	MR. SOH
Contact Number	(Phone) +65-81123559
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 Authorised 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. 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, acknow ledge, agree and consent that:

- (a) My insurer, my w orkshop 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) w ho 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,

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centr

Sketch Plan

Vehide A: SNF 3998D Vehicle B: SLQ 4749R

Zhong ShaN Mall Carpark

Refer	to	Dolico	report	E	20230612	7054		
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## Declaration

We declare the foregoing particulars are true in every respect.

,9

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

Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Time





Report No. E/20230612/7054

#### POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Date/Time Report Made 12/06/2023 19:20	Vide Re	port No.	Station Diary No.	
Name Of Informant	Address		ALBOYALIA DARAMIN BADAN MARALA MARAMIN BADA BADA AND	
GOH CHIEN SIONG	987B JURONG WEST STREET 93 : 642987		17-569 SINGAPORE	
ID Type / ID No. NRIC NO / S7919651G	Contact No. Home/Office: Mobile:		Mobile: 91505858	
Nationality SINGAPORE CITIZEN	Email Address SALES@SIONGDOOR.COM			
Occupation	Sex	Age	Date of Birth	Race
Managing director/Chief executive officer	Male	43	14/07/1979	Chinese
Institution/School Name	Language English			
Date/Time Of Incident	Location Of Incident			
12/06/2023 18:10 - 12/06/2023 18:40	zhongshall mall carpark			

Brief details.

we entered zhongshall mall carpark at about 6.10pm for dinner and proceed to the carpark to collect our car at 6.40pm and realize there is damage and scratches on the front left fender. We approached the mall to inform the security team and they said they will get their officer to contact us. My car plate SNF 3998D car Make Lambo LP 700. No car cam thus we need the mall to provide CCTV footage

Subjects Involved Victim	
Signature Of Officer Recording The Report: Not applicable	Signature Of Informant:  The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/06/2023 19:20
Officer In-Charge Of Case:	Classification Of Case:
This report is lodged at Moulmein NPP Kiosk	





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20230612/7054

S7919651G 43 English
43
987B JURONG WEST STREET 93 #17-569 SINGAPORE 642987
Yes

Signature Of Officer Recording The Report:  Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 12/06/2023 19:20		
Officer In-Charge Of Case:	Classification Of Case:		
This report is lodged at Moulmein NPP Kiosk			

DATE OF ACCIDENT: 12 06 2013 TIME: 1820 HR
LOCATION: Zhong Shan Mall Carpark
INFORMANT'S PARTICULARS
1) VEHICLE NO.: SNF 3998D MODEL: Lamborghin: Aventador LP700-4 2) INSURANCE CO.: AIG POLICY NO.: 3) CLAIM TYPE: OWN DAMAGE / THRO PARTY / REPORTING ONLY (PLS CIRCLE)
2) INSURANCE CO.: POLICY NO.: POLICY NO.:
4) OWNER NAME: Shu Jing 1/C S77846991 TEL:
5) OWNER EMAIL : JUNMIN 147@ ICLOUD. COM ALTERNATIVE PHONE NO.: 9150 58 58
6) DRIVER NAME: Goh Chien Stong 1/C S79196516 TEL: 9150 5858
7) DRIVER OCCUPATION: Self - Employed EMAIL: SALES @ SION G DOOR. COM
8) RELATIONSHIP WITH OWNER: Husband
9) DOES DRIVER OWN ANY CAR? YES (NO) (QN 9 & 10 APPLY FOR NON OWNER ONLY)
10) DRIVER'S OWN VEHICLE REG NO.: INS CO.: INS CO.: INS CO.:
12) ROAD SURFACE: DRY / WET / OTHERS  13) ANY SCENE PHOTOS: YES / NO  14) ANY VIDEO CAPTURED BY CAR CAMERA: YES / NO
15) EXACT PURPOSE OF VEHICLE BEING USED AT TIME OF ACCIDENT: Not IN USE
16) I HAVE BEEN APPROACHED BY UNKNOWN PERSON(S) SOLICITING/OFFERING ACCIDENT CLAIMS ASSISTANCE : YES (NO)
17) NO. OF PASSENGERS (INCLUDING DRIVER) : A)PASSENGER NAME;
18)No. of Vehicle involved (including own vehicle): 02 MALE / FEMALE
BIK 98715 JUROUG WAST 81 CHAT 93  B)PASSENGER NAME:  MALE / FEMALE
THIRD PARTY (OTHER VEHICLE) PARTICULARS
VEHICLE 1 1) VEHICLE NO .: SLQ 4749 R MODEL:
2) DRIVER NAME : Mr Soh I/C
3) ADDRESS:
4) CONTACT NO.: 8112 3559 INS CO:
VEHICLE 2 1) VEHICLE NO.: MODEL:
2) DRIVER NAME :
3) ADDRESS :
4) CONTACT NO.:INS CO:
* ANY FOREIGN VEHICLE INVOLVED IN THE ACCIDENT : (YES (NO)
FOREIGN VEHICLE NO.:
FOREIGN VERICLE CAPEGORT.
NITNESS PARTICULARS
I) ANY WITNESS (YES /NO) - IF YES,PLS PROVIDE AS BELOW:
2) NAME & NRIC :TEL:
) ANY INJURIES (YES (NO) IF YES, STATE INJURY SUSTAIN :
) WAS ACCIDENT REPORTED TO POLICE (YES/NO) - IF YES, PLEASE PROVIDE A
COPY OF POLICE REPORT. ) WAS NOTICE OF INTENDED PROSECUTION GIVEN (YES/NO))- IF YES, PLS PROVIDE
A COPY OF THE NOTICE. ) WAS ANY INVOLVED DRIVER TESTED / CHARGED FOR DRINK DRIVING DUE TO
THE ABOVE ACCIDENT (YES/NO))



# CERTIFICATE OF INSURANCE

## LUXURY PRIME AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : Shu Jing

: 26 May 2023 To 26 Mar 2024

Vehicle No.

: SNF3998D

Period of Insurance Engine No.

: L53901929

Policy No.

: 7220058474-01

Endorsement No.

Chassis No.

: ZHWEC1ZD9DLA01560

ABOUT THE COVER

**Issued Date** 

: 24 Mar 2023 23:40

Make/Model

: LAMBORGHINI AVENTADOR LP700-4

Engine Capacity/Tonnage: 6,498.00 CC **Driver Restriction** 

Sum Insured: 570000 : Named Driver Basis Off Peak Car : No

First Year of Registration : 2013 Insuring with COE/PARF : Yes

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.
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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, 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)

Goh Chien Siong (Wu Jianxiong) - \$14000 (Own Damage) \$28000 (Theft Outside Singapore Cover), \$14000 (Flood Cover), Shu Jing - \$14000 (Own Damage) \$28000 (Theft Outside Singapore Cover), \$14000 (Flood Cover)

# APPROVED REPORTING CENTRES/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 SG Mobile App. Simply search and download "AIG SG" from Apple App Store or Google Play Store.

### **IMPORTANT NOTES**

Hire Purchase Company/Employer's Loan: NA

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 1960, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0030305222

EAZY 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.

78 Shenton Way #09-16 AIG Building \$079120 | T:+65 6419 3000 | www.aig.sg

Queenie Alexa Macalalag