





# 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	19/06/2023 15:57 (SGT)
Reported by	Actual Driver
Date of Accident	15/06/2023 14:30 (SGT)
Exact Location of Accident	Meyer Rd, Singapore
Additional Location Information	BLK 19 BASEMENT 1 CARPARK
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBG1008L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG LINGLING, DAWN(HUANG LINGLING, DAWN)
NRIC No	SXXXX813G
Email Address	bensonaws3@gmail.com
Mobile Phone No	(Phone) +65-9907669
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	Audi
Model	A5
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	1984

## INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7230005377

## DRIVER

Name of Driver	AW ZHI XIAN BENSON
NRIC No	SXXXX960D
Date Of Birth	24/12/1981
Occupation	Outdoor

Date Of Driving Pass	07/01/2003
Driving experience	20 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97671677
Alt. Phone Number	-
Email Address	bensonaws3@gmail.com
Address	BLK 93 MEYER ROAD#23-04
Address complement	-
Postcode	437986
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### 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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMW6216E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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

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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. This report will be forwarded by the insurers to 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 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  
(Name as in NRIC/ID card)

Sketch Plan

BIK 93 MEYER ROAD BASEMENT 1 CARPARK

A - SBG 1008L

B - SMH 6216E



Describe Circumstance of the Accident

On the stated date and time, My vehicle was parked in the parking lot when vehicle B collided onto the front right of my vehicle.

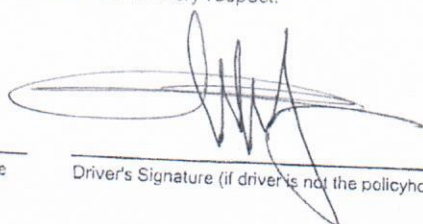
Declaration

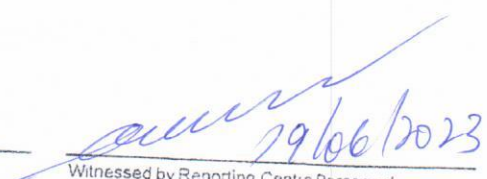
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



 29/06/2023



VEHICLE NO: <u>SBG 1008 L</u>		MAKE & MODEL: <u>Audi A5</u>		AUTO/MANUAL <u>C.C. 2,000</u>	
DATE OF ACCIDENT		<u>15 / 06 / 2023</u>			
TIME OF ACCIDENT		<u>1430hrs</u>		AM / PM <u>PM</u>	
LOCATION OF ACCIDENT		<u>Blk 93 Meyer Road Basement 1 carpark</u>			
EXACT PURPOSE USED AT TIME OF ACCIDENT		EMPLOYMENT / PRIVATE USE / PRIVATE HIRE			
NAME OF OWNER		<u>Ng Ling Ling, Dawn</u>			
EMAIL <u>BENSONAWS3@gmail.com</u>		OFFICE: _____		MOBILE: <u>9009 7669</u>	
NRIC		<u>S8202813G</u>			
CLAIM TYPE		<u>OD / THIRTY PARTY / REPORTING ONLY</u>			
FLEET POLICY		<u>YES / NO</u>			
INCURANCE CO.		<u>AIG</u>			
TYPE OF COVERAGE		<u>Comprehensive / Third Party / Third Party Fire &amp; Theft</u>			
POLICY NO.		<u>723 000 5377</u>			
NAME OF DRIVER		<u>AS ABOVE / IF NO: <u>AW Zhi Xian Benson</u></u>			
NRIC		<u>S8141960D</u>			
DATE OF BIRTH		<u>24 / 12 / 1981</u>			
ANY PASSENGER		<u>YES / NO</u>			
NAME OF PASSENGER		<u>N/A</u>			
GENDER OF PASSENGER		<u>MALE / FEMALE</u>			
OCCUPATION		<u>Outdoor / Indoor</u>			
DATE OF DRIVING PASS		<u>07 / 01 / 2003</u>			
GENDER		<u>MALE / FEMALE</u>			
CONTACT NO.		Mobile: <u>97671677</u> Office: _____ Home: _____			
EMAIL		<u>BENSONAWS3@gmail.com</u>			
ADDRESS		<u>Blk 93 Meyer Road # 23-04 (S) 437986</u>			
DOES DRIVER OWN OTHER VEHICLES?		<u>NO</u> / If yes, Reg No: _____ INSURE: _____			
RELATIONSHIP		<u>Employee / If NO Spouse</u>			
WEATHER CONDITION		<u>Clear</u> / Raining / Other: _____			
ROAD SURFACE		<u>Dry</u> / Wet / Other: _____			
ANY INJURIES		<u>NO</u> / If yes, Who? _____			
CONTACT NO.		<u>N/A</u>			
POLICE REPORT		<u>NO</u> / If yes, Where? _____			
NOTICE OF INTENDED PROSECUTION?		<u>NO</u> / If yes, Who? _____			
VEHICLE B NO.		<u>SMW 6216E</u> Any Passenger: <u>unknown</u>			
NAME					
CONTACT NO.					
VEHICLE C NO.		Any Passenger: _____			
VEHICLE D NO.		Any Passenger: _____			
VEHICLE E NO.		Any Passenger: _____			
VEHICLE F NO.		Any Passenger: _____			
ANY WITNESS		<u>N/A</u>			
WITNESS CONTACT NO.		<u>N/A</u>			
WAS THERE ANY VIDEO CAPTURE?		<u>YES / NO</u>			
WAS THERE ANY AUDIO RECORDED?		<u>YES / NO</u>			
SCENE ACCIDENT PHOTOS TAKEN?		<u>YES / NO</u>			
WHO IS REPORTING		<u>DRIVER / OWNER / BOTH</u>			
Original Language Used		<u>English</u> / Mandarin / Others: _____			
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?		<u>YES / NO</u>			



## AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : NG LINGLING DAWN (HUANG LINGLING DAWN)  
Period of Insurance : 19 Jan 2023 To 18 Jan 2025  
Engine No. : DEM036742  
Chassis No. : WAUZZZF5XNA016354

Vehicle No. : SBG1008L  
Policy No. : 7230005377  
Endorsement No. :  
Issued Date : 19 Jan 2023 15:05

## ABOUT THE COVER

Make/Model : AUDI A5 SPORTBACK 2.0 TFSI S TRONIC

Engine Capacity/Tonnage : 1,984.00 CC

Driver Restriction : NA

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2023

Insuring with COE/PARF : Yes

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" ("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

Limitation as to use\* :

Mileage Condition : Unlimited Mileage

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 1800cc - 2000cc Optional

\* 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 - \$1600 Theft - \$0 Flood Cover - \$1600

## Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

NG LINGLING DAWY (HUANG LINGLING DAWN) - \$1600 (Own Damage), \$1600 (Flood Cover), AW ZHIXIAN BENSON (HU ZHIXIAN BENSON) - \$1600 (Own Damage), \$1600 (Flood Cover)

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

1 Audi Customer Service Center Add. 55 Ubi Road 1 Singapore 408699 63662323

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](http://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: HL Bank

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).

0504125200

PREMIUM LEASING - AP

281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE  
SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Janet Tanaga