

## 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 14:37 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	17/06/2023 12:30 (SGT)
Exact Location of Accident .....	925 Yishun Central 1, Singapore 760925
Additional Location Information .....	multi-storey car park
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLB1357L
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	Linda Ang Li An
NRIC No .....	S1777708D
Email Address .....	lindadurian@hotmail.com
Mobile Phone No .....	(Phone) +65-94781020
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Jazz
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 .....	1496

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7220017100-01

#### DRIVER

Name of Driver .....	Alvin Khoo
NRIC No .....	S9237811Z
Date Of Birth .....	23/10/1992
Occupation .....	Indoor

Date Of Driving Pass .....	02/11/2012
Driving experience .....	10 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96909928
Alt. Phone Number .....	-
Email Address .....	alvinkhoo_@hotmail.com
Address .....	Blk 175 Yishun Avenue 7 #09-853
Address complement .....	-
Postcode .....	760175
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 - Major/Minor Rd
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	3
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 .....	-

#### PASSENGER 1

Name .....	Siti Fathona Binte Amdan
Gender .....	Female

#### PASSENGER 2

Name .....	Sofia Khoo
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

Please refer to the sketch plan/police report.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJG6240D
Vehicle Manufacturer .....	Audi
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	Nachammai D/O Selva Nachiappan
NRIC No .....	S8211615Z
Contact Number .....	(Phone) +65-90691534
Address .....	Blk 287 Yishun Avenue 6 #09-72
Address complement .....	-
Postcode .....	760287
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	Alvin Khoo
Gender .....	Male
Phone No .....	(Phone) +65-96909928
Address .....	Blk 175 Yishun Avenue 7 #09-853
Address Complement .....	-
Post Code .....	760175
Approximate Age Years Old .....	31
Injuries Sustained .....	-
Injured person in which vehicle? .....	SLB1357L
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

### INJURED 2

Name of injured person .....	Siti Fathona Binte Amdan
Gender .....	Female
Phone No .....	(Phone) +65-81980856
Address .....	Blk 175 Yishun Avenue 7 #09-853
Address Complement .....	-
Post Code .....	760175
Approximate Age Years Old .....	33
Injuries Sustained .....	-
Injured person in which vehicle? .....	SLB1357L
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

**SKETCH PLAN**

**IMPORTANT NOTICE**

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**8. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

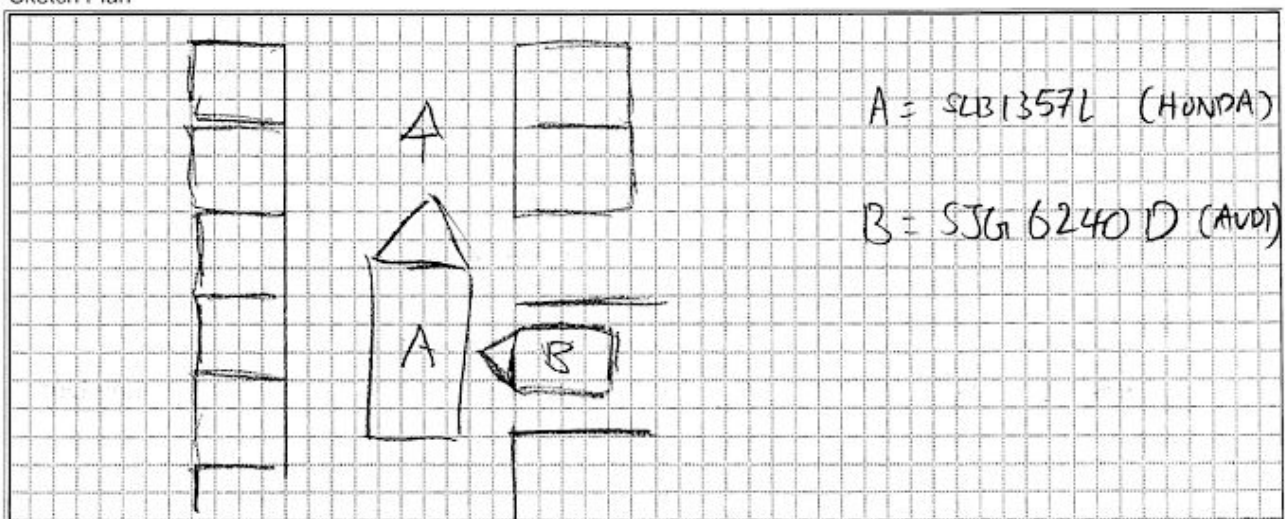
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 19/6/2023  
Policyholder's Signature / Date & Time

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

Jenny Lim  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

**Sketch Plan**



vJun2022

1


Describe Circumstance of the Accident

Please refer to Police Report:

only want

## Declaration

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

 19/6/2023

Policyholder's Signature / Date &amp; Time


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

Jenny Lim

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)





























**SINGAPORE  
POLICE FORCE**



T/20230619/7039

1 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20230619/7039

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/06/2023 14:25		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: ALVIN KHOO			Address: 175 YISHUN AVENUE 7 #09-853 SINGAPORE 760175		
ID Type / ID No.: NRIC NO / S9237811Z			Contact No.: Home/Office: Mobile: 96909928		
Nationality: SINGAPORE CITIZEN			Email: alvinkhoo@gmail.com		
Sex: Male	Age: 30	Date of Birth: 23/10/1992	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Secondary school teacher			Driving Licence Information: Class: 3,3A Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/06/2023 12:30	Type of Location: Car Park
Location:  YISHUN CENTRAL 1				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJG6240D	Car	AUDI		Blue	Slightly Damaged	3
SLB1357L	Car					0



**SINGAPORE  
POLICE FORCE**



T/20230619/7039

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230619/7039

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ALVIN KHOO	ID No.	S9237811Z
Related Vehicle	SLB1357L (Car)	Contact No.	96909928
Hospital/Clinic	KINDER CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: 3,3A Date of Expiry: NIL
Date	18/06/2023	Date	18/06/2023
No. of Days granted Medical Leave	02	Degree of	Slight
Passenger			
Name	SOFIA KHOO	ID No.	T2105320H
Related Vehicle	SLB1357L (Car)	Contact No.	96909928
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Passenger			
Name	SITI FATHONA BINTE AMDAN	ID No.	S90446677C
Related Vehicle	SLB1357L (Car)	Contact No.	81980856
Hospital/Clinic	KINDER CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	18/06/2023	Date	18/06/2023
No. of Days granted Medical Leave	02	Degree of	Slight

## Brief Details.

The accident happened on 17th June in the multistory carpark at level 2 of 925 yishun central 1. I was traveling, SLB1357, straight when an Audi, SJG6240D, hit me on the driver door as the car was going up the slope.



**SINGAPORE  
POLICE FORCE**



T/20230619/7039

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3  
Report No. T/20230619/7039

## CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
TAN JEOK LENG LESLIE  
Contact No.: 65476151

Signature Of Informant:

The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
19/06/2023 14:25

Classification Of Case:

NP168





# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

**Name of Policyholder** : LINDA ANG LI AN  
**Period of Insurance** : 29 Mar 2023 To 28 Mar 2024  
**Engine No.** : L15B31020686  
**Chassis No.** : JHMGK5850GX201810

**Vehicle No.** : SLB1357L  
**Policy No.** : 7220017100-01  
**Endorsement No.** :  
**Issued Date** : 06 Feb 2023 21:59

### ABOUT THE COVER

**Make/Model** : HONDA JAZZ 1.5  
**Engine Capacity/Tonnage** : 1,496.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2016  
**Insuring with COE/PAF** : 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  
**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 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 - \$600 Theft - \$0 Flood Cover - \$600

#### Section 2

Property Damage - \$0

Windscreen : \$100

**Named Driver and Excess** (where applicable)

LINDA ANG LI AN - \$600 (Own Damage), \$600 (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 Apple App Store or Google Play Store.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: UOB LIMITED

(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).)

0501706000

LIM CHEK HAI HARRY

27 FARLEIGH AVENUE

SINGAPORE 557807 SP - NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

CHEK HAI HARRY LIM

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

AIG Asia Pacific Insurance Pte. Ltd.