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 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.

- 4. The issue and acceptance of this is form by instrained 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 30/03/2023 13:11 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 29/03/2023 17:25 (SGT) Exact Location of Accident Singapore Additional Location Information Bishan Road Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKV1402X

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Kwok Wing Onn NRIC No S1649596D Email Address kwokwingonn@yahoo.com Mobile Phone No (Phone) +65-98310393 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Nissan Model Sylphy 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 Yes your vehicle? 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 2100427086-07

DRIVER

Name of Driver Kwok Wing Onn NRIC No S1649596D Date Of Birth 20/02/1964 Occupation Indoor

Date Of Driving Pass 29/04/1985 Driving experience 37 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-98310393 Alt. Phone Number Email Address kwokwingonn@yahoo.com Address Blk 644 Ang Mo Kio Avenue 4 Address complement #07-878 Postcode 560644 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 Collided into Motorcyclist Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? Yes Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Yes Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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 **FOREIGN VEHICLE 1** Vehicle Registration Number VJT4922 Vehicle Category Motorcycle **DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name Ang Mo Kio North Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004849999 Alt. Police Station Phone No (Fax) +65-62181399 Police Station Address 51 Ang Mo Kio Avenue 9 Singapore 569784 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT See Attached Sketch Plan & Police Report T/20230329/2121 ATTACHMENT(S) Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

No

Was there any video captured by Car Camera?

Vehicle Registration Number	VJT4922
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender	Unknown (Motorcyclist) Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

IMPORTANT NOTICE

- 1. Flease report correctly the details of the accident to speed up the claims process.
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- 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.
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- 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, 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
- (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 GtA to their third party service providers or agents (c) my Personal Information maybean be disclosed by any control of Singapore, for one or more of the above Purposes.

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

 [IAN CHONG MOTOR SALES PTE LTD]

19 LORONG 8 TOA PAYOH SINGAPORE 319255 TEL: 6703 8012 FAX: 6356 4922

30/3/2023 > 09: 40 am Policyholder's Signature / Date &

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

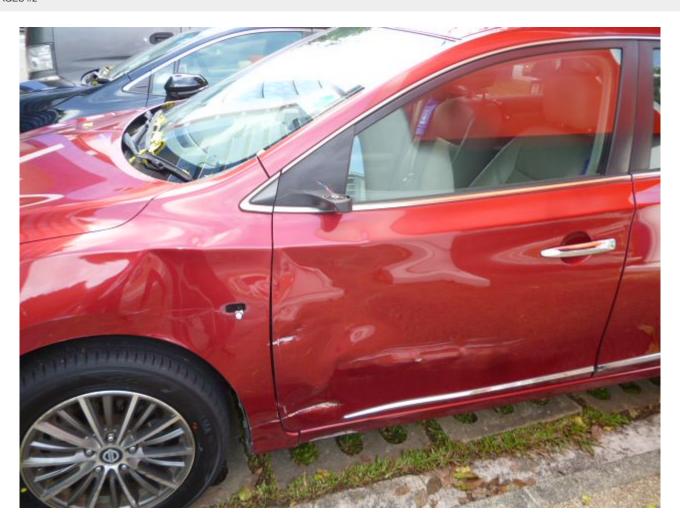
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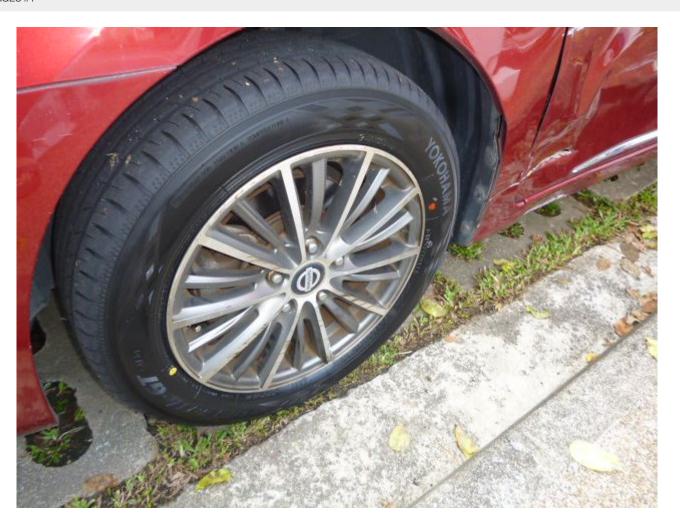
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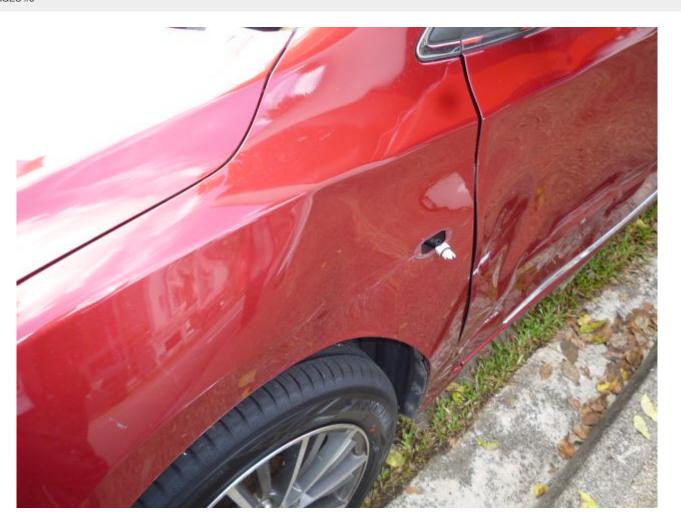
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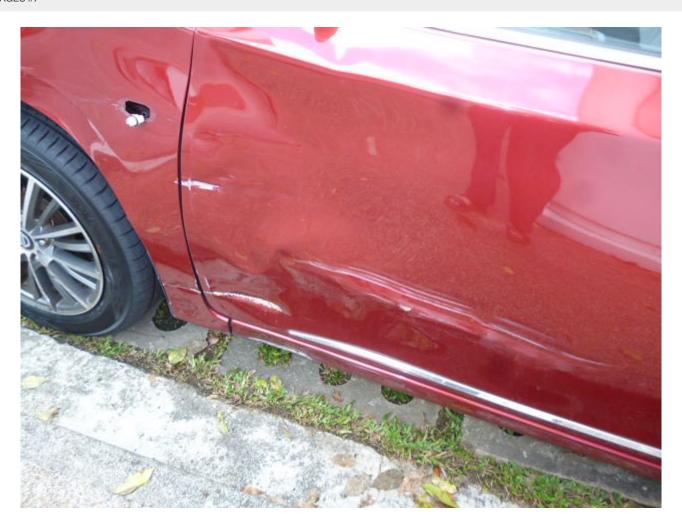


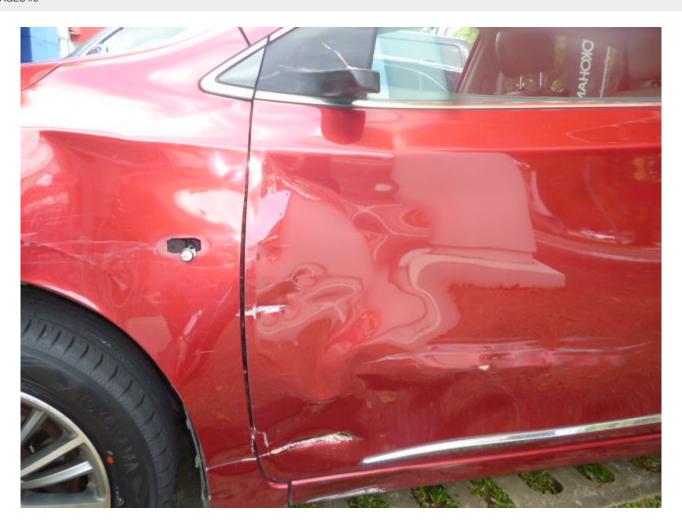


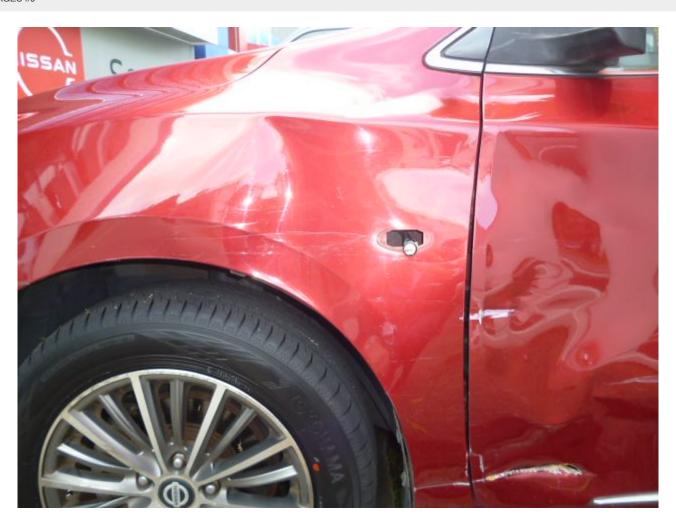


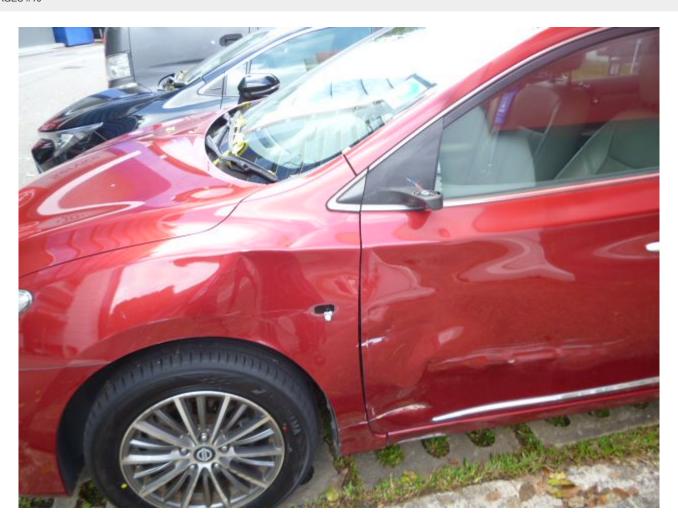




















1/20230329/2121

1 of 3 Report No. T/20230329/2121

Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No: 1800-4849999

REPORT OF A T	RAFFIC ACCIDENT
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Date/Time 29/03/202	e Report M 23 19:54	lade:	Vide Report No.: E/20230329/0112	Station Diary No.: 65
Informan	t's Particu	ulars	STATE OF THE STATE OF	
	Informant: ING ONN		Address: APT BLK 644 ANG MC 560644	KIO AVENUE 4 #07-878 SINGAPORE
ID Type / NRIC NO	ID No.: / S164959	96D	Contact No.: Home/Office:	Mobile: 98310393
Nationalit SINGAPO	y: ORE CITIZ	EN	Email:	
Sex: Male	Age: 59	Date of Birth: 20/02/1964	Type of Informant: Driver	
Race: Chinese			Language:	
Occupation Retiree	on:		Driving Licence Informa Class: 3	ation: Date of Expiry:

Type of Accident:	Injury Conveyed By Amb	ulance	Drink Drive: No	Date/Time of Accident: 29/03/2023 17:2	Type of Location: Straight Road
Location: BISHAN ROAD					ė.
Weather: Raining	- 1	Road Wet	Surface:	4	- 199
Traffic Flow: Two Way	1	128 0 0 0 0 0	c Control: controlled	2111 1000	Traffic Volume: Heavy
Type of Collision Between Moving	Vehicles - Head To	Side		•	Anyone conveyed by ambulance: Yes

Vehicle No.	Type	Make*	Model	Color	Condition	No of Passenger
SKV1402X	Car	NISSAN .	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR	Red	Seriously Damaged	0
VJT4922	Motorcycle	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A STATE OF THE STA			0

Details of V	ehicle Insurance		Alexandra (
Vehicle No.	Insurance Company	Insurance No		Effective	Expiry Date





Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE# 569784 2 of 3 Report No. T/20230329/2121

Tel No: 1800-4849999

CONTINUATION OF REPORT

Wahiola Na	Insurance Company	Insurance No	THE STATE OF	Continue Date
venicie ivo.	insurance company	insurance inc	Effective	Expiry Date
SKV1402X	AIG ASIA PACIFIC INSURANCE PTE.	2100427086-07	31/08/2022	30/08/2023

Details of Perso	n Involved		AR 22, 98 6 12		mar di	
Any Pedestrian I	nvolved: No		1402	577		
No. of Pedestrian	ns Injured: NIL	oon sammus	Use of Ped	destriar	Cross	ing: NA
Driver		建设等外景		STATE OF	profits rec	
Name	KWOK WING ONN			ID No		S1649596D
Related Vehicle	SKV1402X (Car)		-	Contact No.		98310393
Hospital/Clinic	NIL	1		Class Drivin Licen Expin	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	63	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	· · · · · · · · · · · · · · · · · · ·

Brief Details.

On 29/03/2023 at around 1725hrs, I was driving (SKV1402X) on the second lane along Bishan Road towards Ang Mo Kio Avenue 8. At the bus stop after Bishan MRT, the traffic was heavy on both lane 1 and 2, I made a check on lane 3 and did not see any oncoming vehicle as such I turned into the left lane. As I was making the change, a motorcycle (VJT4922) suddenly collided into my left side, causing damages to my left passenger door, left side mirror and left front fender. During the collision, the rider of VJT4922 flew forward and landed on the floor, I immediately drove and stopped behind him to prevent any vehicle from coming forward. I immediately got out and made a check on the rider, he was conscious but complaining pain on his legs. I then called 999 and requested for ambulance.

Traffic Police and paramedic later came to scene. After the Traffic Police interviewed us, the rider was conveyed to Hospital.

I have a dashcam installed however it's not working but the SD card was still seized by the Traffic Police

I'am lodging this report as instructed by the Traffic Police officer.



Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No: 1800-4849999

3 of 3 Report No. T/20230329/2121

CONTINUATION OF REPORT

	*	
Signature of Officer Recording The Report: F / SGT 3 CHUA ZHENG XING, JOHNNY	Signature Of Informant:	pur-
Signature Of Interpreter: Not applicable	Date/Time: 29/03/2023 19:54	ar ar
Officer In Charge Of Case: TP / GIT / SGT 3 MUHD SYARIFUDDIN MUHD AJMAIN Contact No.: 65476083	Classification Of Case;	-
NP168		New York



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Period of Insurance

Name of Policyholder : KWOK WING ONN

: 31 Aug 2022 To 30 Aug 2023

: HR16969372B

Engine No. : MNTBBAB17Z0023914 Chassis No.

Vehicle No.

: SKV1402X

Policy No.

: 2100427086-07

Endorsement No.

: 04 Aug 2022 11:06 **Issued Date**

ABOUT THE COVER

Make/Model

: NISSAN SYLPHY 1.6 PREMIUM

Engine Capacity/Tonnage: 1,598.00 CC

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2015

Insuring with COE/PARF : Yes

Driver Restriction : NA Person or Classes of Persons Entitled to Drive*:

a) The PoScyholder
 b) Any other person who is driving on the PoScyholder's order or with his/her permission.
 This PoScy will indemnify the PoScyholder or any authorised driver only if he/she meats the specified age condition.

You have to pay an additional sum of \$\$\$3,000 as "Young and/or Inexperienced Oriver Excess" ("YIOR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has lass than 2 years' driving experience.

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

Limitation as to use* :

Use or by for social, demostic and pleasure purposes and for the Pokeyholder's business.
This Pokey does not cover use for hire or reward, driving talking, driving test, racing, pape-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

* Limitations rendered inoparative by Section 8 of the Motor Vehicles (Third-Porty Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1997 (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)

KWOK WING ONN - \$600 (Own Damage), \$600 (Flood Cover)

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

1,TC AutoClinic Add: 25 Leng Kee Raad Singapore 159097 97036511 67036512 67038513 2,TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628999 82822212 3,Autofulion Industriat Add: 19 Usi Road 4 Singapore 40823 94936666 4,Ten Chong Motor Safes Add: 191 Bukit Timah Road Singapore 599923 94694091 64694082 64694093 5,Tan Chong Motor Safes Add: 18 Lerong 8 Tost Payoh Singapore 59923 94594091 64694082 64694093

For other Approved Reporting Centres/MiG Authorised Repairers, please contact our 24-hour addient emergency bottline at +65 6333 6200. Alternatively, you may refer to AIG website www.aig.sig or AIG SG Mobile App. Simply search and download "ANG SG" from Trunes or Geogra Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

EWe hereby cartily that the policy to which this Certificate of Inturance relates is issued in accerdance 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).

0500610392

TAN CHONG CREDIT PTE LTD-TBK

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589623 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Pag Zni Hwey



SINGAPORE POLICE FORCE

ACKNOWLEDGEMENT SLIP

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