

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.

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 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 First Submission 14/07/2023 09:24 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 13/07/2023 14:40 (SGT) Exact Location of Accident Singapore Additional Location Information **BRADDELL ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLH8383H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner GOH PECK JOO (WU BIRU) NRIC No S8618983F Email Address goh_ahpeck@hotmail.com Mobile Phone No (Phone) +65-94560996 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model A180 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? Yes Vehicle Category Private car Transmission Auto CC 1595

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 2100482571-06

DRIVER

Name of Driver GOH PECK JOO (WU BIRU) NRIC No S8618983F Date Of Birth 27/06/1986 Occupation Indoor

Date Of Driving Pass 17/07/2006 Driving experience 17 YEARS Gender Female Mobile Number (Phone) +65-94560996 Alt. Phone Number Email Address goh_ahpeck@hotmail.com Address 83 LORONG G TELOK KURAU Address complement Postcode 426275 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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? 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? Nο 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 JPE3240 Vehicle Category Motorcycle **DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name Ang Mo Kio South Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004519999 Alt. Police Station Phone No (Fax) +65-65535679 Police Station Address 81 Ang Mo Kio Ave 3 Singapore 569929 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT NO: T/20230713/2079 ATTACHMENT(S) Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

SD CARD WITH POLICE

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

Vehicle Registration Number	JPE3240
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	UNKNOWN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	JPE3240
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Goh Peck Joo (Wu Biru)

Period of Insurance : 03 Oct 2022 To 02 Oct 2023
Engine No. : 27091030945297
Chassis No. : WDD1760422J456653

Vehicle No. Policy No.

: SLH8383H : 2100482571-06

Endorsement No.

Issued Date

: 18 Aug 2022 14:18

ABOUT THE COVER

Make/Model

: MERCEDES BENZ A180 BE STYLE

Engine Capacity/Tonnage : 1,595.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2016 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 \$553,000 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 fusion, 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 (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.

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Goh Peck Joo (Wu Biru) - \$800 (Own Damage), \$800 (Flood Cover)

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

Cycle & Carriage Eunos Service Center (For accident reporting only). Add: 330 Ubi Road 3 Singapore 408650 62061818
 Cycle & Carriage Pandari Loop Service Center - Body Care & Repair Add: 188 Pandari Loop Singapore 128378 62051818

For other Approved Reporting Centres/AliG Authorised Repairers, please contact our 24-hour accident emergency hotine 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: Daimler Financial Services Africa & Asia Pacific Ltd

IWe 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 Road Transport Act, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

CYCLE & CARRIAGE - ACHANG

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Accident report SC20237E0001

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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' law yers/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 Go Chee Han

do

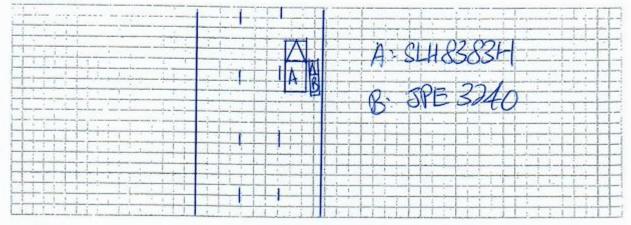
DID: 6771 4336 HP: 9181 7717
Email: cheeban.go/@cyclecarriage.com.sg
Cycle & Carriags Industries Pte Ltd
Customer Service Centre - Pandan Loop

Policyholder's	Signature.	/ Date	8
Time	0.5		

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

Witnessed by Reporting Centre Personnel

Sketch Plan



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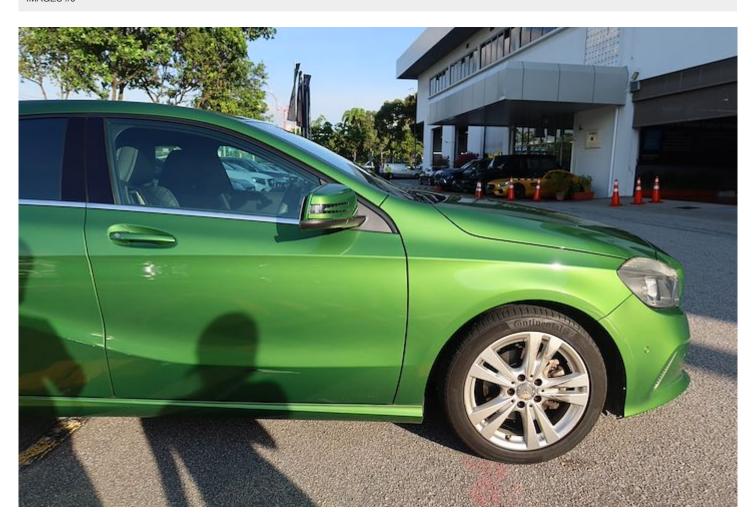


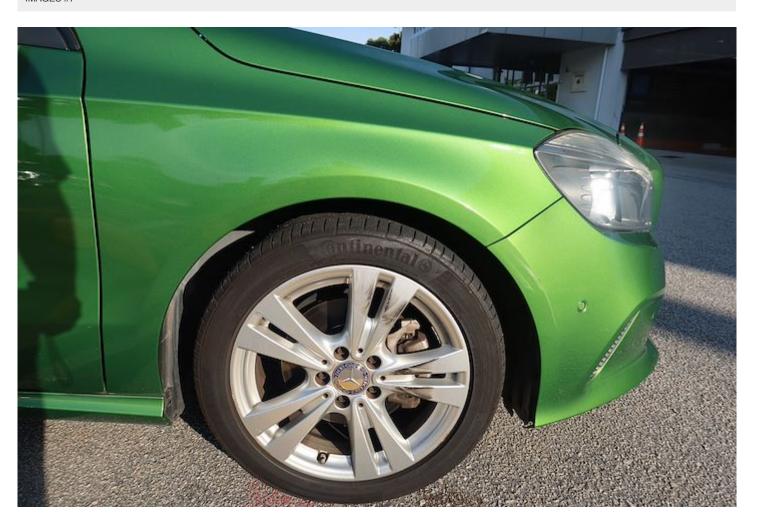


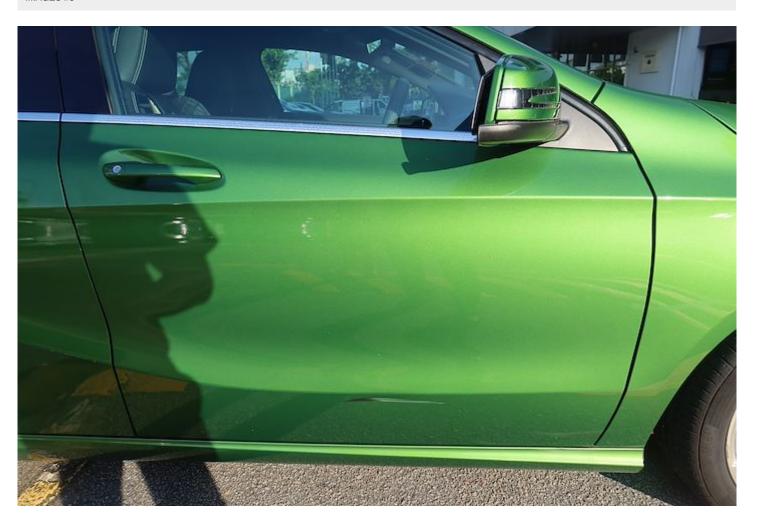


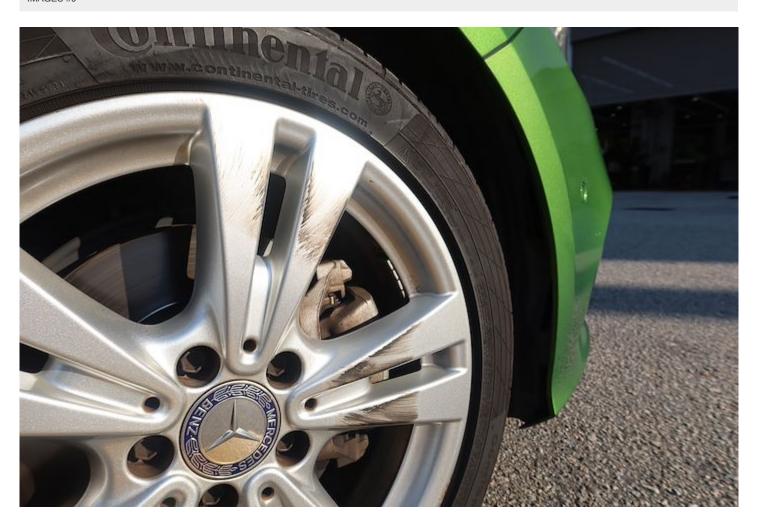




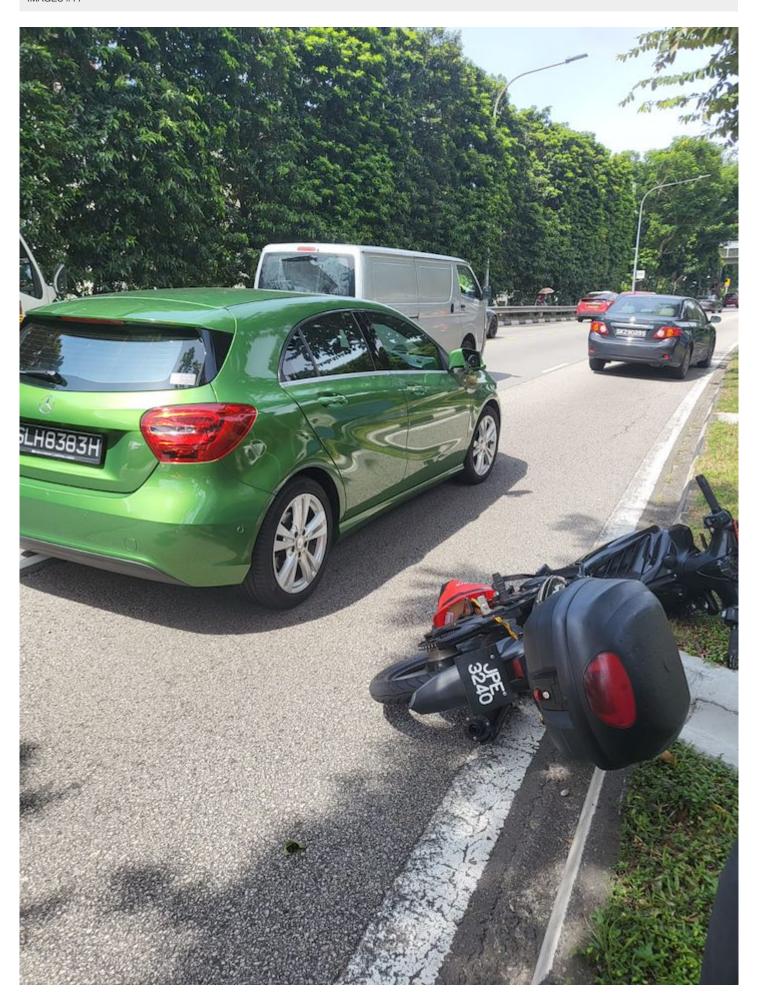


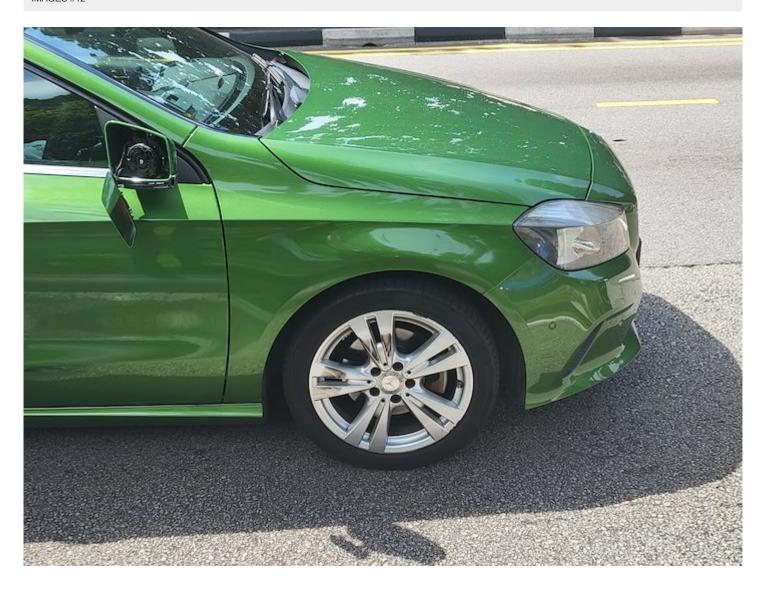




















Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

1 of 3 Report No. T/20230713/2079

Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

Date/Tim 13/07/20	e Report I 23 17:00	Made:	Vide Report No.: F/20230713/0064	Station Diary No.:		
Informar	it's Partic	ulars	A LINE OF THE PARTY OF	107		
Name of GOH PE	Informant: CK JOO		Address: 83 LORONG G TELOK KI	IPAU SINCADORE 400075		
	/ S86189	83F	83 LORONG G TELOK KURAU SINGAPORE 4262 Contact No.: Home/Office: Mobile: 94560006			
Nationality: SINGAPORE CITIZEN		EN	Home/Office; Mobile: 94560996 Email: goh_ahpeck@hotmail.com			
Sex:	Age:	Date of Birth:	Type of Informant:			

Race:
Chinese
Cocupation:
BANK MANAGER

Language:
English
Driving Licence Information:
Class: 3A
Date of Expiry:

	nation of the Accident	A CONTRACTOR OF THE		The same of the sa
Type of Accident:	Injury Conveyed By Ambulan	ce Drink No	Date/Time of Accident:	Type of Location Straight Road
Location:		INO	13/07/2023 02:40	
BRADDELL R	OAD			
Weather: Clear	1.2	oad Surface:		
Traffic Flow: One Way	T	raffic Control: ot Controlled		Traffic Volume: Moderate
Type of Collisi	on: ng Vehicles - Side Swipe - S			Anyone conveyed by

Details of V	ehicle Involve	d	Maria Maria		- 1-1-1-1	
Vehicle No.	Туре	Make	Model	Color	0	
JPE3240	Motorcycle		Model	COIO	Condition	No of Passenger
	Wiotorcycle					0
SLH8383H	Car	MEDOFDEO	A 400 EV			
	Cai	MERCEDES BENZ	A180 FL STYLE (R17 HLG)	Green		0

Vehicle No.	Insurance Company	Incurrence Me	1	The second secon
SLH8383H	AIC ACIA DACITIO INCLIDANCE	Insurance No	Effective	Expiry Date
	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100482571-06	03/10/2022	02/10/2023



T/20230713/2079

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

2 of 3 Report No. T/20230713/2079

Tel No: 1800-4519999

CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No					Course of the Real Property
No. of Pedestrian			Use of P	edestria	n Cross	sing: NA
Driver		The state of the s	THE PERSON NAMED IN	V	- 0.000	ing. NA
Name	GOH PECK JOO			ID No		S8618983F
Related Vehicle	SLH8383H (Car)			Conta	ct No.	94560996
Hospital/Clinic	NIL			Class Drivin Licens Expin	g	Class: 3A Date of Expiry: NIL
Date Treatment	NIL		Date Dis		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o		NIL	

Brief Details.

On 13/07/2023 at 1440hrs, I was driving my car SLH8383H along Braddell Road towards Bartley Road. I was driving on the first lane of the 3 lanes road and wanted to change to the middle lane. I signaled my left light for my intention to change lane. While I was still in my lane before I could change lane, suddenly, motorbike JPE3240 squeeze to my right and collided to the right side of my car. I swerved abit to my left before stopping to render help to the rider who had fell of his motorbike.

Ambulance came and conveyed the rider to hospital. Traffic police came and I was advised to lodge traffic accident report. The officer also took the SD car from my in-car camera.

I did not sustain any injury. The right-side mirror and front right wheel rim of my car was damaged due to the accident.



Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel No: 1800-4519999



3 of 3 Report No. T/20230713/2079

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
F /
SR STAFF SGT NURULHUDA
BINTE OMAR

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SGT 3 MUHAMMAD SYAKIR BIN ADANAN
Contact No.: 65476236

Signature Of Informant:	
	0
Date/Time:	9
13/07/2023 17:00	
Classification Of Case:	