

## 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 First Submission .....	07/10/2024 11:11 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	06/10/2024 19:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	BLK 2 TAMPINES ST 73 BASEMENT CAR PARK
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKX1759G
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	MUHAMMAD AZLAN BIN ABDUL LATIFF
NRIC No .....	S8426987E
Email Address .....	azlanltff@gmail.com
Mobile Phone No .....	(Phone) +65-97554209
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Kia
Model .....	SORENTO 2.4(A) GDI
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 .....	2359
Vehicle Fuel .....	Petrol
First Registration Date .....	-
Chassis no .....	KNAPH813MG5139246
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	D24MTPV01004851

#### DRIVER

Name of Driver .....	KIM HEE JUNG
NRIC No .....	S7988114G
Date Of Birth .....	03/02/1979
Occupation .....	Indoor
Driving Pass Date .....	27/09/2012
Driving License Pass Class .....	3A
Driving License Validity .....	Valid
Driving experience .....	12 YEARS AND 1 MONTH
Gender .....	Female
Mobile Number .....	(Phone) +65-96445061
Alt. Phone Number .....	-
Email Address .....	HK7923@YAHOO.COM
Address .....	BLK 2 TAMPINES STREET 73 01-01 SINGAPORE 528823
Address complement .....	-
Postcode .....	-
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 .....	Fire, explosion or lightning
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	1
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	No
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 .....	SON
Gender .....	Male

#### PASSENGER 2

Name .....	SON
Gender .....	Male

#### 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

REFER WITH ATTACHED.

#### ATTACHMENT(S)

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

**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

A: SKX 1759G



## Describe Circumstance of the Accident

On 6/10/2024 at around 1930hrs, I parked my car SKX175914 with my 2 boys at Block 3 Tampines at 73 Keremant car park.

After I turn off car engine and next moment, I smell something and some smoke came out from car front bonnet.

I immediately bring my 2 boys alighted from my car.

Next moment, fire burn the whole car very fast.

Soon after, traffic police, civil defence and fire engine arrived.

Note: Please note that your insurer may have 14 days time frame for you to submit an own damage claim under your own policy, please check your policy for more information.

## 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 & Time

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

## Describe Circumstance of the Accident

As it was a half open car park. My car  
 and it  
 burn fire with black smoke flew up to  
 upstairs and causing neighbour's house wall  
 became black colour. Some neighbour not  
 able to close window in time and causing  
 and deep black powder  
 some bad smell in the neighbour's house  
 area. The car park component like wall,  
 ceiling and some pipes might caused them  
 damaged.

Note: Please note that your insurer may have 14 days time frame for you to submit an own  
 damage claim under your own policy, please check your policy for more information.

## 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  
 & Time

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















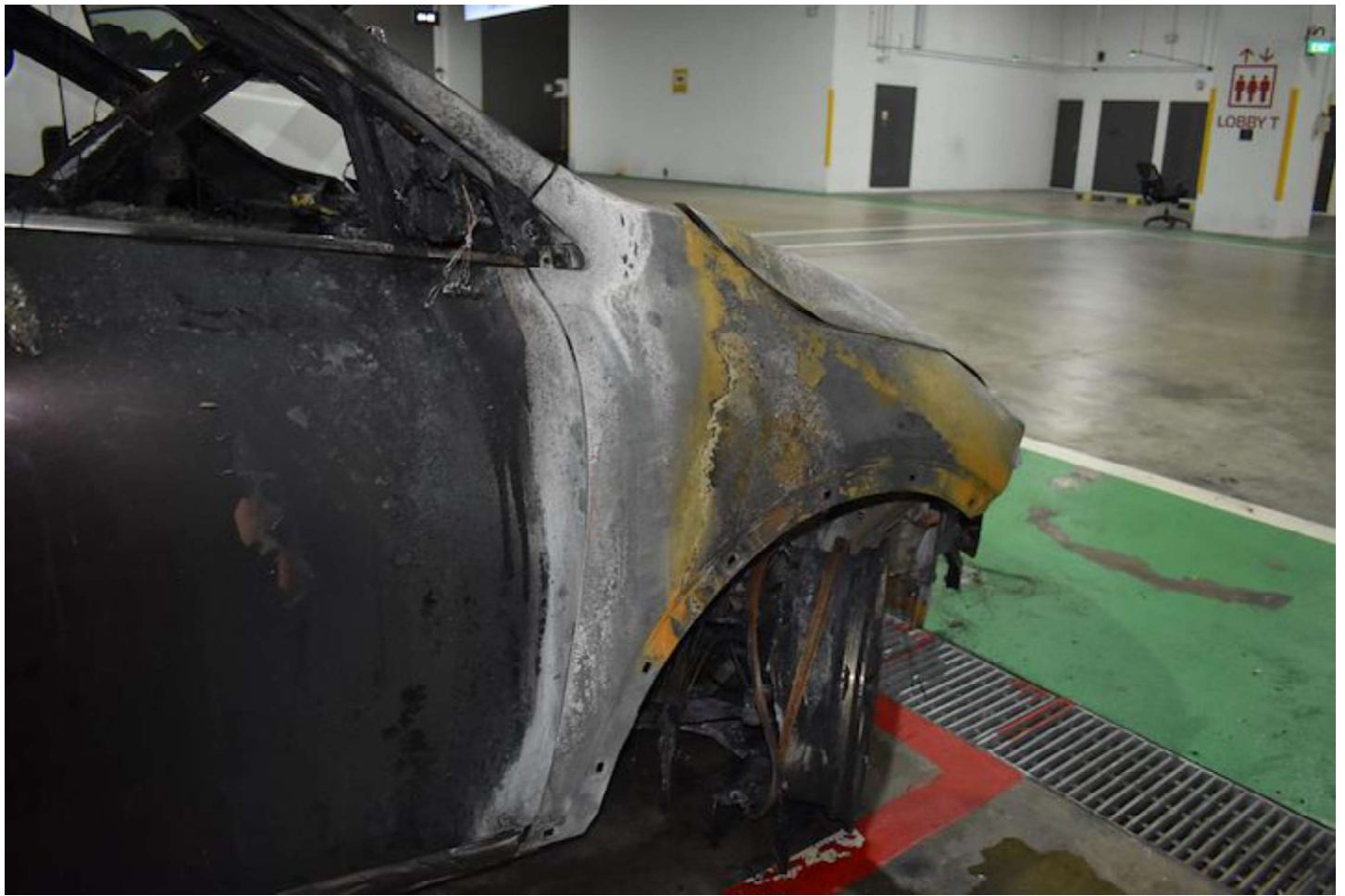






















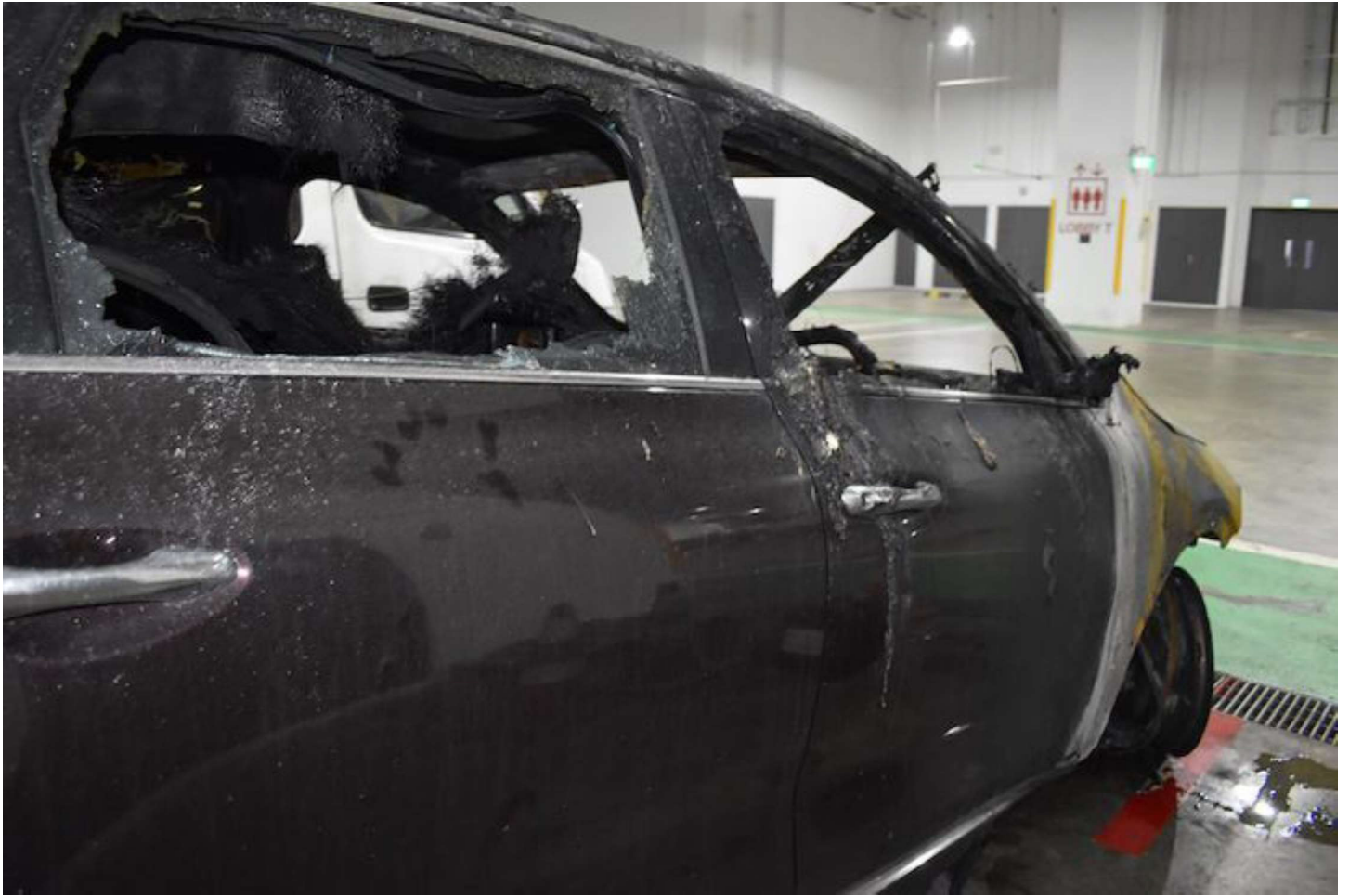








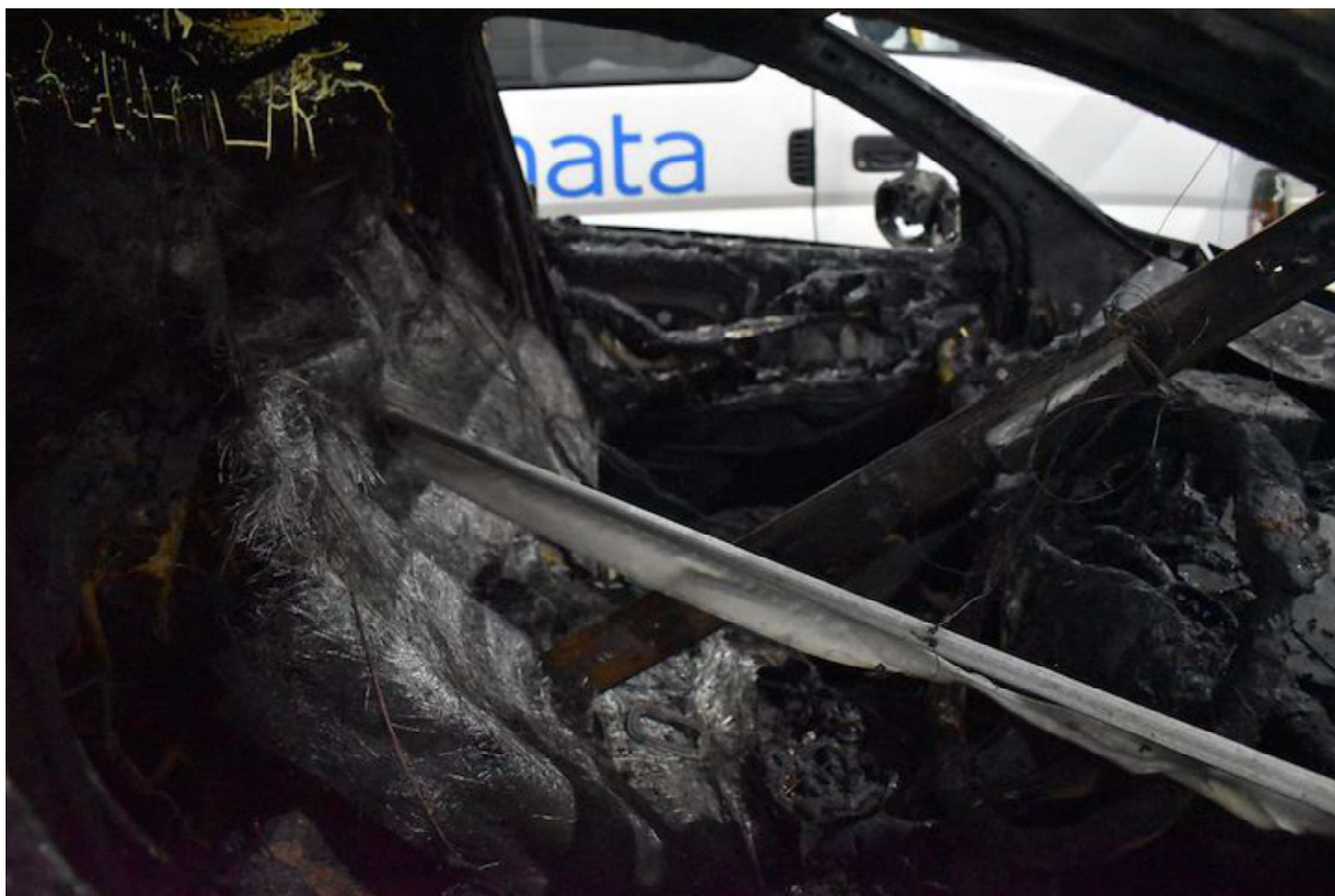


































































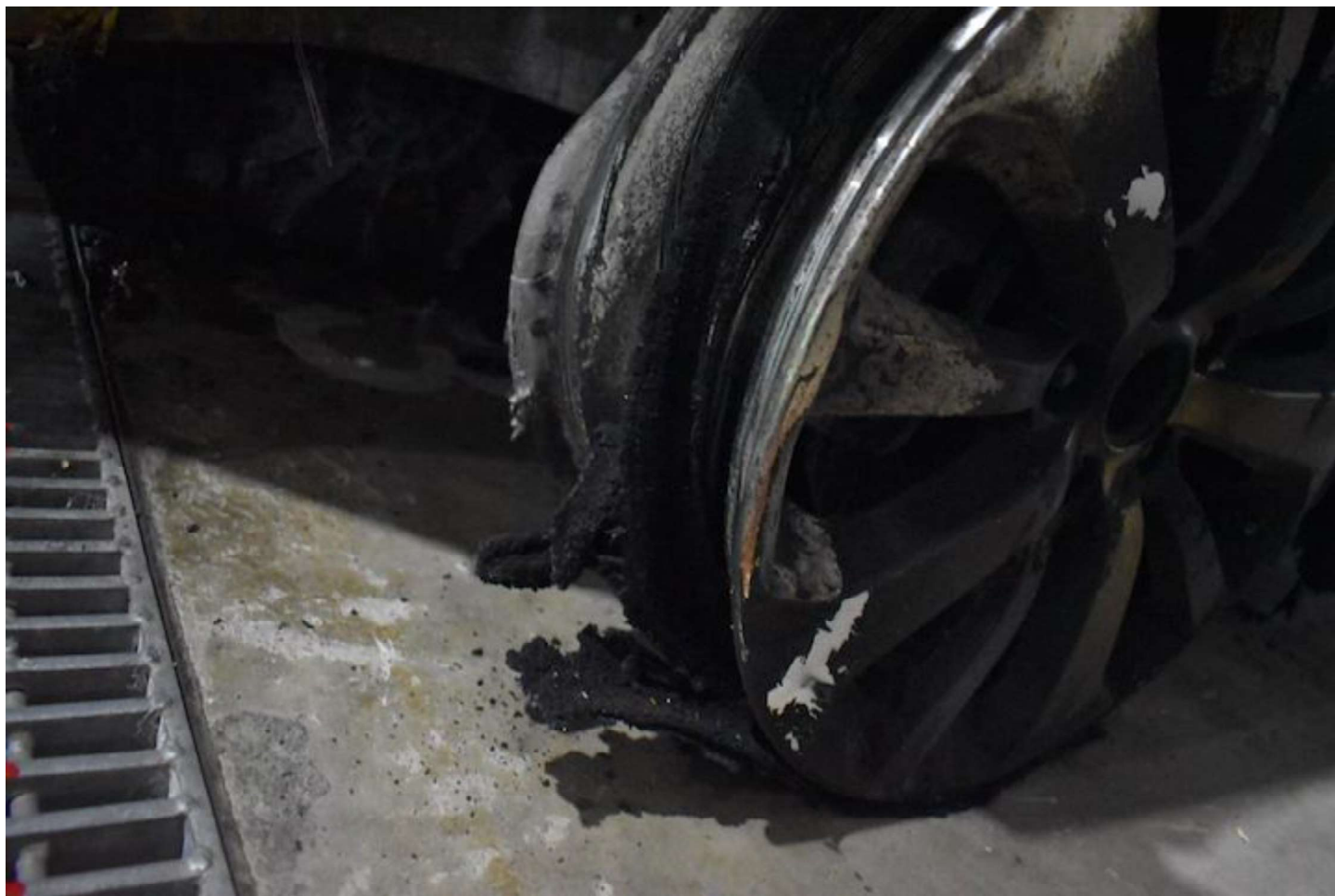










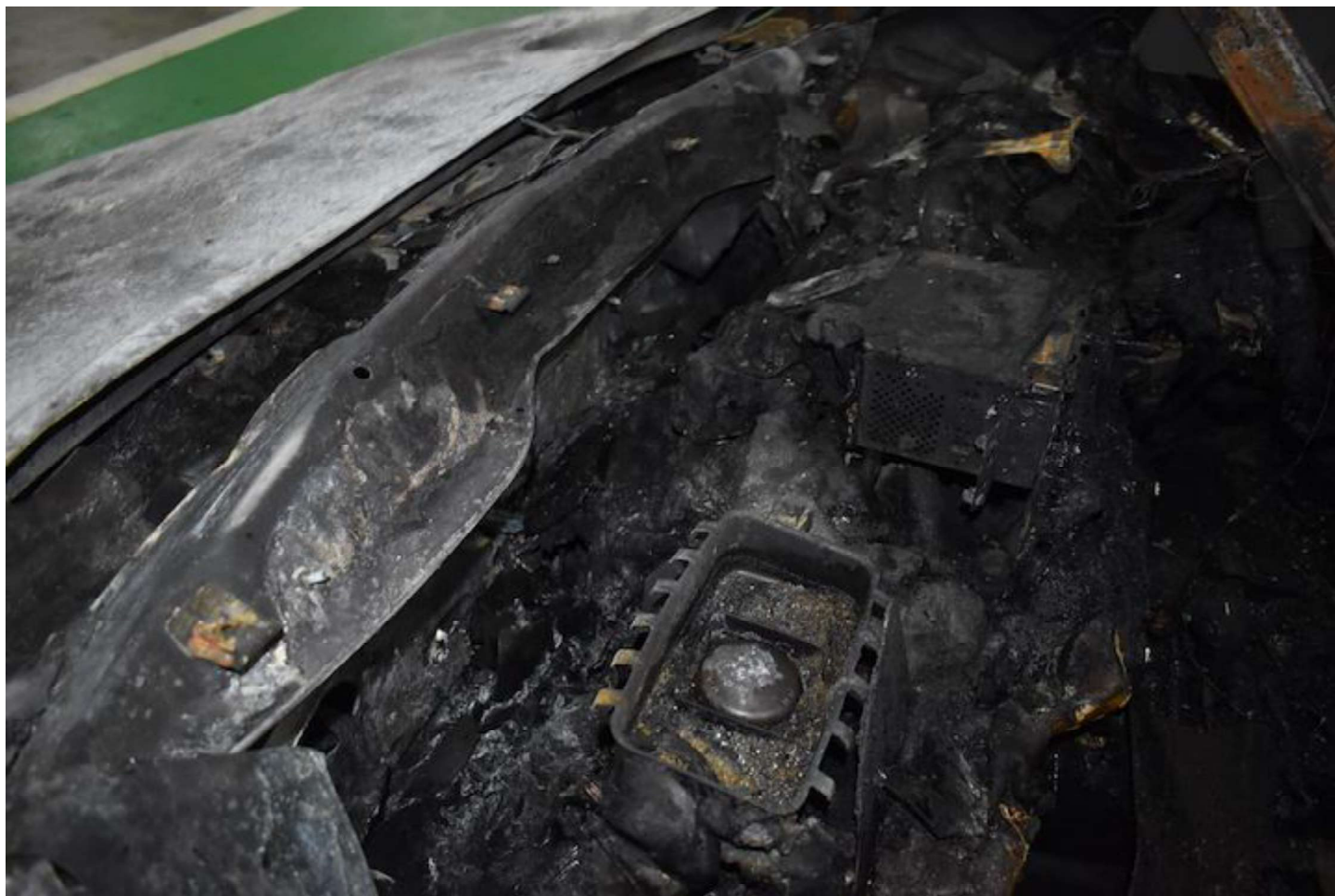


















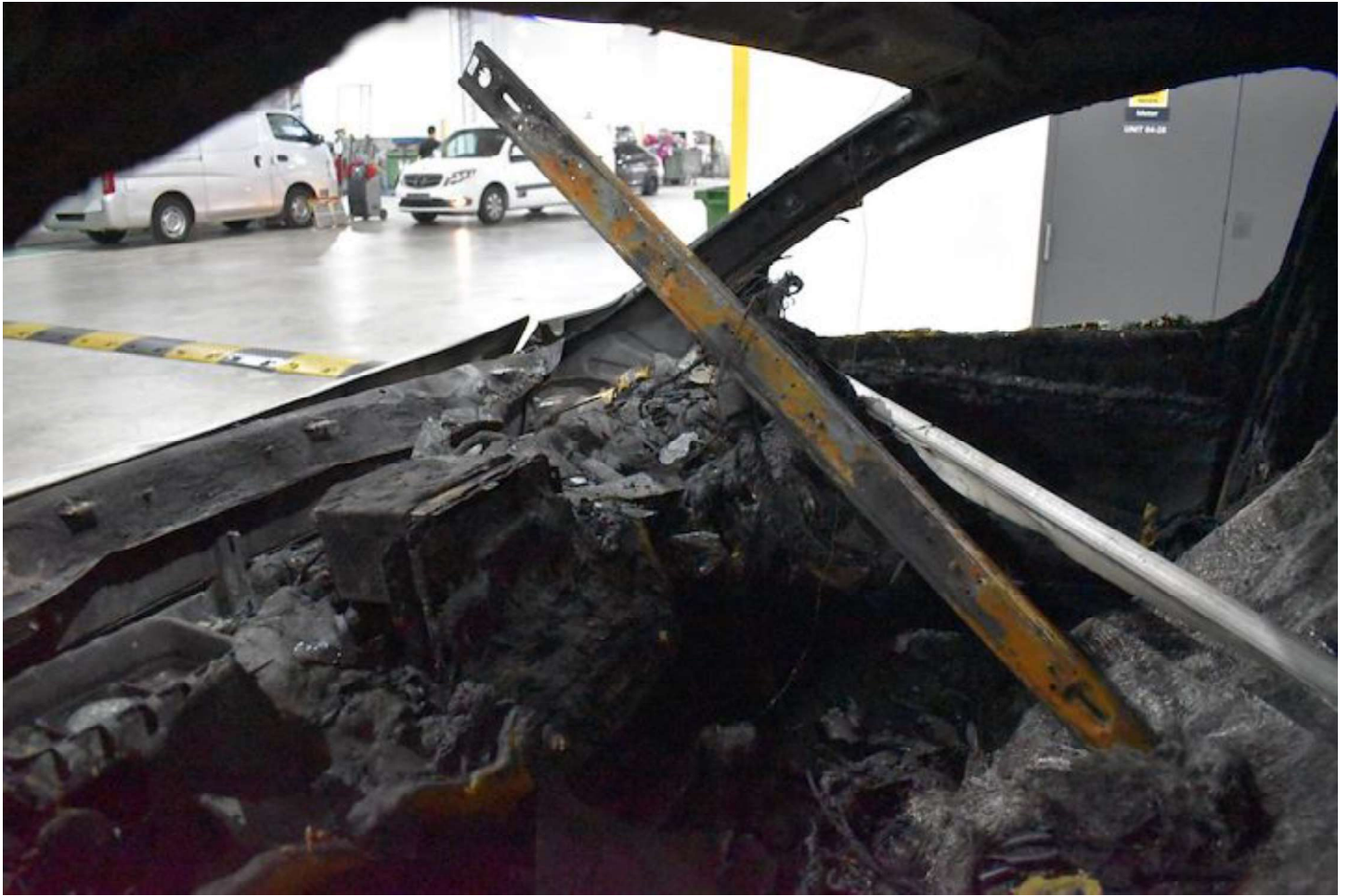


















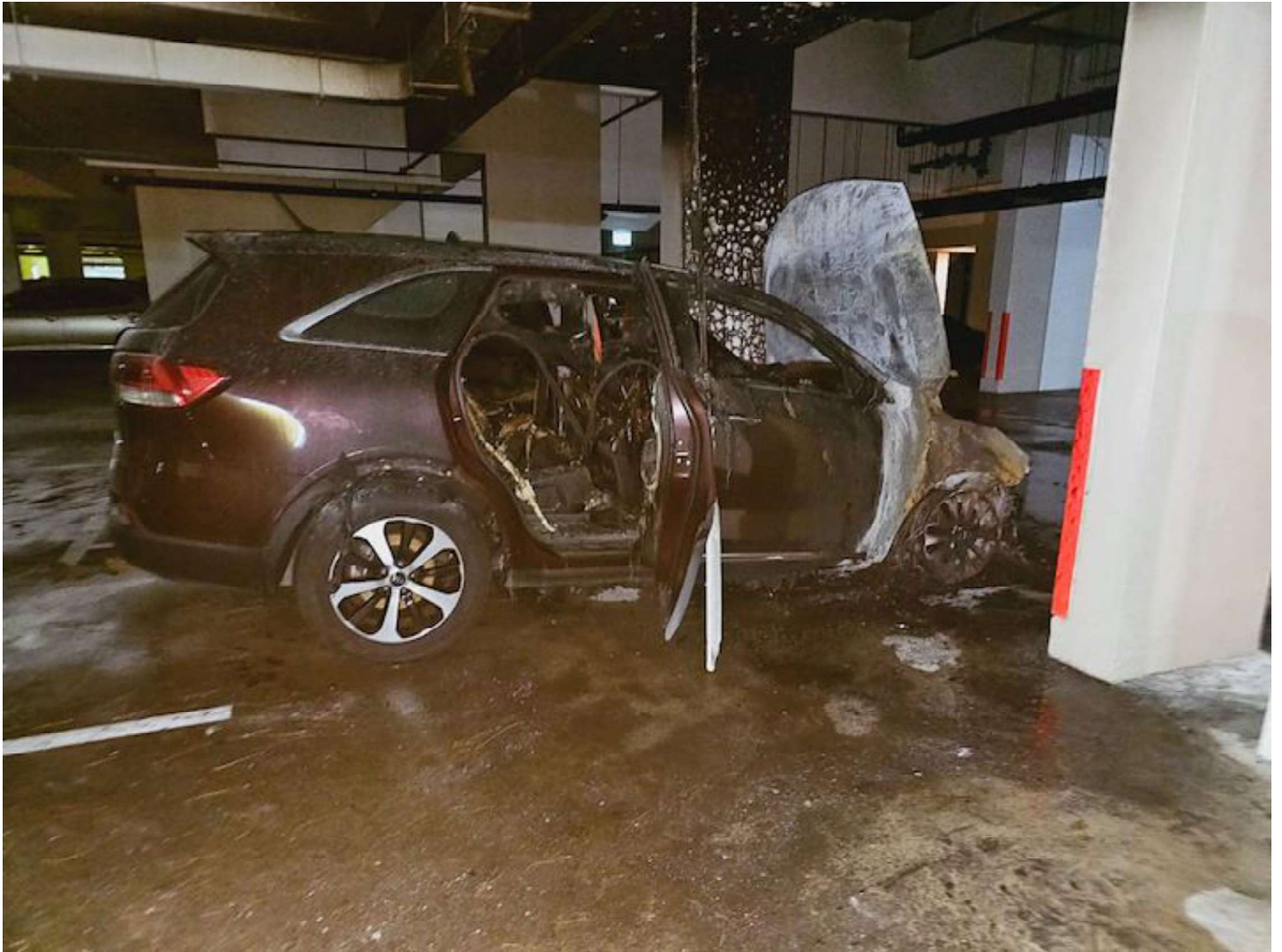




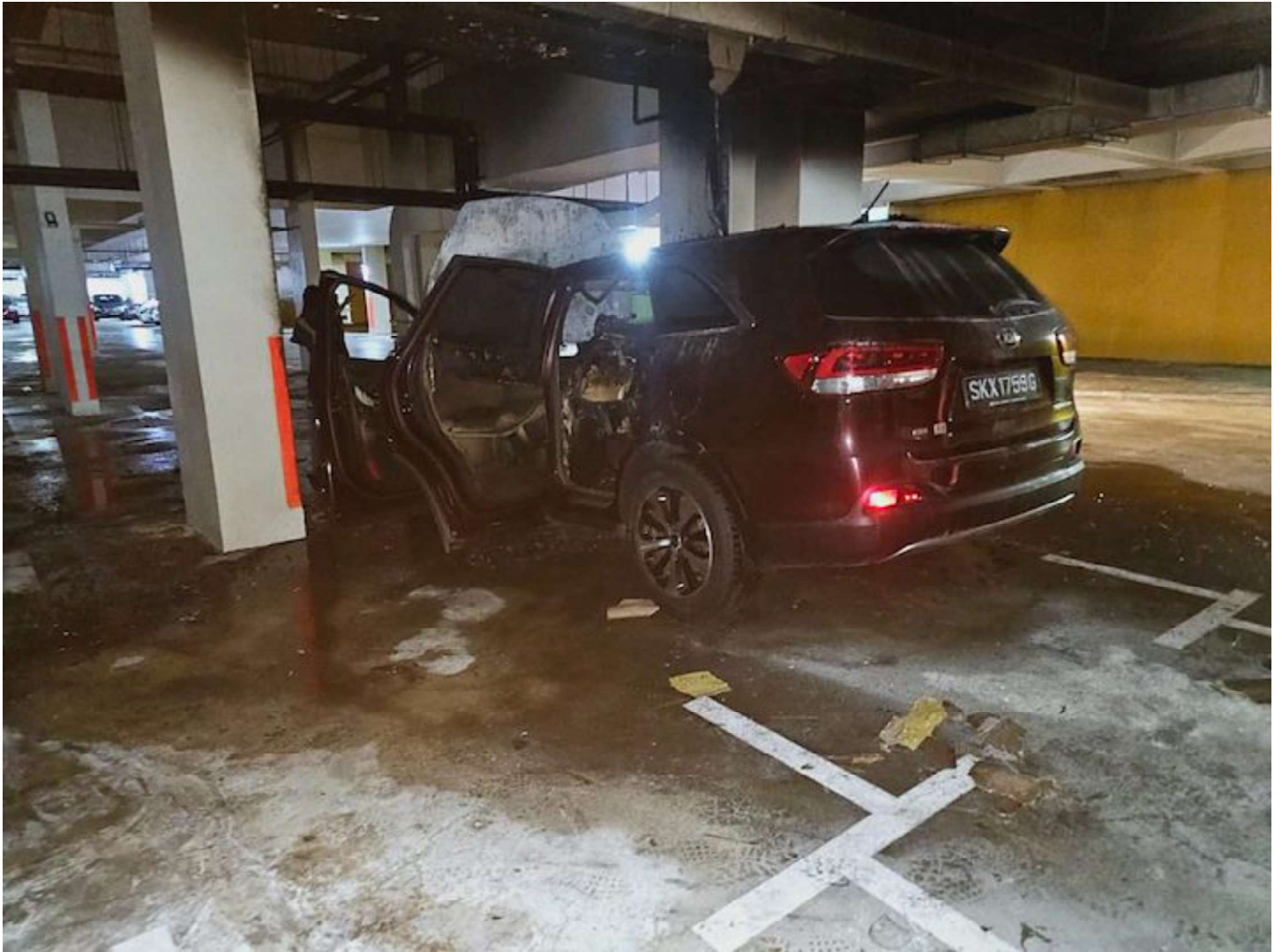












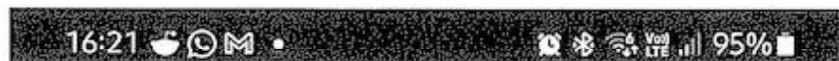












# CERTIFICATE OF INSURANCE

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 193)  
ROAD TRANSPORT ACT 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No. D24MTFV01004851  
Insured MUHAMMAD AZLAN BIN ABDUL LATIFF  
Vehicle Registration No. 81X1752G  
Coverage COMPREHENSIVE - AUTHORISED WORKSHOP PLAN  
Policy Commencement Date 30 MAY 2024 00 00  
Policy Expiry Date 29 MAY 2025 23 59  
Maximum Liability (Section II) MARKET VALUE AT TIME OF LOSS  
Hire Purchase Owner DBS BANK LTD  
Excess\* \$5000 - SECTION I  
Voluntary Excess\* N/A  
Waiver of Excess NOT COVERED  
Windscreen Excess\* \$5100 FOR EACH AND EVERY APPLICABLE CLAIM  
\* Subject to GST wherever applicable

## Persons or Classes of Persons entitled to drive

1. The Insured
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
  - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured, and
  - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

## Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

## Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Centre with the Motor Vehicle within 24 hours of the accident or by the next working day thereafter.

For the list of Accident Reporting Centres, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: (65) 6226 3323

This is a REPLY CERTIFICATE issued to which the Certificate holder is insured in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 193) and Part of the Road Transport Act 1987 (Malaysia), and for the Policy terms, conditions and exceptions of the Private Use Policy set MTD 31A.

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of Issue: 05 APRIL 2024 16 12

**SOMPO ASSIST HOTLINE : (65) 6226 3323**

In the event of road accident, please call our Sompo Assist Hotline immediately. Our MVR Specialist will arrive at the accident site within 20 minutes anywhere in Singapore. Alternatively, you may approach any of our Accident Reporting Centres for assistance in filing your accident report with your vehicle and in 24 hours or the next working day after the accident. Please note that this is a compulsory requirement of whether there is any damage to your vehicle or if you are making a claim under your own policy.

Intermediary Name + Code: BROCKSON INSURANCE BROKER PTE LTD / 11810409 QI Code: 22A 2F10L0D64P10BT\_A

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