

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 |
|-----------------------------------|----------|

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**IMPORTANT NOTICE**

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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
(Name as in NRIC/ID card)

Sketch Plan

Describe Circumstance of the Accident

On 6/10/2024 at around 1930hrs, I parked my car SKX185914 with my 2 boys at Block 2 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 neighbors house's wall
became black color. Some neighbor not
able to close window in time and causing
and deep black powder
Some burn smell in the neighbor's house
area. The car park compound 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)









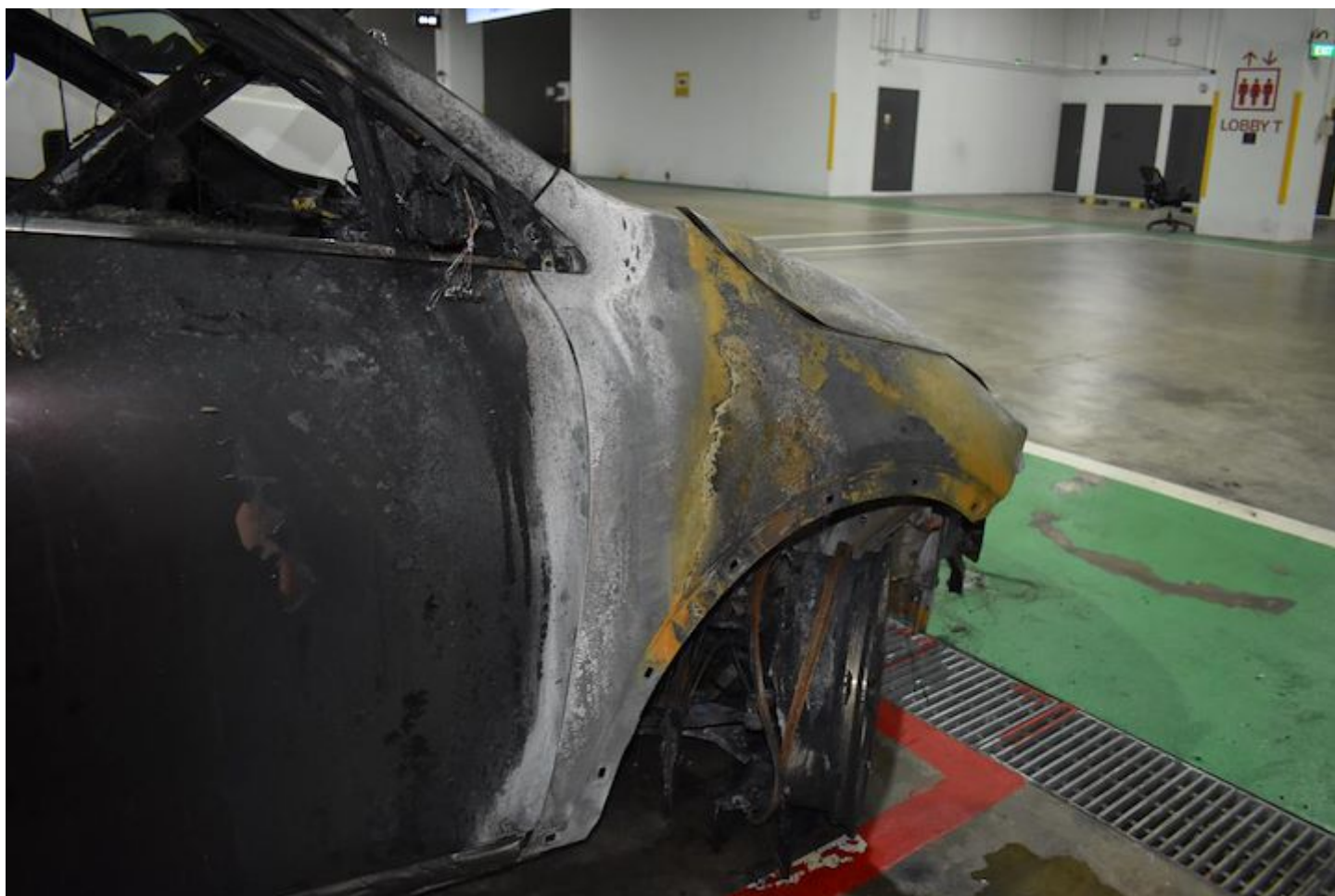


















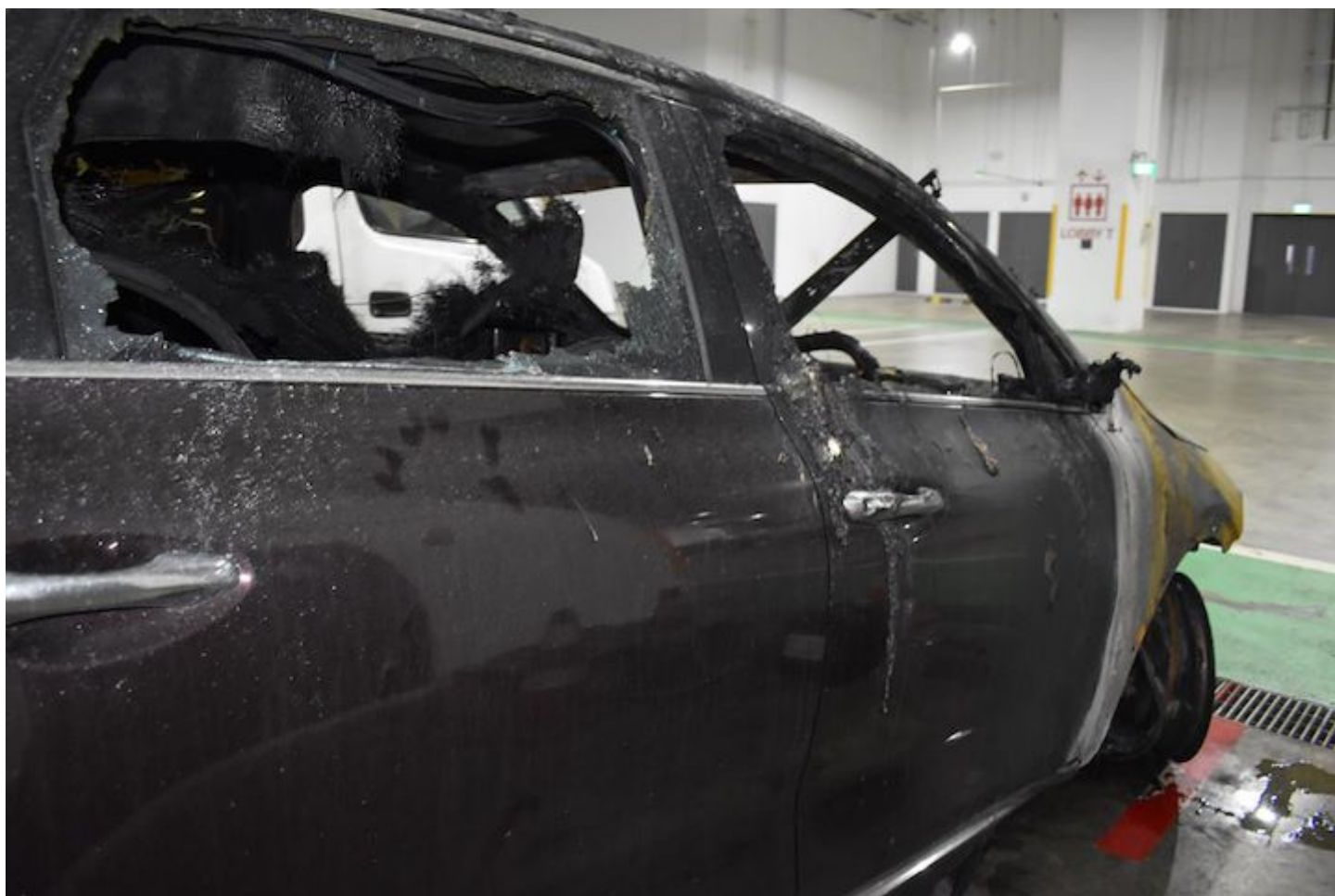






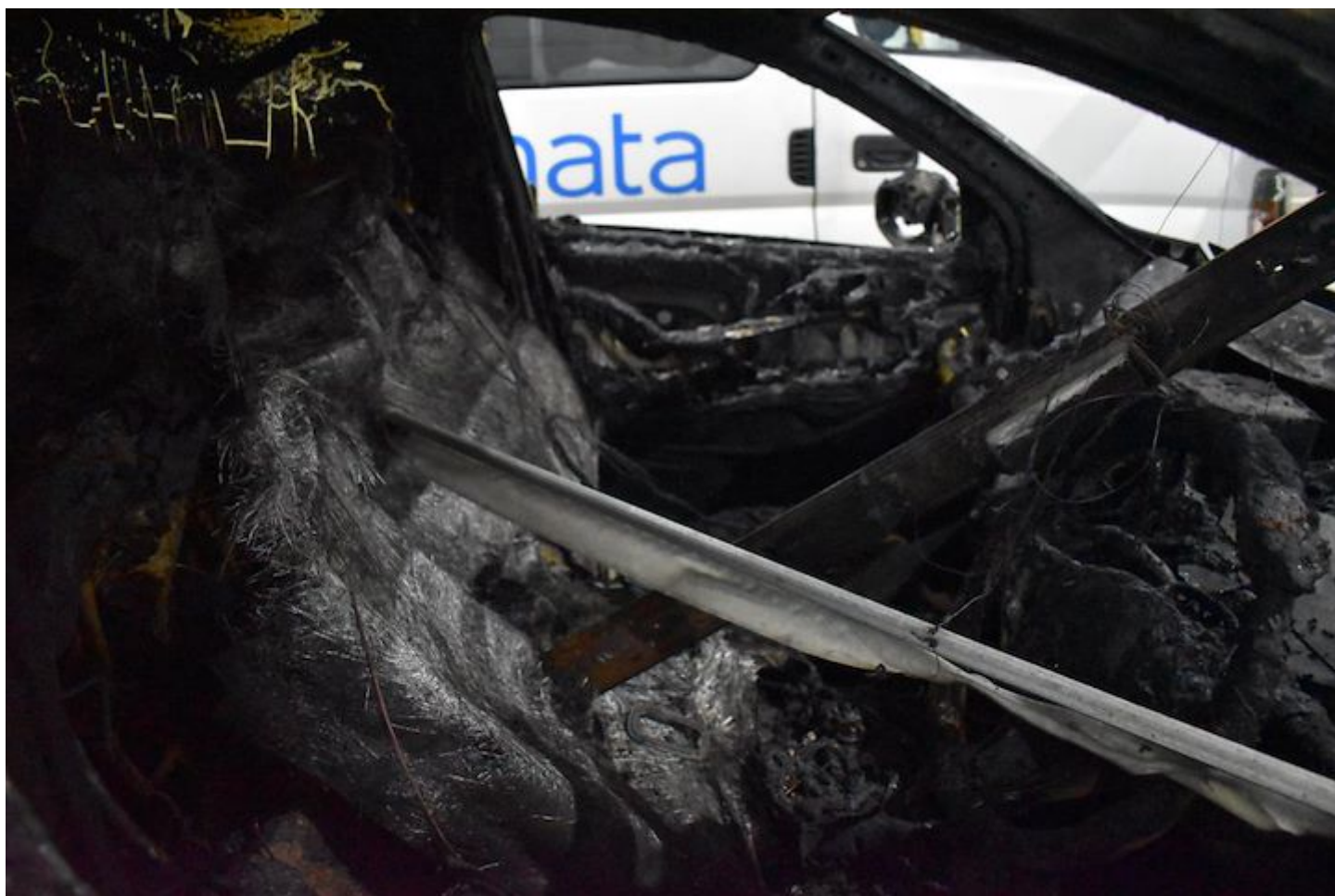








































































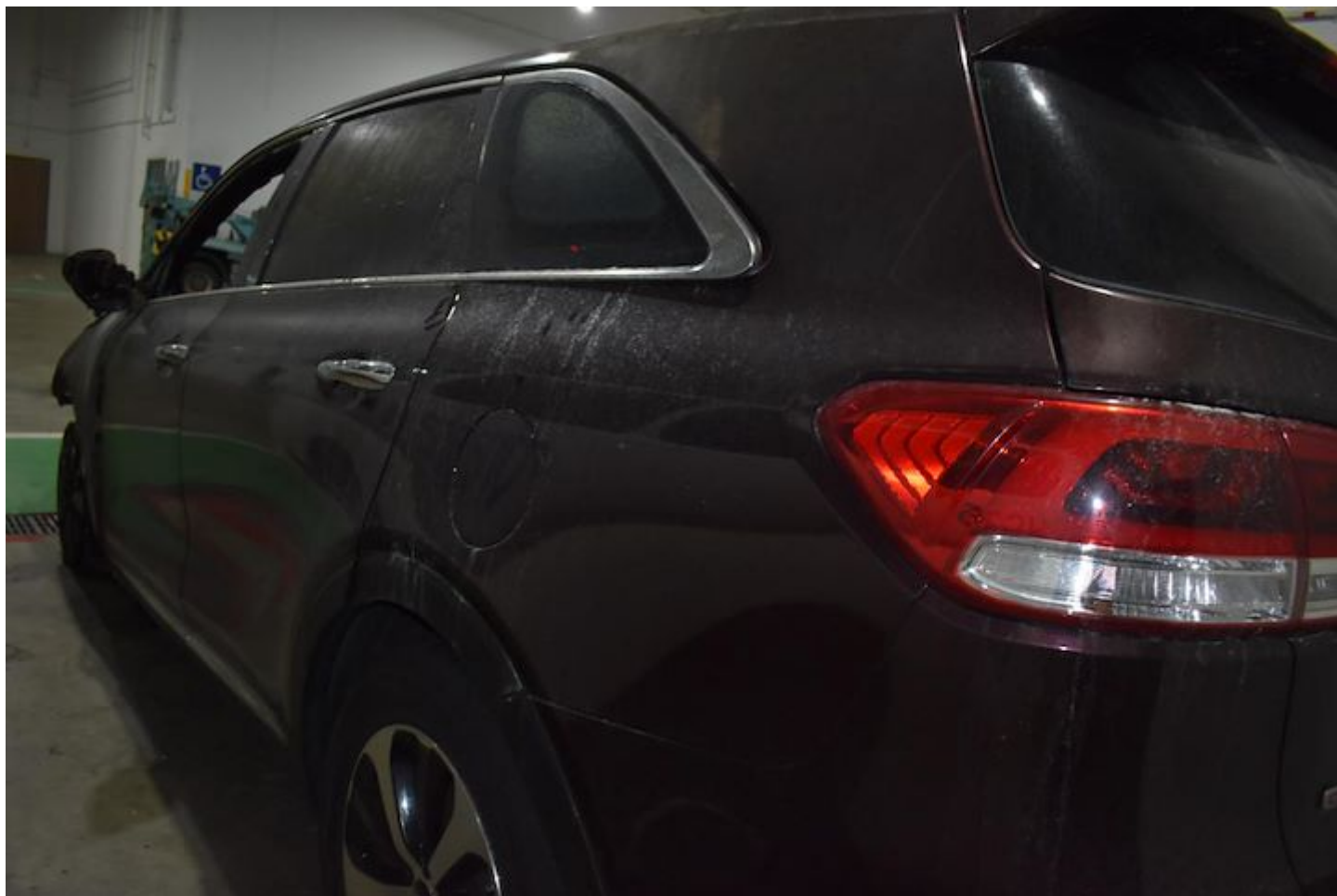










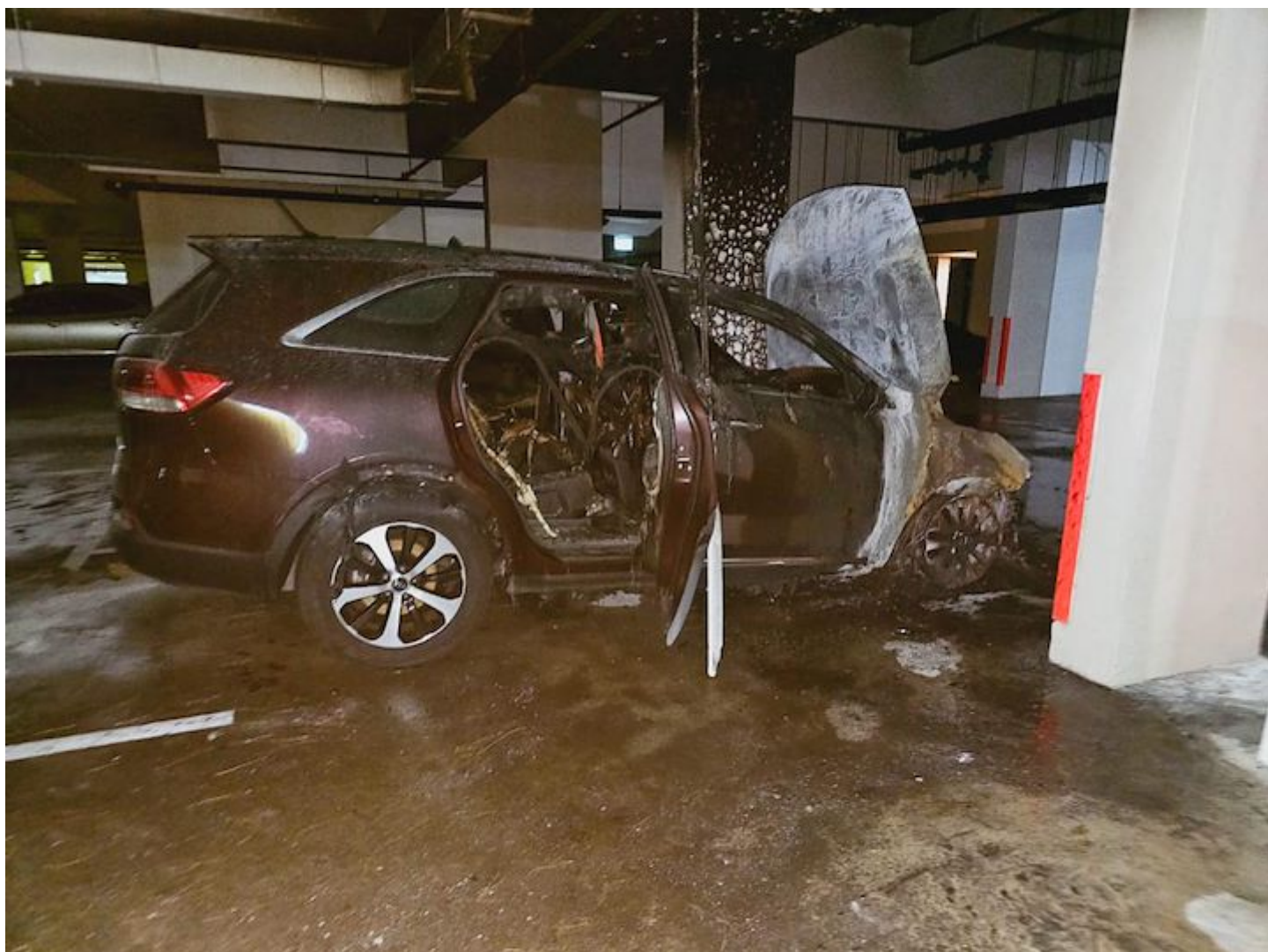


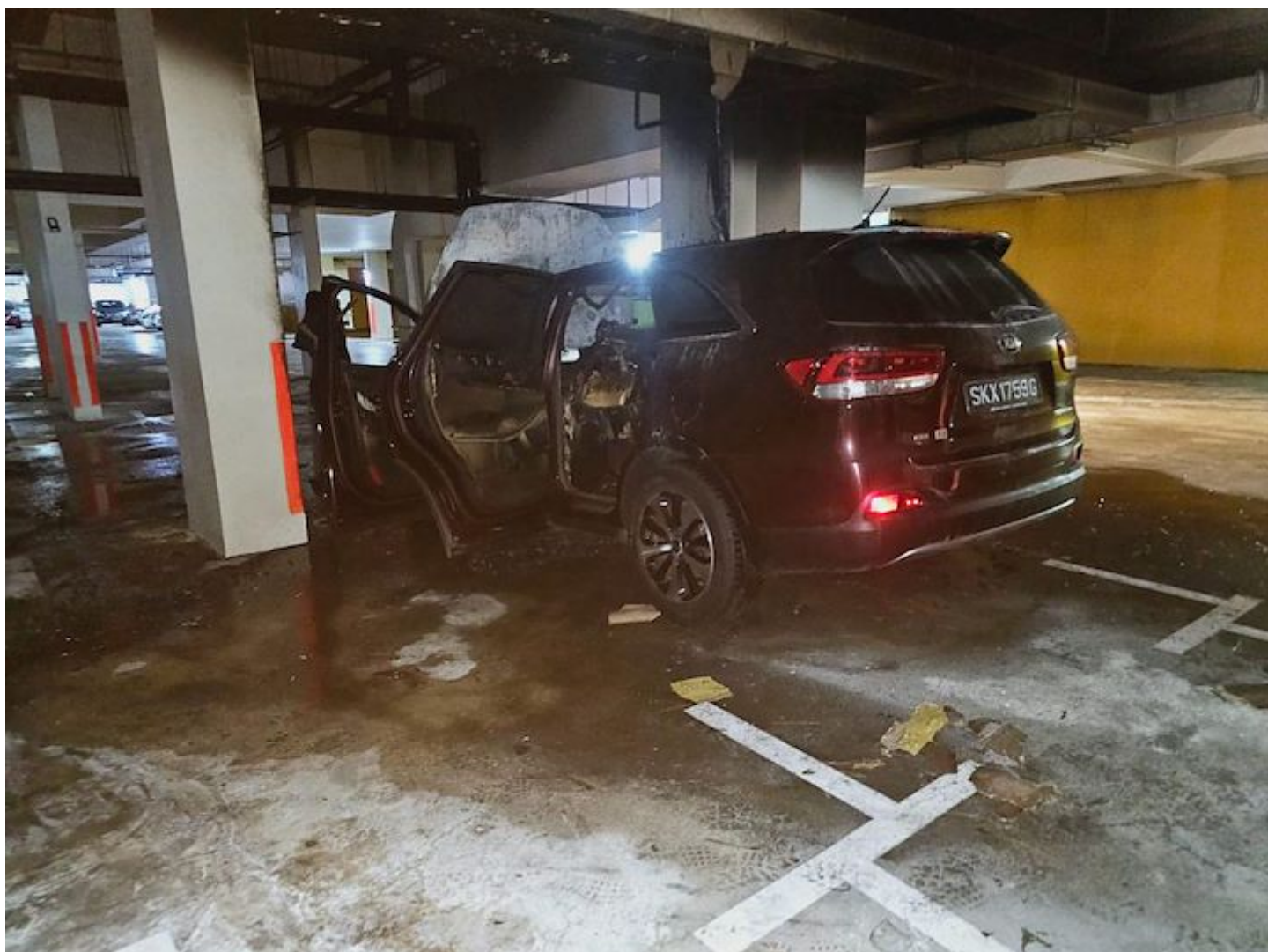


















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CERTIFICATE OF INSURANCE-encrypted.pdf

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. | D24MTPV01004851 |
| Insured | MUHAMMAD AZLAN BIN ABDUL LATIFF |
| Vehicle Registration No. | 51CX1752G |
| 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

- The Insured
- Any other person who is driving on the Insured's order or with his permission
- In the event of the death of the Insured,
 - 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
 - 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 thereof.

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

We warrant that this Certificate of Insurance is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 193) and Part IV of the Road Transport Act 1987 (Malaysia), and the Policy terms, conditions and exceptions of the Private Car Policy set J2P 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 WVS 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 on the next working day after the accident. Please note that this is compulsory regardless of whether there is any damage to your vehicle or if you are making a claim under your own policy.

Intermediary Name + Code: DICKSON INSURANCE BROKER PTE LTD : 11B10400 Qi Code: 20A JFLO6D4P1007_A

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