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 Authorised 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 ability.
- 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.

By the lodgement of this report to the insurers, you hereby con aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	13/11/2017 19:08
Date Of Accident	11/11/2017 13:25
Exact Location Of Accident	WOODLANDS STREET 31
Country/State of Loss	SINGAPORE
I I	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLF1541A
Insured/Policyholder	
Name Of Registered Owner	ISHIWATA TADAYOSHI
NRIC No	S2679813B
Email Address	ISHIWATA@PSERAYA.COM.SG
Mobile Phone No	(LOCAL) +65-98475115
Alternative Phone No	OTHERS-98475115
Vehicle Particulars	
Manufacturer	SUBARU
Model	OUTBACK-2.5 I-S CVT AWD SR (A)
Exact Purpose for which vehicle was being used at time of accident	t .
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

Policy Number 2100478696-01

Cover Note Number

Driver

Name of Driver ISHIWATA TADAYOSHI

NRIC No S2679813B Date Of Birth 29/04/1966 **INDOOR** Occupation Date Of Driving Pass 04/11/1997

Driving Experience 20 YEARS AND 0 MONTHS

MALE Gender

Mobile Number (LOCAL) +65-98475115

Fax Number

Contact Number OTHERS-98475115

ISHIWATA@PSERAYA.COM.SG **EMail Address**

Address APT BLK 618 JURONG WEST STREET 65

14-424

Postcode 640618

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

0 1/1:1

Insurance Company of Driver's Own Vehicle

_

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions RAINING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

Details of Police Action

Was the accident reported to the police?

If Yes,Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Refer Sketch Plan

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

Sketch Plan Pg. 1

Singapore Accident Statement

Accident Date & Time: 11 NOV 20	17 at 1325 hrs
A a a S J a met T a a a sti	Street 31
Vehicle Number: SLF 1541A	Make/Model: SUBARU OUTBACK?5
Policyholder Name: Ishīwata Tac	
NRIC: 52679813B	Mobile: 48475115
Email: Tohtwata@pseraya	
Insurance Company: A. (-)	
Policy Number: 2100 478696-01	Cover Note:
Policy Coverage: Comprehensive()	hird Party() Third Party Fire & Theft()
State Action Taken: Claim Own Policy() Cl	laim Third Party() Reporting Only()
Driver Name: ISHTWATA TADAYOSHI	
NRIC: 52679813B	Mobile: 98475115
Date Of Birth: 29 APR 1966	Driving Pass Date: 16 Oct 2003
Gender: Male(V) Female()	Occupation: Indoor(V) Outdoor()
Address: BUK 618 JURONG INDEST	5765 #14-424 S640618
Is driver an employee of the Insured's Company:	Yes() No(V)
If No, Relationship of the Driver with the Insured:	
Owner(Spouse() Friend() Relative Weather Conditions: Clear() Raining() O	c() Children() Sibling() thers()
O(V)	thers()
Was any foreign vehicle involved in this accident?	
	Yes(), No()
	Yes() No() Novy only
	ST. () Att. J. D. Fr. B ()
	Yes() No(√) Attach Police Report, if any
rd Party Name: MDHAMED EUSOFF 5/0	SEENI MOHAMED
emole Number: SHD 4433S	Make & Model: HUNDAI
2/01/010	Mobile:
itness Details (if any):	
ther Details (if any):	
,	

Sketch Plan Pg. 2

SKETCH PLAN

IMPORTANT NOTICE

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

Policyholder's Signature / Date & Time

B

Woodlands Ave 1

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Page 4 of 22

Sketch Plan Pg. 3

Describ	pe Circumstances of the Accident
	On 11 NOV 2017 at 1325 hrs, my car (SUF 1541A) was
	driving at weedlands street 31. Refor turn to the rist
	to car park, infront lorry as was stopped and also my car
	On 11 NOV 2017 at 1325 hrs, my car (SUF 1541A) was driving at Weedlands street 31. Refor turn to the right to car park, infront lorry as was stopped and also my car (SUF 1541A) was slow down and stopped. Just after that TAXI (SHD \$4335) was hit my car (SUF 1541A) From
	TAXI (SHA 44335) was hit my car (SUP 1541A) from
	pehind
(2)-160	

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

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Ishiwata Tadayoshi : 16 Aug 2017 To 15 Aug 2018

Period of Insurance Engine No. : FB25Y357538

Chassis No. : JF2BS9KC2GG039245 Vehicle No. Policy No.

: SLF1541A : 2100478696-01

Endorsement No. Issued Date

: 06 Jul 2017

ABOUT THE COVER

Make/Model : SUBARU OUTBACK 2.5 I-S

Engine Capacity/Tonnage : 2,498.00 CC Driver Restriction : NA

Sum Insured : Market Value

First Year of Registration : 2016

Off Peak Car: No

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 \$3,000 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

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 (10 days) 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1997 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$1400 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Ishiwata Tadayoshi - \$1400 (Own Damage)

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

1,Motor Image Enterprises Pte Ltd. Add: 19 Lorong 8 Toa Payoh Singapore 319255 64170100

For other. Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency holline at +66 6338 6200. Alternatively, you may refer to AIG website www.aig.com.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: MayBank

I/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 (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0500619214

TAN CHONG CREDIT SUBARU-TCK 911 BUKIT TIMAH ROAD SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

AIG Asia Pacific Insurance Ple. Ltd.







