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 $\underline{\text{completed by the Policyholder and/or the Authorised Driver.}}$
- 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 policyliability 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 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 Report	08/01/2018 09:46
Date Of Accident	07/01/2018 14:40
Exact Location Of Accident	ALONG JALAN BESAR ROAD TOWARDS ROCHOR CANAL RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKW7748D
Insured/Policyholder	
Name Of Registered Owner	ABDUL HALIM BIN ABDULLAH
NRIC No	S1736507Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94237334
Alternative Phone No	Others-94237334
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 DUAL WT-I (A)
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?	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.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100438101-02
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD ZAKIR BIN ABDUL HALIM

NRIC No S9433496I Date Of Birth 11/09/1994 Occupation **INDOOR** Date Of Driving Pass 13/07/2015

Driving Experience 2 YEARS AND 5 MONTHS

MALE Gender

Mobile Number (LOCAL) +65-81371372

Fax Number

Contact Number

EMail Address NOEMAIL Address Postcode BLK 223 BUKIT BATOK EAST AVE 3 #06-152

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

CHILDREN

Vehicle Registration Number of Driver's Own Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

KINDLY REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SBS3404A
Vehicle Make/Model/Colour SG BUS

Details Of Properties

Vehicle Category BUS

Name of Driver NG MUI SHEE ANDY NELSON

NRIC/Passport Number S7629626Z Contact Number 97333844

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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 lodgment 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)
 - (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 gents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder

GIARAN Sketchringsorm VA

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

08/01/18 1042har

Reporting Centre Personne s Signature

NRIC/FIN No.:

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SKETCH PLAN	F . 9.				
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1976 1111	2320011	9042	1 3		
DESCRIBE CIRCUMSTANCES OF THE ACCIDEN					
I, Muhammad Zakir Bin Abdul	Halim, 89433496	I, was d	riving ale	ong Jalan Besar	
towards Rochor Canal Rd (Sim)	im Square) when	I came	to us	top at the redlight of	
towards Rochor Canal Rd (Sim) T-junction of Jalan Besar and	Verrasamy Rd	behind yell	faxi 84c	7493D, When the	
high-I turned green, I started	to move howeve	t whilst	in stylio	num porthon I	
noticed a green bus thru the d	over scot wooday	o vem i	lose to m	e. At whost 1440 hrs	
I heard a scratching sound of	nom the rear v	ight section	n of my	car. As the	
I heard a screetching sound for tower transit bus 66, 9883404	tA went pastme	on the 30	d lane :	I realisted that my car	
, had been hit by the bos. I have n	o visible injunes	and de	cided to	stop behind the	
bus which had moved into lan	e 1, the bus la	ne, with 1	nazard ky	ut on. After moving	
behind the buy from the 2nd 10	we to lare 1.	I exited	the vehic	e to look 44 the	
rear right section of the ca	r which looked	like the	paint wa	a scratched. We	
exchanged particulars and the.	tower transit du	wer, NG	MUSE SH	EE ANDY NELSON.	
876296262, HP: 97333844 act	ed me if I u	oas alright	which I	said I way okay,	
NELSON contacted his company and	took photos of	the damag	e and w	e left the scene	
as no one enstanced mable injur	. 29				
	2/- 08	101/18			
			200000000		
Important:			- Rep	orting Only	
You have been advised by the workshop that in the event that you wish to			- Claim OD		
	claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame			- Claim TP	

DECLARATION

I/WE declare the foregoing particulars are true in every respect.

Policyholder's si	gnature
Date & Time	
	loul Hory

from the day of the occurrence.

Driver's Signature
(if driver not the policyholder)

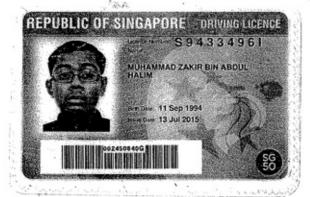
(if driver not the policyholder)
Date & Time

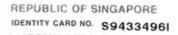
Reporting-Centre Personnel's Signature Name:

Claim QD/ TP at other workshop

Nric/Fin No.

08/01/18 1041 hrs









MUHAMMAD ZAKIR BIN ABDUL HALIM

محبد زاكير بن عبد الحيم _{Placo}

MALAY Date of birt 11-09-1994

SINGAPORE

19433496

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1736507Z





ABDUL HALIM BIN ABDULLAH

عبدالخاليم بن عبدالنه معه

MALAY Date of Biots

SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

100063 大线 POPULAR \$ \$ 0.35

A STATE OF THE STA



12-03-2009

APT BLK 223 BUKIT BATOK EAST AVENUE 3 #06-152



NACH S1736507Z

APT BLK 223 BUKIT BÅTOK EAST AVENUE 3 706 - 152 SNGAP ORE 650223 SNGAP ORE 550223 SNGAP OZ - 05 - 2003



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Abdul Halim Bin Abdullah Period of Insurance : 16 Nov 2017 To 15 Nov 2018

Engine No. : 1ZRY213142

Chassis No. : MR053REH104539177 Vehicle No.

: SKW7748D : 2100438101-02

Policy No.

Endorsement No. Issued Date

: 09 Oct 2017

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6 DUAL

Engine Capacity/Tonnage: 1,598.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2015

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, demastic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tailion, 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 1500cc - 1600cc Optional

* 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, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Named Driver and Excess (where applicable)

Abdul Halim Bin Abdullah - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out, at the Sole Agent's workshop.

For other Approved Reporting Centres/Mod Authorised Repairers, please contact our 24-hour accident emergency holine at +65 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: HONG LEONG FINANCE 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 \$2 the Read Transport Act, 1987 (Melaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Melaysia).

0030210000

AIG ASIA PACIFIC INSURANCE PL

SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE





