

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 withholding 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 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 17:04
Date Of Accident	08/01/2018 07:00
Exact Location Of Accident	UPPER SERANGOON RD NEAR WOODLEIGH MRT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM7557C
Insured/Policyholder	
Name Of Registered Owner	LATIFAH BTE WAGIMAN
NRIC No	S2180099F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-85001446
Alternative Phone No	Home-85001446

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH 2.0 AUTO
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
If No, Please state action to be taken	
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	1700042587
Cover Note Number	

Driver

Name of Driver	AMIRUL BIN SURANI
NRIC No	S8631125I
Date Of Birth	21/10/1986
Occupation	OUTDOOR
Date Of Driving Pass	07/05/2009
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85001446
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	APT BLK 680C JURONG WEST CENTRAL 1 #10-58 SINGAPORE 643680
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD ON COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
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

REFER TO SKETCH PLAN

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJV5667J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	VINCENT
NRIC/Passport Number	S2503122B
Contact Number	91911330
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : LATIFAH BTE WAGIMAN
 Period of Insurance : 21 Sep 2017 To 20 Sep 2018
 Engine No. : 3ZRA512295
 Chassis No. : JTDGJ20W905003123

Vehicle No. : SJM7557C
 Policy No. : 1700042587
 Endorsement No. :
 Issued Date : 24 Aug 2017

ABOUT THE COVER

Make/Model : TOYOTA Wish 2.0
 Engine Capacity/Tonnage : 1,987.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2010
 Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

Any person other than the Policyholder who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify any authorised driver other than the Policyholder 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 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 156) 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

Windscreen : \$100

Named Driver and Excess (where applicable)

AMIRUL BIN SURANI - \$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/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at 166 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: TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

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. 156), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503982000

KING HOLDINGS PTE. LTD.
 100A BELL STREET ROAD
 SINGAPORE 110106

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Monile

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORIZED REPRESENTATIVE

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : AMIRUL BIN SUKAWI
VEHICLE NUMBER : SJM7557 C
DATE/TIME OF ACCIDENT : 8/1/18 0700hrs
PLACE OF ACCIDENT : UPPER SERANGGAM ROAD
THIRD PARTY VEHICLE (IF ANY) : _____

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

I was from home, Jln West Cctrd 1, going to Kampong Ampat

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?


No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Head to car damage - Front of the car severely damaged

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No.


Name: AMIRUL BIN SUKAWI

I Affirmed The Above Information Is Given To My Best Knowledge.

2991213



NRIC No. S2180099F



Blood Group Date of issue
O+ 21-11-1997

APT BLK 680C JURONG WEST CENTRAL 1 #10-58
SINGAPORE 643680
NRIC No. S2180099F Date: 16-05-2002 No. 4298723

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2180099F



Name

LATIFAH BTE WAGIMAN

Race

JAVANESE

Date of Birth

27-03-1961

Sex

F

Country of Birth

MALAYSIA



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

Class 3
Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver, and other motor vehicles with unladen weight \leq 2500kg

EFFECTIVE DATE
07 May 2009

Handwritten:
85001446
GBC2145M

Licence No: S86311251

NP 428A

5631552

NRIC No: S86311251

Date of Issue:
18-07-2016

Address:
APT BLK 680C JURONG WEST CENTRAL 1
#10-58
SINGAPORE 643880

REPUBLIC OF SINGAPORE DRIVING LICENCE

Name: AMIRUL BIN SURANI

Birth Date: 21 Oct 1986

Issue Date: 19 Jul 2016

NRIC Number: S 863 11251

Barcode: 002589910G

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S86311251

Name: AMIRUL BIN SURANI

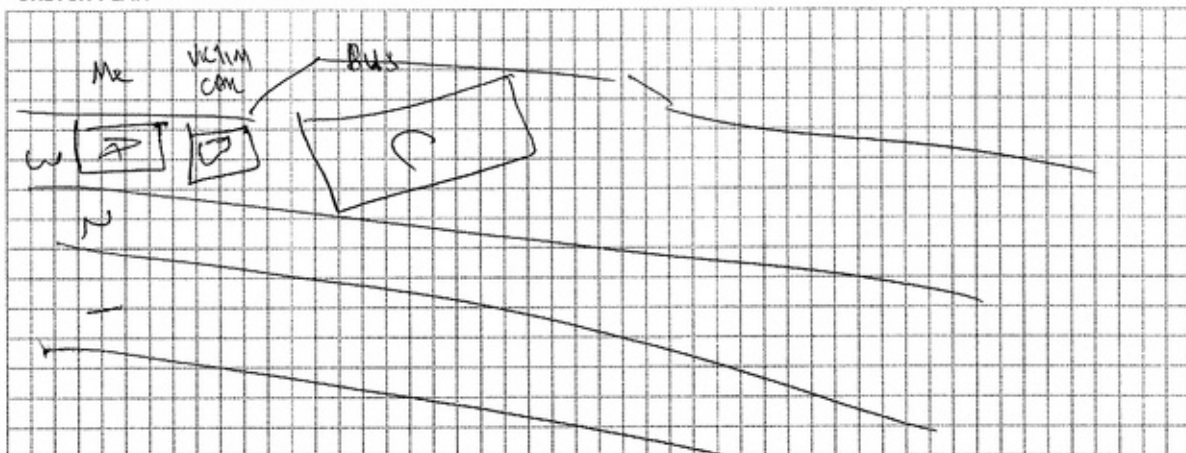
Race: JAVANESE

Date of Birth: 21-10-1986

Country/Place of Birth: SINGAPORE

Sex: M

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

It was raining along upper Serrington road at about 11:00 am. There was heavy traffic and I was behind a bus and a car. While approaching a bus stop the bus suddenly brake which resulted in the car behind brake suddenly. As it was raining, I was misjudged the braking distance between the car in front and myself thus I rear ended it. Thankfully the impact was not so great and nobody got injured.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- | | |
|-------------------------------------|----------------------------------|
| <input type="checkbox"/> | - Reporting Only |
| <input checked="" type="checkbox"/> | - Claim OD |
| <input type="checkbox"/> | - Claim TP |
| <input type="checkbox"/> | - Claim OD/ TP at other workshop |

DECLARATION

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

Latifa 8/1/18
FOS h.r

Policyholder's signature
Date & Time

ch 8/1/18 1700

Driver's Signature
(if driver not the policyholder)
Date & Time

[Signature]

Reporting Centre Personnel's Signature
Name:
Nric/Fin No.

SKETCH PLAN

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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) 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.
- (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.

 8/1/18
Policyholder's Signature
Date & Time: 1710 hrs

 8/1/18 1700 hrs
Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

Enquire Transfer Fee

Vehicle Details	
Vehicle No. :	SJM7557C
Vehicle Type :	P11 - Passenger Station Wagon/Jeep/Land Rover
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	TOYOTA
Vehicle Model :	WISH 2.0 AUTO
Chassis No. :	JTDGJ20W905003123
Propellant :	Petrol
Engine No. :	3ZRA512295
Engine Capacity :	1987 cc
Maximum Power Output :	106.0 kW (142 bhp)
Maximum Laden Weight :	1945 kg
Unladen Weight :	1380 kg
Year Of Manufacture :	2010
Original Registration Date :	21 Sep 2010
Lifespan Expiry Date :	-
COE Category :	B - Car (1601cc & above)
Quota Premium :	\$44,129.00
COE Expiry Date :	20 Sep 2020

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



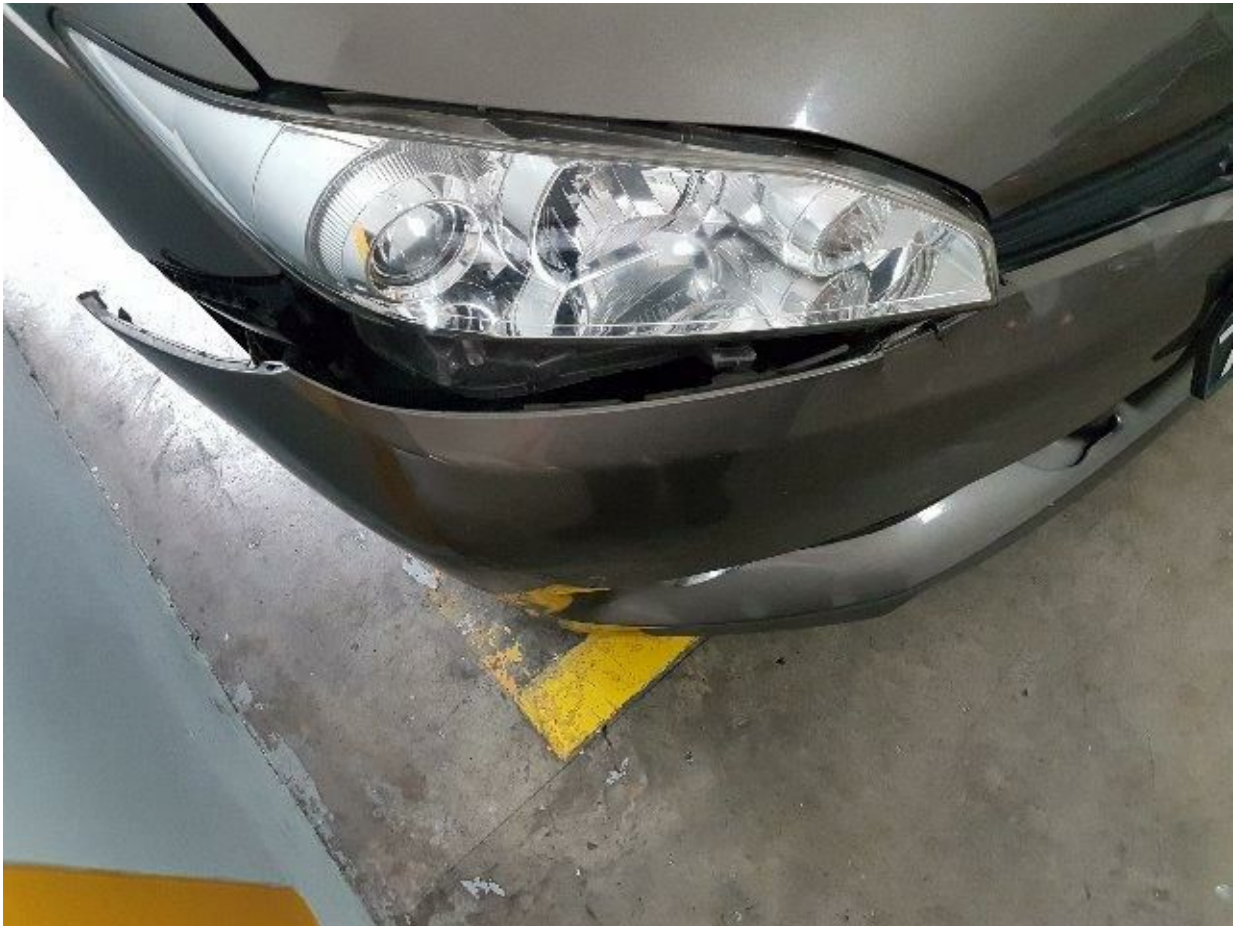
Accident Photo



Accident Photo



Accident Photo



Accident Photo



REPORTING MILEAGE

