Fax Cover Sheet

Kim Keat Motor Co Tel:64833167 Fax:64835764 Email:kkmotor@singnet.com.sg

Send to: AIG Asia Pacific Ins Pte Ltd	From: Kim Keat Motor Co						
Attention: Motor Claims Dept.	Date: 18 Jan 20184 Total Pages: 07 page, including cover						
Phone Number: 64193000							
Fax Number: 64153727	Subject: Survey Request						
() ()							
Ú Urgent ⊡ Reply ASAP	3						
Please comment							
Please Review	Di .						
☐ For your Information							
Q							
Comments:							
Dear Sir / Madam,							
Re: Accident involving FBA6446D and SKU807	Z along CTE Ang Mo Kio on 07.01.2018.						
10 11 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
We understand that you are the insurer of ve above captioned accident.	hicle no. SKU807Z which was involved in the						
We would be obliged if you could send your s damaged to our clients motorcycle.	surveyor to our company to survey the						
Attached with copies of relevant document fo	or your reference.						
Thank you.							
Best regards,							
Victor Seah							
Kim Keat Motor Co							
Tel:64833167							
Fax:64835764							
Email: kkmotor@singnet.com.sg							

MAAP18003656 / AMK Autopoint Pte Utd - HQ ENTRY DATE & TIME: 08/01/2018 16:09 SUBMITTED BY: Joglie Tan Slow Hoon

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 withit misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by inaurance 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
- Singaporo(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,	V : KW000000
	ACCIDENT STATEMENT
Date Of Report	08/01/2018 16:09
Date Of Accident	07/01/2018 12:15
Exact Location Of Accident	CTE ANG MO KIO
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number Insured/Policyholder	FBA6446D
Name Of Rogistered Owner	ABDUL AJEEZ RIYAZ
NRIC No	G0268481R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98988040
Alternative Phone No Vehicle Particulars	OTHERS-93592059
Manufacturer	HONDA
Model -	CB400
Exact Purpose for which vehicle was being used a time of accident	DRIVING TO WORK
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 Insurance Company	MOTORCYCLE
Name of insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Turne Of Courses	THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 5067000510-03

Cover Note Number

Driver,

Name of Driver ABDUL AJEEZ RIYAZ

 NRIC No
 G0268481R

 Date Of Sirth
 28/05/1977

 Occupation
 INDOOR

 Date Of Driving Pass
 30/08/2007

Driving Experience - 10 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98988040

Fax Number

Contact Number OTHERS-93592059

EMail Address NOEMAIL

Address BLK 688A WOODLANDS DRIVE 75 #04-24

731688 Postcode

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

Insurance Company of Driver's Own Vehicle

General information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

YES Was any body injured in the Accident?

Was any injured conveyed to hospital by NO

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NŌ

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

NO

SKU807Z Vehicle Registration Number KIA

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Catogory

KOH MEILING, SERENA Name of Driver

S8518779A NRIC/Passport Number 91917391 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

ABDUL AJEEZ RIYAZ Name

Approximate Age

41

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SLIGHT DEGREE OF INJURY

FBA6446D

NO

NO

BLK 688A WOODLANDS DRIVE 75 #04-24

731688

Sketch Plan

SKETCH PLAN

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- information provided must be as thethird and accurate as possible. Any willul 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.
- 5. 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
- Sy the ladgment 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 aloresaid.
- S. Consent under the Personal Data Protection Act (PDPA)

4 understand, admowledge, 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 insider (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 :
 - (ii) processing, handling and/or dealing with my claims including the autilement 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;
 - (b) administering my claims lincluding 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 to 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 GRA to their third party service providers or agents/induding their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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 dalms.
- (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, line enforcement and government agencies as reasonably required for the purposes stated, or
 - (iii) for complying with requirements under any regulations, laws or court orders.

Policytodder's Signature DOTE & TIME:

Oriver's Signature (if driver is not the policyholder) Open & Time:

Joetie.

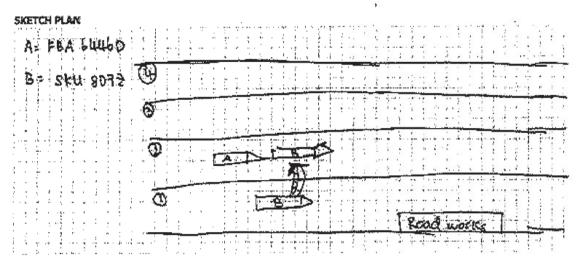
Reporting Certa re Personnel's Signatura MYR AUTOPOHIT NRICKEN No.:

Name:

SUF CLD 18.01. DOIS

State Salventer - secreta dail the state observe with

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

I/We decise the foregoing particulars are true in every respect.

Policyholder's Signature Date & Time:

Oriver's Signature (if driver is not the policyholder)

Date & Time:

Hopoding Contro Personner's Signature
Name: MINE AUTOPOINT PIE LID
NRIC/FRY No.: 08.01. 2018

CARREST CONTRACTOR FOR A LOCAL

\$ 5109,00

KIM KEAT MOTOR CO Blk 10 Ang Mo Kio Industrial Park 2A AvenueS #05-34 AMK Autopoint Singapore 568047 Tel:64833167 Fax:64838764

17 Jan 2017

AIG Asia Pacific Insurance Ptc Ltd Survey Dept.

Re: Que	otation for damaged to FBA6446D.				
Item	Description of Parts	Qty			Amount
1.	Handle Bar	lpc		8	155.00
2.	Meter Assy	lpc			1280.00
3,	Signal Lamp Assy Front R	lpc			80.00
4.	Signal Lamp Assy Front L	lpe			80.00
5.	Fork Protector I.	1pc			35.00
6.	Fork Tube L & R	2pes			650.00
7.	, Oil Seal Ser L & R	2set			65.00
8.	Radiator Assy	1 pc			880,00
9.	Footrest Bar Front L.	lpc			85.00
			Total	S	3310.00
			Less 10%		331.00
			Sub-total	\$	2979.00
	Nett_Item				
10.	Handle Balaneer	lpair		\$	80.00
11,	Levers	Ipair			150,00
12.	Number Plate Front	1pc			10,00
13.	Engine Guard	1 pair			150.00
1.4.	Wrap	Iroll			50.00
15.	Muffler Assy	lpc			1380.00
16.	Coolant	2boule			50.00
17.	Fork Oil	Ibottle			10.00
18,	Transport Fee				50.00
19,	Labour				200,00
		Cennal Total		Œ.	5100.00

Grand Total