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 <u>truthful and accurate</u> 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.
- 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

aforesaid.		
	ACCIDENT STATEMENT	
Date Of Report	05/02/2018 17:03	
Date Of Accident	05/02/2018 14:40	
Exact Location Of Accident	WOODLANDS AVE 7 SLIP TO WOODLANDS AVE 4	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	YM6732S	
Insured/Policyholder		
Name Of Registered Owner	MOVA AUTOMOTIVE PTE LTD	
Co Reg No	198904033G	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	OFFICE-62723892	
Vehicle Particulars		
Manufacturer	NISSAN	
Model	PKC37BNHNP	
Exact Purpose for which vehicle was being used a 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	REPORTING ONLY	
Vehicle Category	PRIVATE HIRE	
Insurance Company		
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	999995092/100805332	
Cover Note Number		

Driver

Name of Driver MOHD ZAKI BIN ABD GHANI

NRIC No S7982951Z

Date Of Birth 18/04/1979

Occupation OUTDOOR

Date Of Driving Pass 01/11/2007

Driving Experience 10 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82997272

Fax Number
Contact Number

EMail Address ZAC9216@GMAIL.COM

BLK 712 YISHUN AVENUE 5 Address

#03-136

Postcode 760712

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

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? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

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 Witness 1

ADMUND DUKE S/O ALEXANDRA Name

Phone Number 90299615

Email Address ADMUNDDUKE@GMAIL.COM

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number EZ3966Y

Vehicle Make/Model/Colour VOLKSWAGEN / JETTA / GREY

Details Of Properties

Vehicle Category PRIVATE CAR ONE CHEE KIONG Name of Driver

NRIC/Passport Number S1417964Z

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

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- 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 the claims.
- (ii) investigating the accident and/or my claims;
- (ii) 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")

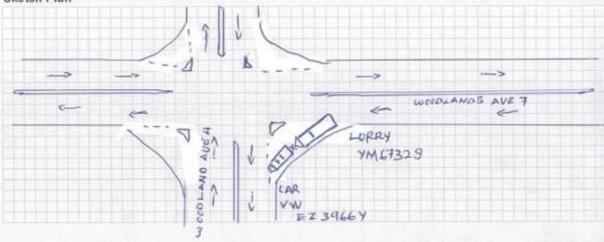
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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.

X (C)

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

Witnessed by Reporting Centre

Sketch Plan



Sketch Plan #2

1	driving form woodlands are 7, around 2.40 pm
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108	ight of my larry I just follow save distance.
BU	Idealy juntion from woodland are 7 to woodland
ave	4. That volkwagen gohead abit than brake
000	rin. He brake second time, that time suddenly
mi	lovny knock hes cav.
-	
	PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO
OTE: I	AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLIC
UBMI	
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OR MO	DRE INFORMATION. tate:
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UBMI' OR MO lease S) Clai	DRE INFORMATION. tate: m Own Policy () Claim Third Party () Claim OD/TP at other workshop (Reporting only
UBMI' OR MO lease S) Clai	DRE INFORMATION. tate: m Own Policy () Claim Third Party () Claim OD/TP at other workshop (Reporting only
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INSURANCE CERT



HOTLINE TEL. (65) 6439-3000 FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACTICHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.301

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999995092/100805332

OWN DAMAGE EXCESS S\$1,500.00 WINDSCREEN EXCESS 8\$100.00

SUM INSURED S\$1.00 INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

YM6732S

2) NAME OF INSURED

MOVA AUTOMOTIVE PTE LTD

3) EFFECTIVE DATE OF THE COMMENCEMENT

3 Apr 2017

OF INSURANCE FOR THE PURPOSES OF THE ACT

9 Mar 2018

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE 1

Any person who is driving on the Insured's order or with their permission.

An Elderly Young and Inexperienced Driver (EYIDR) Excess of S\$2,500 (unless otherwise stated) applies to any drivers (named and unnamed) who is above age 69, below age 26 or has less than 2 years driving experience. If the EYIDR s not named in the policy, an additional S\$500 unnamed driver excess will be imposed.

Provided that the person driving is permitted in accordance with the licensing or other taws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Lew or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE *

Use for the carriage of passengers or goods in connection with the insured's business.

Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is titred.

The Policy does not cover:

1) Use for racing, pace-making, reliability trial or speed-testing.

2) Use whitst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

* NAMED DRIVER N/A

HIRE PURCHASE COMPANY HONG LEONG FINANCE LTD

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

FI We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Fart IV of the Road Transport Act, 1997 (Malayses).

Issued In Singapore 25 Apr 2017

AIG ASIA PACIFIC INSURANCE PTE. LTD

600257-000

NG EE PIN KENNETH

AIG BUILDING 78 SHENTON WAY 197-16 SINGAPORE 679120 ANSP-NONLIFE

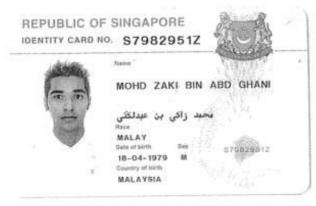
Authorised Representative

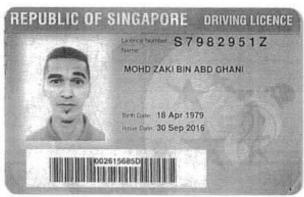
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BECKSA

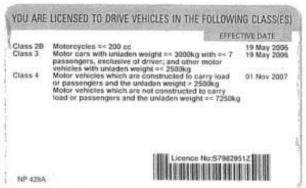
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ALC: Asia Parity Insurance He Ind.



















THIRD PARTY ACCIDENT DAMAGED PHOTOS

