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.

7. By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	07/02/2018 15:33
Date Of Accident	07/02/2018 08:00
Exact Location Of Accident	JUNCTION RD OF PUNGGOL RD & PUNGGOL FIELD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLQ9756L
Insured/Policyholder	
Name Of Registered Owner	FIKRI BIN MOHAMED YUSOFF
NRIC No	S8609560B
Email Address	FYKRY.1986@GMAIL.COM
Mobile Phone No	(LOCAL) +65-86138525
Alternative Phone No	OFFICE-86138525
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA-1.6 AD GLS (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00400306
Cover Note Number	26/07/2017 - 27/07/2018
Driver	
Name of Driver	FIKRI BIN MOHAMED YUSOFF

Name of Driver FIKRI BIN MOHAMED YUSOFF

S8609560B NRIC No Date Of Birth 12/04/1986 Occupation **INDOOR** 12/08/2008 **Date Of Driving Pass**

Driving Experience 9 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-86138525

Fax Number

Contact Number OFFICE-86138525

EMail Address FYKRY.1986@GMAIL.COM Address BLK 871C TAMPINES STREET 86

#04-46

Postcode 523871

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 - HEAD TO REAR

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

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 NAME:

GENDER: : FEMALE

: NUR HIDAYAH

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

STATEMENT RECORDED BY PEI WEN - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: OVERWRITE

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBB1386X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

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No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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 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 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)

Lunderstand, 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:
 - 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:
 - 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's Signature Date & Time: (17/0) 1014

1523hrs

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: Sto

GIARMC SketchPlanForm_V3

		Vehicle No
		A-SLQ 175
		B-GISIS 138
		
	HAMMHALL	
		A A
		A
		Vehicle Bike
ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
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the vehicle B.	THIS occident cousing the	left trong door jammed,
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DECLARATION TWO declare the foregoing particlesse be advised that your institutional timeframe from the control of the control	culars are true in every respect. urer may have a 14 day clause whereby the clai date of occurrence. Kindly check your policy for	m against own policy must be made within the more details.
	culars are true in every respect. urer may have a 14 day clause whereby the clai date of occurrence. Kindly check your policy for Driver's Signature	m against own policy must be made within the more details. Reporting Centre Personnel's Signature
We declare the foregoing partic lease be advised that your inst cipulated timeframe from the o		4

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Contact us at

Hotline: (65) 6532 2888

E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/00400306

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SLQ9756L

Chassis No. KMHD841CMJU516419

2) Name of Policy Holder : BIN MOHAMED YUSOFF, FIKRI

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act : 26/07/2017 00:00

4) Date/Time of Expiry of Insurance : 27/07/2018 23:59

5) Persons or Classes of Persons Entitled to Drive

- (a) The Insured
- (b) Any named person under the policy who is driving on the Insured's order or with his permission.
- (c) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Insured's order or with his permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving

6) Limitations as to use'

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

'Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value

 Own Damage Excess
 : S\$ 0.00 (before any applicable GST)

 Windscreen Excess
 : S\$ 100.00 (before any applicable GST)

Choice of workshop : DirectAsia approved workshops

Finance company / Hire Purchase : Maybank

Main driver : BIN MOHAMED YUSOFF, FIKRI

Named driver : None

Important Note: This policy does not cover drivers below the age of 30 and drivers who hold a valid driving licence of less than 2 years with the exception of the named drivers above.

I/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 the Road Transport Act, 1987 (Malaysia).

Issued on: 03/08/2017

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer Company Registration: 200822611G

DRIVER IC/DL Pg. 1

A HER CONTRACTORY IDENTITY CARD NO \$8609560B



Name

FIKRI BIN MOHAMED YUSOFF

Race INDIAN Date of birth

12-04-1986

SINGAPORE

Sex M Country/Place of birth

58609**56**05

REPUBLIC

DEWING LIGENGE Licence Number: S 8 6 0 9 5 6 0 B

FIKRI BIN MOHAMED YUSOFF

Birth Date 12 Apr 1986 Issue Date 25 Aug 2014





5638398





22-08-2016

APT BLK 871C TAMPINES STREET 86 #04-46 SINGAPORE 523871

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

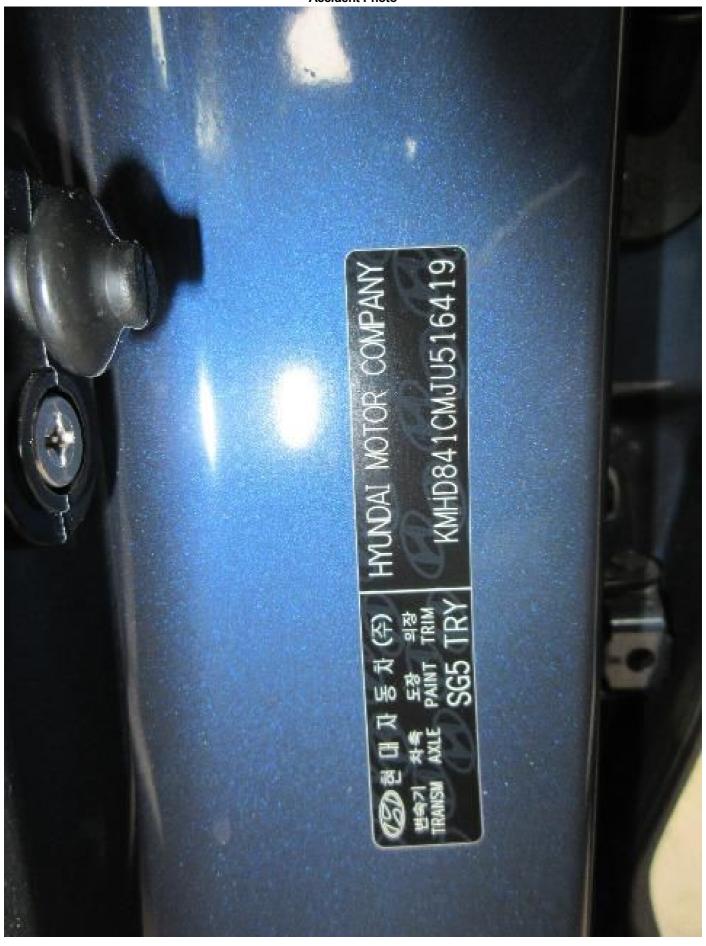
Class 2B Motorcycles =< 200 cc 06 Oct 2005
Class 2A Motorcycles between 201 cc and 400 cc 06 Nov 2007
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles << 2500kg
Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg
Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg

EFFECTIVE DATE

NP 428A

Accident Photo







Identification Card





Accident Photo



Accident Photo

