MML18021584 / Motor Image Enterprises Pte Ltd - Leng Kee ENTRY DATE & TIME 12/02/2018 17:20 SUBMITTED BY: Jeff Teh

### SINGAPORE ACCIDENT STATEMENT

### **IMPORTANT NOTICE**

- 1. Please report <u>correctly</u> 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 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 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

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	12/02/2018 17:20	
Date Of Accident	12/02/2018 13:45	
Exact Location Of Accident	BUKIT TIMAH ROAD @ NEWTON FLYOVER	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SKQ8342R	
Insured/Policyholder		
Name Of Registered Owner	FEIZEL MOHAMMED S/OSYED MOHAMMED	
NRIC No	S7426505G	
Email Address	FEIZEL_MOHD@YAHOO.COM.SG	
Mobile Phone No	(LOCAL) +65-97536440	
Alternative Phone No	Others-97536440	
Vehicle Particulars		
Manufacturer	SUBARU	
Model	FORESTER-2.0 XT (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?	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	2100397413-03	
Cover Note Number		

### Driver

Name of Driver FEIZEL MOHAMMED S/OSYED MOHAMMED

NRIC No S7426505G
Date Of Birth 16/08/1974
Occupation INDOOR
Date Of Driving Pass 14/10/1997

Driving Experience 20 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97536440

Fax Number

Contact Number OTHERS-97536440

EMail Address FEIZEL\_MOHD@YAHOO.COM.SG

**BLK 351 CORPORATION DRIVE** Address #03-526 610351 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 - 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 Was any other material or property damaged? NO I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) 1 **Details of Police Action** NO 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** Refer Sketch Plan Attachment(s) Are accident photos available for attachment? YES

YES

NO

Was there any video captured by Car Camera?

Was there any audio recorded?

# Sketch Plan

# Siugapore Accident Statement

Accident Date & Time: 12/2 2018 3 1345 HRS
Accident Location: PURIT TIMBU ROAD OF NEWYON FULLULER
Vehicle Number: SYR 02 1120   Make/Model: Canada Cal 68760 200
Policyholder Name: FEIZEL MOHAMMED 3/6 SELED MOHAMMED
NRIC: S747650567 Mobile: 97536440
Email: Feizel_mond @ yahoo-com-sg
Insurance Company: Al
Deliver News
Policy Coverage: Comprehensive ( Third Party Fire & Theft( )
LEIZET IMPLUMINER
NRIC: S7426505G Mobile: 97536440
Date Of Birth: 16 08 1974 Driving Pass Date: 14 10 1997
Gender: Male() Female() Occupation: Indoor() Outdoor()
Address: BLK 351, LORPORPTION DRIVE, #03-526, 8 PORE 61035
Is driver an employee of the Insured's Company: Yes( ) No( )
If No, Relationship of the Driver with the Insured:
Owner(V) Spouse( ) Friend( ) Relative( ) Children( ) Sibling( ) Weather Conditions: Clear( X Raining( ) Others( )
Road Surface: Dry( Wet( ) Others( )
Was any foreign vehicle involved in this accident? Yes( ) No( )
Was any body injured in the Accident? Yes( ) No(
Was there any video captured by Car Camera? Yes(V) No( )
Number of Passengers (Including Driver):
Was the accident reported to the police? Yes( ) No( Attach Police Report, if any
Party Name: MR NG HONG KEE
Tehicle Number: SHA 84 H Make & Model: HYUNDAI SONATA
RIC: < 02 9 2 2 1/ 1 Mobile:
RIC: $\leq$ 0 3 9 8 3 0 6 D Mobile:
ther Details (if any):
YELLOW (CITY CAB) insured by Comfort Delgro

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to regudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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;
- (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 neckages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

- (b) all insurer(s) with 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.

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

Sketch Plan

BUKIT TIMAH ROAD

SKQ 8342 R SHA 84H

De	on the 12th of february, along buict Timah
	Road @ Newton Flyover. I was held up a
F	traffic in the expresse right and and
	the traffic was 8tow moving. I start
	to nuve sis soon as it began to moi
	and working to the blind side left an
	1eft side mirror when I knocked
	into gellow ceep (City Cab) SHA 84H
	in front of me. This has caused
	domage to my front bonnet 3
	Front bumper. Damage to 3rd part
	Way to bember 2 boot.
	Particular were exchanged on the
	510+.
	Video evidence submitted.

# Declaration

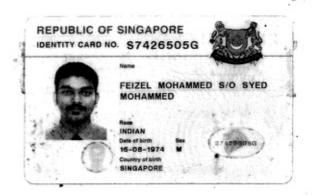
Wive declare the foregoing particulars are true in every respect.

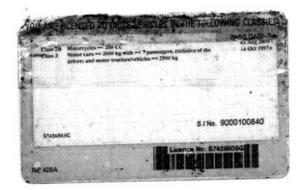
Policyhoden's Signature / Data & Time

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

Witnessed by Reporting Centre Personnel











# CERTIFICATE OF INSURANCE

### SUBARU AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Feizel Mohammed S/o Syed Mohammed

Period of Insurance : 30 Dec 2017 To 29 Dec 2018

Engine No. : FA20J911467

Chassis No. : JF1SJGK85EG038581 Vehicle No. : SKQ8342R : 2100397413-03 Policy No.

Endorsement No.

Issued Date : 22 Nov 2017

### ABOUT THE COVER

Make/Model : SUBARU NEW FORESTER 2.0XT

Engine Capacity/Tonnage: 1,998.00 CC Sum Insured : Market Value First Year of Registration : 2014 Driver Restriction : NA Off Peak Car : No 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, 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

\* 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**

Fire - \$0 Own Damage - \$1400 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Feizel Mohammed S/o Syed Mohammed - \$1400 (Own Damage)

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

1.Motor Image Enterprises Pte Ltd. Add: 19 Lorong 8 Toa Payoh Singapore 319255 64170100

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine 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

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. 189), Part IV of 2 the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500619010

TAN CHONG CREDIT - SUBARU PA

911 BUKIT TIMAH ROAD

SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE











