MPA218035543 / Progressive Automotive Pte Ltd - HQ ENTRY DATE & TIME: 15/03/2018 12:12 SUBMITTED BY: Wong Yang Jun

# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 15/03/2018 12:43

# 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.

ACCIDENT STATEMENT

Date Of Report 15/03/2018 12:12

Date Of Accident 27/02/2018 19:10

Exact Location Of Accident BARTLEY ROAD

Country/State of Loss SINGAPORE

**DETAILS OF OWN VEHICLE** 

Vehicle Registration Number SGK2770G

Insured/Policyholder

Name Of Registered Owner JAMUNA RANI D/O THAYALAM

NRIC No S1409374E
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-90079385

Alternative Phone No Office-90079385

**Vehicle Particulars** 

Manufacturer HONDA

Model INTEGRA-2.0 (M)

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?

NO

If No, Please state action to be taken REPORTING ONLY
Vehicle Category PRIVATE CAR

**Insurance Company** 

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 2100422397-02

Cover Note Number

Driver

Name of Driver KARTHIGESAN GANESAN

 NRIC No
 \$8830302D

 Date Of Birth
 09/08/1988

 Occupation
 INDOOR

 Date Of Driving Pass
 17/09/2007

Driving Experience 10 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98360783

Fax Number
Contact Number

EMail Address KARTHI0888@GMAIL.COM

Address BLK 178 RIVERVALE CRESCENT #04-433

**SINGAPORE** 

Postcode 542178

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle -

-

NO

**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?

Was any injured conveyed to hospital by

ambulance?

NO

NO

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)

**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** 

REFER TO ATTACH STATEMENT RECORDED BY ISAAC- PROGRESSIVE AUTOMOTIVE 6741 5336

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SCL2138A

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

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- 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)
  - 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.

Policyholder's Signature Date & Time:

Driver's Signature

(if driver is not the policyholder)

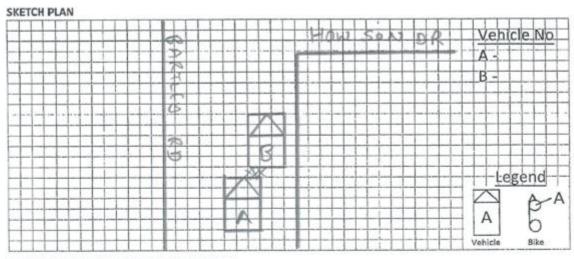
Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

GIARMC SketchPlanForm\_V3

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# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 270218 I S88303020 KARTUGESAN (VEHA-SGK 27706) WAS DRIVING
ALONG BARTLES RUAD VEHICLE B (SCL21384) DID AN ABRUPT BRAICE
AND GUT OUT OF HIS VEHICLE SHORTLY AFTER THE OWNER CLAIMED
E HIT HIM, I DO NOT RECALL HITTING AND ASKED HIM TO SMOW
THE DAMAGE. THE OWNER WAS UN ABLE TO SHOW AND STATED
IT TOULD BE AN INTERNAL DAMAGE/CRACK AS I WAS MAD
A DINNER APPOINTMENT, I EXCUAPTE DETAILS AND TOLD HIM TO
KEEP IN CONTACT VIA MOBILE PHONE.
The state of the s

DECLARATION

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

Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kingly check your policy for more details.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: | Saac NRIC/FIN No.:

2

GIARMC SketchPlanForm\_V3



# CERTIFICATE OF INSURANCE

# PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

Name of Policyholder : Jamuna Rani D/O Thayalam : SGK2770G Vehicle No. : 2100422397-02 Policy No. Period of Insurance : 03 Aug 2017 To 02 Aug 2018

Engine No. : K20A35800779 Endorsement No.

: 31 Jul 2017 : JHMDC53506S201081 Issued Date Chassis No.

ABOUT THE COVER

Make/Model : HONDA INTEGRA 2.0

Engine Capacity/Tonnage: 1,998.00 CC Sum Insured : Market Value First Year of Registration : 2006 Off Peak Car : No Insuring with COE/PARF : Yes Driver Restriction : NA

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 histher permission. This Policy will indemnify the Policyholder or any authorised driver only if holdric means the specified age condition.

: All Age Condition Age Condition

Limitation as to use\* :

Use only for social, domestic and pleasure pulposes and for the Pokcyholder's business. This Policy does not cover use for hire or reward, driving tustion, driving test, racing, pace-making, reliability trial or specid-lesting, the comage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 180) and Section 95 of the Read Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1 Fire - 90 Theft - 90

Section 2

Property Damage - \$0

Windscreen: NA

Named Driver and Excess (where applicable)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims retailed repairs)

Any accident repairs to the Vahide can be certed out at the repairer of Your choice juriests specifically encluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers please consist our 34-hour accident emergency hotine at 455 6338 6200. Alternatively you may refer to AIG website www.aig com.sg or AIG 9G Mobile App. Simply search and developed "AIG St" from iTures or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

IAWe 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), Pert IV of the Read Transport Act. 1987 (Mollaysia) and Motor Vehicles (Third Party Risks) Rufes. 1969 (Mollaysia).

0170026000

POH SIEW HIAN JESSICA

55 COMPASSVALE BOW #17-11 THE QUARTZ SINGAPORE 544986 SP-SIMBAKHENG-EVE

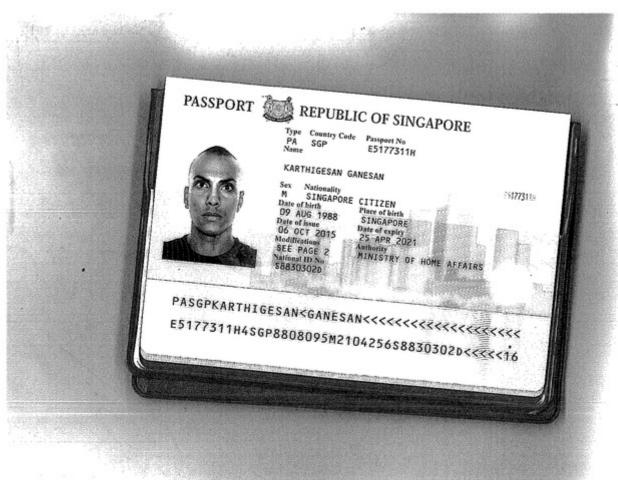
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

78 Sherron Way 607-16 AIG By Ithin 8079120 LT HES 6419 3000 LF HIS 6416 3723 Lywyyn byd

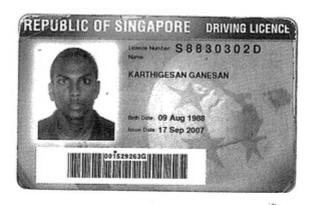
AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

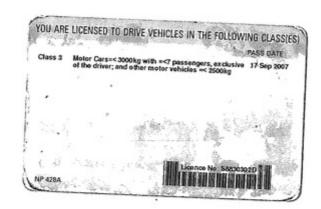
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**DRIVER PASSPORT** 



# **DRIVER LICENSE**













# **Accident Photo**



# **Accident Photo**









