SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

- 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 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 conse Iforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	19/05/2018 15:07
Date Of Accident	18/05/2018 10:45
Exact Location Of Accident	HUA GUAN AVENUE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GX4804L
Insured/Policyholder	
Name Of Registered Owner	POPULAR RENT A CAR PTE LTD
Co Reg No	199608195z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-67428888
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
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
lf No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
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	99994980/10077924-00000
Cover Note Number	01/08/2017 TO 31/07/2018
Driver	
Name of Driver	AVATAR SINGH S/O NASHATTAR SINGH
NRIC No	S1795924G
Date Of Birth	12/02/1967
Occupation	OUTDOOR
Date Of Driving Pass	23/05/1998

19 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93695875

Fax Number

Contact Number

EMail Address NOEMAIL

Address APT BLK 150 PASIR RIS ST 13 #01-58 (S) 510150

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

NO

NO

NO

2

NO

NO

NO

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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: : raja Gender: : Male

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?

Circumstances of Accident

Attachment(s)

refer with attach.

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGR7543B

Vehicle Make/Model/Colour NISSAN 370Z

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver SAM

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

86666101

Accident Sketch Plan

SKETCH PLAN

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- 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
- 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:

- 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)
 - (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 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.
- 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

Nag

NRIC/FIN No.:

KETCH PLAN	
	1 - 8
CX48041	
111111111111111111111111111111111111111	
SCAR 7543B	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
MY VEHICLE WAS PARKED IPA	RALLEL ALONG
HUA GUAN AVE, LANDED PROPER	CTY AREA.
WHICE MOVING MY VEHIC	LE OUT OF THE PARKING
POSITION. VEHICLE B, CAME	FAST AND BOTH VEHICLES
COLLIDED. NOBODY WAS 1	ATTURED AND WE EVEHANGED
0-0 -1-05	, , , , , , , , , , , , , , , , , , , ,
FOR CONTACTS.	
FOR CONTACTS.	Transmite Ass. Asser Incorpora
FOR CONTACTS.	White M. 6XH804h of Local 18/5 3c
FOR CONTACTS.	White M. 4XH8040h of Local 18/5 20 Reporting Only Own Damage Claim Third Perty Storm
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DECLARATION	Reporting Only Own Damage Claim Third Perty Glaim Other Workshop
DECLARATION I/We declare the foregoing particulars are true in every respect.	Reporting Only Own Damage Claim Third Perty Glaim Other Workshop
DECLARATION	ACC ACC Income 18/5 20 Reporting Only Own Damage Claim Third Perty Glaim Other Workshop
DECLARATION I/We declare the foregoing particulars are true in every respect. CC CC Driver's Signature Driver's Signature	Reporting Only Own Damage Claim Third Perty Glaim Other Workshop
DECLARATION I/We declare the foregoing particulars are true in every respect.	ACC ACC Income 18/5 Scripting Only Own Damage Claim Third Perty Germ Other Workshop

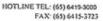


AIG Asia Pacific Insurance Pte. Ltd. AIG Building 78 Shenton Way =07-16

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER)	: ANATAR SINGH SIO N.S
VEHICLE NUMBER	: 61× 4804 L
	18 MAY 2018/
DATE/TIME OF ACCIDENT	HUA GUAN AVE
PLACE OF ACCIDENT	
THIRD PARTY VEHICLE (IF ANY)	: SGR 7543 B
****	安庆大业场大会的安庆大大大大大大大大大大大大大大大大大大大大大大大大大大大
WHERE DID YOU START YOUR DESTINATION BEFORE THE ACCH	JOURNEY AND WHERE WAS THE INTENDED
THE ACCIDENT? IF YES, DID TO ANALYSER TEST ON YOU? IF YES,	IC DRINKS BEFORE YOU DRIVE ON THE DAY OF HE TRAFFIC POLICE CONDUCT ANY BREATHE, WHAT IS THE RESULT?
WHAT IS THE TYPE OF COLLISITO ALL VEHICLES INVOLVED?	ON AND THE EXTENSIVENESS OF THE DAMAGES GX 4804 L - FRONT RH DOOR
	SCAR 7543 B - LH 31DE
WERE YOU OR YOUR PASSENG WERE YOU TAKEN TO THE TRAF	SER/S INJURED? IF INJURED, WHICH HOSPITAL? FIC POLICE FOR INVESTIGATION?
Name: I Affirmed The Above Information Is	s Given To My Best Knowledge.

certificate of insurance





CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 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

(11)

TPFT COMMERCIAL MOTOR

OWN DAMAGE EXCESS

\$\$2,200.00

CERTIFICATE NO. 999994980/100779024-00000

WINDSCREEN EXCESS

N/A

SUM INSURED S\$1.00

INSURING WITH COE/PARF YES

1) VEHICLE REGISTRATION NO.

GX48041

2) NAME OF INSURED

POPULAR RENT A CAR PTE LTD

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 1 Aug 2017

4) DATE OF EXPIRY OF INSURANCE

31 Jul 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

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

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enaclment 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 hired. The Policy does not cover:

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

2) Use whilst 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 AIK HENG TRADING CO PTE 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.

1 / 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 Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 7 Aug 2017

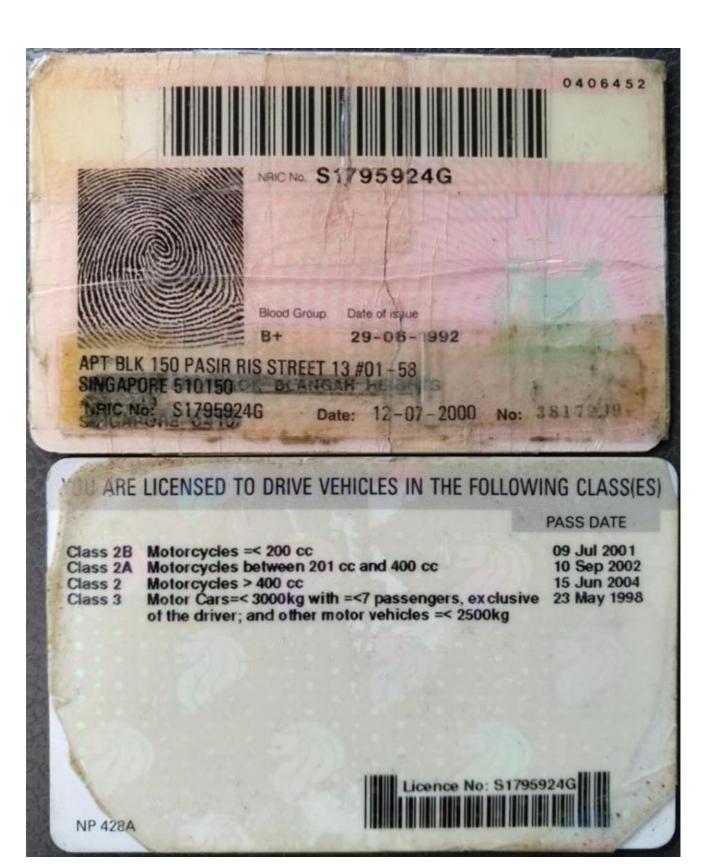
AIG ASIA PACIFIC INSURANCE PTE, LTD.

000064-000 DIRECT CLIENTS 01.4.95 AIG BUILDING 78 SHENTON WAY #07-16 SINGAPORE 079120.

Authorized Representative

ORIGINAL

SSPYTP



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1795924G



Name



AVATAR SINGH S/O NASHATTAR SINGH

Race

SIKH

Date of Birth

Sex

12-02-1967

M

Country of Birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S 1 7 9 5 9 2 4 G

Name:

AVATAR SINGH S/O NASHATTAR SINGH

Birth Date: 12 Feb 1967

Issue Date: 19 Oct 2006





















