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#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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,
- 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.
- 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	28/05/2018 19:07
Date Of Accident	28/05/2018 06:30
Exact Location Of Accident	TRAFFIC JUNCTION PASIR PANJANG ROAD
Country/State of Loss	SINGAPORE
D. C.	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FBG9024L
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD HATTA BIN YUNUS
NRIC No	\$81342191
Email Address	HAFIZISMAIL2306@GMAIL.COM
Mobile Phone No	(LOCAL) +65-86520913
Alternative Phone No	OTHERS-90062547
Vehicle Particulars	
Manufacturer	BMW
Model	F800GS-798CC
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MC/00401254
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD HAFIZ BIN ISMAIL
NRIC No	S8921360F
Date Of Birth	23/06/1989
Occupation	OUTDOOR
Date Of Driving Pass	11/03/2014
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86520913

OTHERS-90062547

HAFIZISMAIL2306@GMAIL.COM

Address

BLK 312 SHUN FU ROAD

#03-249

Postcode

570312

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

FRIEND

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

DRIZZLING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

NO 2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE 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 OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SGS6675E

Vehicle Make/Model/Colour

DAIHATSU

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

WONG YOK THING

NRIC/Passport Number

S2651077E 97638793

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

## 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 withholding of material facts may allow insurance companies to repudiate policy liability.
- 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. 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.
- 7. 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.
- 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) 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 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
- 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:

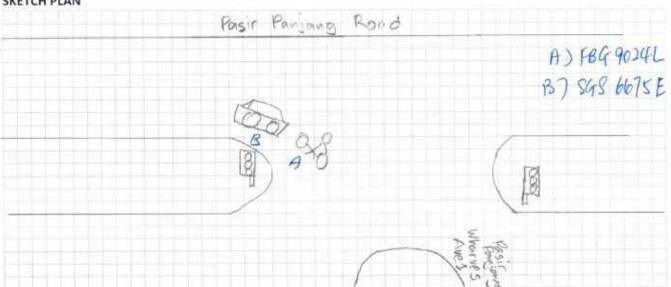
Driver's Signature

(If driver is not the policyholder)

Date & Time: 28/5/18, 5:30 pm

Reporting Centre Personnel's Signature

NRIC/FIN No .:



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ight	into	Pasir	Panjani	y Who	rves	Avenu	ι1.	1 3	top pea	at	the	turning turning ddeuly th
ar be	hind	WE	failed to	stop	and	Knock	ed on	the	back	o\$	my	motorcycle.

# DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder) Date & Time: 28/5/18, 5:40 pm Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

# ACCIDENT STATEMENT

	T CC / 1018 / 1018 / 100	YYYYL TIME! 06 -30 VIUUILIA
	LOCATION: Traffic junction Pasir Par	njang Road
	1. DETAILS OF VEHICLE	3 3
	OVEHICLE NUMBER: FBG 9024 L	
	BINSURANCE COMPANY: Direct Asia	
	CIPOLICY NUMBER: MC/00401254	
	d)POLICY TYPE: I COMPREHENSING	- Harris Control
	DIPOLICY TYPE: COMPREHENSIVE / THIRD	PARTY / THIRD PARTY FIRE &THEFT)
	f)TYPE: (SALOON / COURF / MANY // ANI / LE	DROV / V AND A
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( ) >	A THE COLOR OF STATE OF THE PROPERTY OF A STATE OF THE PROPERTY OF THE PROPERT	/ REPORTING ONLY
(1)	2. INSURED / POLICY HOLDER	ONLIA
NUMBER OF	AINAME: Muhammad Hatta bin Yun bINRIC/FIN/PASSPORT S 8 13 4 2 16 T	WWS IMALE LEEMALES
PASSANGER	b) NRIC/FIN/PASSPORT: S 81342 IG I	CONTACT: \$652 09/3
INCLUDING DEIVER	CIADDRESS: Blk 123 Marsiling Rise	#03-102 5(730123)
MINE DELVIER	* CONTINUE TO 3.d IF DRIVER ALSO POLICY	
	THE WASHINGTON	
63	ONAME: Muhammad Hafiz bin Isma	11
	THE PROPERTY OF THE PROPERTY O	
	CLADDRESS: BIK 312 Shunfu Road	#03~746 ((capata)
	*d)DATE OF BIRTH: ( 23 / 06 / 1989 ) (DE	D/MM/YYYYI
	UPILE OF DRIVING PAGE . II /02/	2014
	THE WALL AN EMPLOYEE OF THE WALL	
	IF NO, RELATIONSHIP OF THE DRIVER WI	TH INSURED: Friend
	5. d) WEATHER CONDITION: (CLEAR / RAINING ) b) ROAD SURFACE: (DRY / WET / OTHERS	OTHERS Prizzling
W	VI AS ANTBOOY IN HIRED (VER INC)	
	9/KEPORTED TO POLICE IVER LIO	
	IF 163, PLEASE STATE WHICH POLICE CTATION	NI.
(1)	S. THIND PARTY VEHICLE	
Millian	a) VEHICLE NUMBER: SGS 6675 E	MODEL: Daihatsu
MUMBER OF	b) DRIVER'S NAME: Wong Yok Thing	
PASSAMGHE	CI NRIC/FIN/PASSPORT: 32651033	CONTACT: 9763 8793
cluding bewal	7. THIRD PARTY VEHICLE	100 0110
( )	d) VEHICLE NUMBER:	MODEL:
MUMERCE OF	ON DRIVER'S NAME:	
PASSAUGHR	f) NRIC/FIN/PASSPORT:	CONTACT:
LUDING DELUCIE		41
S DESMENT THREE STORES	J⁴ a	
		1

1) EMAIL: hafizismail 2306@gmail.com

S) VIDEO !

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. S8921360F





MUHAMMAD HAFIZ BIN ISMAIL

محمد حافیس بن اسمیل

JAVANESE

23-06-1989 M

Country of birth SINGAPORE









05-07-2004

APT BLK 312 SHUNFU ROAD #03-249 SINGAPORE 570312

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

REPUBLIC OF SINGAPORE DRIVING CHEEKE

MUHANMAD HAFIZ BIN ISMAIL

tire time: 23 Jun 1989

lesus Date 05 May 2011

S8921360F

Class 28 Metorcycles -< 200 CC

95 May 3841 21 Nov 2012

Class 2A Metersystes between 201 CC and 400 CC Clair 1 Matercycles > 404 CC

11 Ster 2014

Class 3 Maker cars ≈ 3000 kg with ≈ 7 passingers, exclusive of the deliver, and matter transversivelettes ≈ 2500 kg

3/ May 3/14

58921J+0P

S / No. 9000203434

NF 428A

Licence No. S8921360F

EFFECTIVE DATE



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. MC/00401254

Type of Coverage Third-Party Fire and Theft Cover

1) Vehicle Registration No.

Chassis No. WB10B0206DZ000879

2) Name of Policy Holder YUNUS, muhammad hatta

3) Effective Date of Commencement of Insurance 13/07/2017

for the Purpose of the Act

4) Date of Expiry of Insurance

5) Persons or Classes of Persons Entitled to Drive

(a) The Insured

(b) A named driver who is driving on the Insured's order or with his permission.

Provided that the person driving has a valid Motorcycle driving licence to drive in Singapore and is not under suspension or disqualification from driving.

12/07/2018

6) Limitations as to use\*

Use only for private purposes, in accordance with the declared motorcycle 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 Policy Excess S\$ 500.00

Main driver YUNUS, muhammad hatta

Important Note: The policy only cover the main driver and the following named driver:

Ref	Named Driver	Date of Birth	
	Ismail, muhammad hafiz	23/06/1989	
nance	Company / Hire Purchase		

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:

12/07/2017

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer