SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

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 conseaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	31/05/2018 13:32
Date Of Accident	31/05/2018 07:15
Exact Location Of Accident	BUKIT BATOK ROAD TOWARDS JURONG TOWN HALL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLE7496M
Insured/Policyholder	
Name Of Registered Owner	HOPE FIRST RESPONSE PTE LTD
Co Reg No	200915893N
Email Address	OPS@HOPEAMBULANCE.COM
Mobile Phone No	
Alternative Phone No	Office-97129731
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	SPRINTER-2.1 D 316 CDI (W906) (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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	100830572
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD NAZMI BIN MAZLAN
NRIC No	S9026440J
Date Of Birth	03/08/1990

OUTDOOR

29/04/2011

7 YEARS AND 1 MONTH

Gender **MALE**

Mobile Number (LOCAL) +65-85542319

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 852 WOODLANDS STREET 83 #05-278

Postcode 730852

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

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? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

YES

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : SHASHAR

> Gender: : Female

Passenger 2 : KIETH Name:

> Gender: : Male

Passenger 3 Name: : SATYENDKANATH DUBEY

> Gender: : Male

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] HONG KAH NORTH NPP

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Refer to sketch plan / police report no. T/20180531/2066

Attachment(s)

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHB5946H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver HO WEI SENG NRIC/Passport Number S1648966B

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name HO WEI SENG

Approximate Age

Injuries Sustain **BACK & NECK PAIN**

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

Postcode

SHB5946H

YES

YES

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 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.
- 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)
 - (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.
- (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. HOPE

Policyholder's Signature Date & Time:

3 1 MAY 2018

Driver's Signature (If driver is not the policyholder)

Date & Time:

3 1 MAY 2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jenny Lim S6927273H

ETCH PLAN
Lone 2 Lone 1 Front B (SHB 5946H) I hit the Rear A (SLE 7496M) ESCRIBE CIRCUMSTANCES OF THE ACCIDENT
Refer to Police Report No: 7/20180531/2066
the state we part that the state of the stat
Ve declare the foregoing particulars are true in every respect.

Driver's NRIC + Driving License

Reporting Centre Personnel's Signature

Jenny Lim S6927273H

Name:

NRIC/FIN No.:

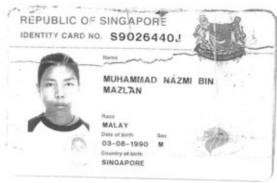
Driver's Signature (If driver is not the policyholder) Date & Timg: 1 MAY 2018

Date & Time: '

CHANK Share-Purfoces vs.

3 1 MAY 2018









31-05-18:18:43 : # 1/ 1



HOTLINE TEL (65) 6410-3000 FAN (65) 6413-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 159) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1950 ROAD TRANSPORT ACT, 1937 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999994976/100830572

OWN DAMAGE EXCESS S\$1,000.00 (1811)
WINDSCREEN EXCESS S\$100.00 (1811) (for policies with effect from 1st November 2002)

SUM INSURED S\$1.00 INSURING WITH COE/PARF Yes ~ 0

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

HOPE FIRST RESPONSE PTE LTD

SLE7496M

12 Aug 2017

 EFFECTIVE DATE OF THE COMMENCEMENT
 OF INSURANCE FOR THE PURPOSES OF THE ACT 4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

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

An Elderly From and inexperiorced Driver (EYIDR) Excess of \$\$2,500 (unless otherwise stated) applies to any drivers named and uning whose abore opens, briew and 26 or has less than 2 years driving experience. If the EYIDR is not named in the policy, unredeficial \$5500 or handed giver excess will be imposed.

Please refer to policy terms and conditions

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 enactment or regulation in that behalf from driving the Motor Vehicle.

LIMITATION AS TO USE *
 Use in connection with the insured's business.

2) Use for the carriage of passengers (other than for hire or reward) in connection with the insured's business.

3) Use for social, domestic or pleasure purposes.

The Policy does not cover

a) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.

b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

LOSS OF USE NOT INCLUDED

* NAMED DRIVER N/A

HIRE PURCHASE COMPANY NA

*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, 1967 (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 Componsation) Act (Chapter 189) and Part IV of the Read Transport Act, 1887 (Maleysia).

Issued In Singapore 6 Sep 2017

AIG ASIA PACIFIC INSURANCE PTE, LTD

334025-000

LIANG SEA JOHN MIDGE

3 TAMPINES GRANDE #05-43A AIA TAMPINES SINGAPORE 528799 SP-MIDGE

ORIGINAL

SCCOCK









Accident Photo

