

## 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 truthful and accurate as possible. Any wilful misrepresentation or withholding 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	14/06/2018 12:19
Date Of Accident	11/06/2018 16:00
Exact Location Of Accident	JOHOR CUSTOM CHECKPOINT
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL1703S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AHMAD BIN IBRAHIM
NRIC No	S0058346D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97207132
Alternative Phone No	Others-97207132

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100177353-08
Cover Note Number	18/11/2017 TO 17/11/2018

### Driver

Name of Driver	ANNI ROSZALENA BINTE AHMAD
NRIC No	S7332621D
Date Of Birth	11/09/1973
Occupation	INDOOR
Date Of Driving Pass	27/07/2001
Driving Experience	16 YEARS AND 10 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-91377264
Fax Number	
Contact Number	
E-Mail Address	ANNIROSZ@HOTMAIL.COM
Address	APT BLK 354 HOUGANG AVE 7 #02-709 (S) 530354
Postcode	
Was driver an employee of the Insured's Company	NO
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	-
	-
	-

#### 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?	
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)	4
Passenger 1	Name: : airin Gender: : Female
Passenger 2	Name: : nurin Gender: : Female
Passenger 3	Name: : sylvia Gender: : Female

#### 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

refer with attach.

#### 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	SKL9083H
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle CategoryPRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)2

Passenger 1Name: : malay

Gender: : Male

## Accident Sketch Plan

### SKETCH PLAN


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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) 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
- (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: 14/6/18 12:40pm

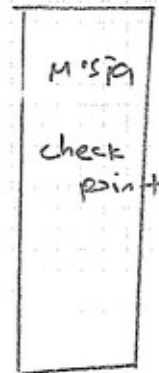
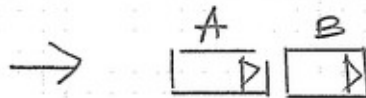
  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



SKETCH PLAN

A: SJL 1703S

B: SKL 9083H



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 11 June 2018, I, Ann Roszakana Bte Ahmad, 873326210, the driver of vehicle no. SJL 1703S was driving along Johor Bahru towards Johore checkpoint between 16:00 - 16:30 hours. At that point the road is very congested. Need to <sup>join</sup> queue to clear the custom. I accidentally banged the back of the front car. plate no. SKL 9083H which is not ~~that~~ the damaged is not that obvious and is a minor. My front car intact.

Insurance Co	Ais Ais Insurance
Vehicle No	SJL 1703S
Date	11/6/2018
<input checked="" type="checkbox"/> Reporting Centre	
<input type="checkbox"/> Own Damage	
<input type="checkbox"/> Third Party Claim	
<input type="checkbox"/> Other Workshop	

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: 14/6/18  
1240 hrs

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Ami Roszqlena Binte Ahmad  
VEHICLE NUMBER : SKL 17035  
DATE/TIME OF ACCIDENT : 11/6/2018 @ 16.00hrs  
PLACE OF ACCIDENT : Johor custom checkpoint  
THIRD PARTY VEHICLE (IF ANY) : SKL 90834

\*\*\*\*\*

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

from malaysia to Singapore

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

head to rear

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No

I  
Name: Ami Roszqlena Ahmad

I Affirmed The Above Information Is Given To My Best Knowledge.



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Ahmad Bin Ibrahim  
 Period of Insurance : 18 Nov 2017 To 17 Nov 2018  
 Engine No. : 1NZX804794  
 Chassis No. : MR053HY9305082586

Vehicle No. : SJL1703S  
 Policy No. : 2100177353-08  
 Endorsement No. :  
 Issued Date : 08 Nov 2017

### ABOUT THE COVER

Make/Model : TOYOTA VIOS  
 Engine Capacity/Tonnage : 1,497.00 CC  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : Yes  
 First Year of Registration : 2008  
 Insuring with COE/PARF : Yes

#### Person or Classes of Persons Entitled to Drive\*

as the Policyholder  
 or 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" ("YIDRE") 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 Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 169) and Section 95 of the Road Transport Act, 1997 (Malaysia) are not to be included under these headings.

### EXCESS

Section 1  
 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2  
 Property Damage - \$0

Windscreen : \$100

#### Named Driver and Excess (where applicable)

Ahmad Bin Ibrahim : \$600 (Own Damage)

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

Approved Reporting Centres/AIG Authorised Repairers (for claims related repairs)  
 Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agents' workshop.  
 For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website [www.aig.com.sg](http://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 : DBS BANK LTD

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. 169), Part IV of the Road Transport Act, 1997 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1950 (Malaysia).

6030210000

AIG ASIA PACIFIC INSURANCE P.L.  
 78 SHENTON WAY #07-16 AIG BUILDING  
 SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Amile*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

529186

78 Shenton Way #07-16 AIG Building 8078120 | T: +65 6419 0000 | F: +65 6416 3723 | [www.aig.com.sg](http://www.aig.com.sg)

AIG Asia Pacific Insurance Pte. Ltd.

driver's nric & license

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7332621D



Name

ANNI ROSZALENA BINTE  
AHMAD

اني روزالينا بنت احمد

Race

MALAY

Date of birth

11-09-1973

Sex

F

S7332621D

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

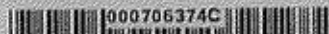
Licence Number S7332621D

Name

ANNI ROSZALENA BINTE  
AHMAD

Birth Date: 11 Sep 1973

Issue Date: 01 Aug 2003



000706374C

certificate of insurance

3402492



NRIC No. S7332621D

Date of issue

24-09-2003

Address

APT BLK 354 HOUGANG AVENUE 7  
#02-709  
SINGAPORE 530354

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

Class 3

Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms

PASS DATE

27 Jul 2001

Licence No: S7332621D



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo

