#### 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 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	19/06/2018 17:33	
Date Of Accident	19/06/2018 16:00	
Exact Location Of Accident	EXIT 1 ON PIE TOWARDS CHANGI AIRPORT	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

Vehicle Registration Number SLH9703L

Insured/Policyholder

Name Of Registered Owner LCRF PTE LTD Co Reg No 201624597K

INSURANCE@LIONCITYRENTALS.COM.SG Email Address

Mobile Phone No

Alternative Phone No OFFICE-88888888

Vehicle Particulars

Manufacturer HONDA

Model GRACE HYBRID 1.5DX A

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?

If No, Please state action to be taken THIRD PARTY

Vehicle Category

Insurance Company

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

PRIVATE CAR

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number SLH9703L

Cover Note Number

Driver

Name of Driver DARREN SAY PU XIANG

NRIC No S9242153H Date Of Birth 03/11/1992 Occupation **INDOOR** Date Of Driving Pass 04/02/2013

Driving Experience 5 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96714117

Fax Number

Contact Number

**EMail Address** NOEMAIL Address BLK 215 SERANGOON AVE 4 #03-124

Postcode 550215

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OT

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

-

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?

NO

2

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: : MR

GENDER: : MALE

**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 ATTACHED

Attachment(s)

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

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number YM5323X

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category COMMERCIAL VEHICLE

Name of Driver MUTHUKUMAR SARAVANAN

NRIC/Passport Number G5061014X Contact Number 83989897

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### Sketch Plan Pg. 1

### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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.
- 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 evailable 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:
  - 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:

Oriver's Signature (If driver is not the policyholder) Date & Time:

Name: NRIC/FIN No.:

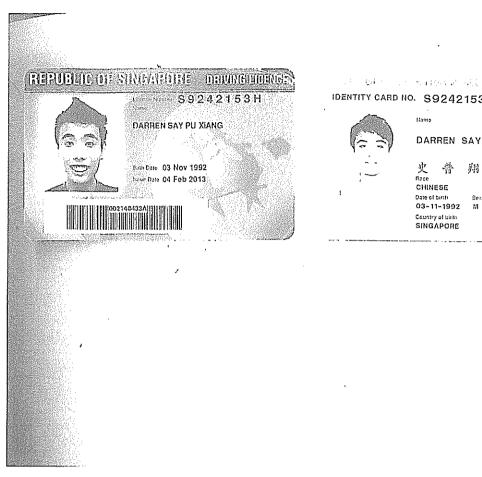
Reporting Centre Personnel's Signature

# Sketch Plan Pg. 2

Changi Mirport		A SLH 9703L
SKETCH PLAN	ana and an ana an	B: YM 5323 X
5ait 1 0		
	Cy The Accident	
Me Jon break we hit me Can	PIE towards phongic St. I John break and	ignory Exit I. The consinflant of Stop on those But the trade behind
<u> </u>	7	
I managed to breake	is about 50km/h, when in fime but the vehicle	changi Airport softing, "Exit 1" the van infront of me jammed brake TM 5323 X hit my rear humper. The scratches and the boot council
close We exchanged	d particleurs at 900 T2	capals as he got to deliver food one was injured in this caident
Ther's all. Qu		ur was injured in this adding.
DECLARATION  // We declare the foregoing particu	lars are true in every respect.	AR
	( diver)	
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date 2: Time: 10/06/1/8	Reporting Centre Personnel's Signature Name:

Page 4 of 16

# Sketch Plan Pg. 3



IDENTITY CARD NO. \$9242153H

DARREN SAY PU XIANG

紨

692423250

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

EFFECTIVE DATE

MUTORCYCLES NOT EXCEEDING ME CC
MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF
WHICH UNLAUEN BOES NOT EXCEED 1987 KILOGRAMS

08 Jul 2315 84 Feb 2013

S / No.9000224301

3574315310

NP 428A

APT BLK 215 SERANGOON AVENUE 4 #03-124 SINGAPORE 550215



HOTLINE TEL; (65) 6419-3000 FAX: (65) 6415-3723

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1950

ROAD TRANSPORT AGT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M Z 400

COMPREHENSIVE COMMERCIAL MOTOR CERTIFICATE NO. SLH9703L

ALL CLAIMS EXCESS
WINDSCREEN EXCESS

S\$2000.00 S\$100.00

(The below excess is subject to GST)

SUM INSURED

Market Value

INSURING WITH COE/PARF Yes

Yac

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

.

3) EFFECTIVE DATE OF THE COMMENCEMENT OF

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

25 February 2018 24 February 2019

LCRF Pte Ltd

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

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

If You or Your Authorised Driver is below the ago of 21 years old and/or has less than 1 year driving experience, the excess is \$53,500(Alt Claims).

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.

#### 6 ) LIMITATION AS TO USE\*

- 1) Use for social, domestic, pleasure purposes and business purposes of insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover. 1) Use for fulfillon, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than fer reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trado.

LOSS OF USE

Not included

HIRE PURCHASE COMPANY

Refer to Policy Terms and Conditions

\*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Porty Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1997 (Malaysia), are not to be included under these headings.

If 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 in Singapore 13 Feb 2018

AIG Asia Pacific Insurance Pte. Ltd.

030080-000 Aon Singapore Pte Ltd 2 Shenton Way #26-01 SGX Centre 1 SINGAPORE 068804

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPAHN