

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	11/06/2018 17:24
Date Of Accident	11/06/2018 16:00
Exact Location Of Accident	TAMPINES AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU2447D
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Insured/Policyholder

Name Of Registered Owner	NOR AZURA BINTI RAHIM
NRIC No	S9000579J
Email Address	COOKIENATOR@LIVE.HK
Mobile Phone No	(LOCAL) +65-91198241
Alternative Phone No	Office-91198241

Vehicle Particulars

Manufacturer	MAZDA
Model	3

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
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If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700094902
Cover Note Number	

Driver

Name of Driver	NOR AZURA BINTI RAHIM
NRIC No	S9000579J
Date Of Birth	14/01/1990
Occupation	INDOOR
Date Of Driving Pass	30/04/2015
Driving Experience	3 YEARS AND 1 MONTH

Gender	FEMALE
Mobile Number	(LOCAL) +65-91198241
Fax Number	
Contact Number	OFFICE-91198241
EMail Address	COOKIENATOR@LIVE.HK
Address	259 BOON LAY DR #03-523 S640259
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	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

REFER TO ATTACHED REPORT

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	GBC1783C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NA
NRIC/Passport Number	
Contact Number	NA

Address	NA
Postcode	NA
Insurance Company Name	NA
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

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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:



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

2017/01/01 to 2017/01/01

SKETCH PLAN

A hand-drawn sketch plan on a grid background. It shows two rectangular areas, labeled 'A' and 'B', with arrows indicating flow direction. Area 'A' is a rectangle with an arrow pointing to the right. Area 'B' is a rectangle below 'A', also with an arrow pointing to the right. The flow is from left to right.

A-5142453 D

A: SLU 2447 D
B: GBC 1783 C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling on lane 2 and felt an impact and realised I was in a collision with another vehicle.

Insurance Co.	ALG.
Vehicle No.	SLU 2447D
Date of Accident	11/6/8
<input type="checkbox"/> Reporting Only	
<input checked="" type="checkbox"/> Own Damage Claim	
<input type="checkbox"/> Third Party Claim	
<input type="checkbox"/> Other Workshop	LF8 -

DECLARATION

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


Policyholder's Signature

Date & Time: 3:25pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 5:25pm


Reporting Centre Personnel's Signature

Name: _____

NRIC/FIN No.:

NRIC & DL

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9000579J**

Name: **NOR AZURA BINTI RAHIM**

Birth Date: **14 Jan 1990**

Issue Date: **30 Apr 2015**

002422787H

SG 50

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9000579J**

Name: **NOR AZURA BINTI RAHIM**

نور أزورا بنت راحيم

Race: **MALAY**

Date of birth: **14-01-1990** Sex: **F**

Country of birth: **SINGAPORE**

S9000579J

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

Class 3A Motor cars without clutch pedals (Auto) \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals \leq 2500kg

EFFECTIVE DATE: **30 Apr 2015**

Licence No: **S9000579J**

NP 420A

4318371

NRIC No: **S9000579J**

Date of issue: **19-11-2008**

Address: **APT BLK 259 BOON LAY DRIVE
#03-523
SINGAPORE 640259**



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Nor Azura Binti Rahim
 Period of Insurance : 27 Nov 2017 To 26 Nov 2018
 Engine No. : P520478720
 Chassis No. : JM6BN24A8J0187777

Vehicle No. : SLU2447D
 Policy No. : 1700094902
 Endorsement No. :
 Issued Date : 22 Jan 2018

ABOUT THE COVER

Make/Model : MAZDA 3 1.5 SKYACTIV
 Engine Capacity/Tonnage : 1,496.00 CC
 Driver Restriction : NA
 Sum Insured : Market Value
 Off Peak Car : No
 First Year of Registration : 2017
 Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive*

a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify the Policyholder or any authorized driver only if he/she meets the specified age condition.
 You have to pay an additional sum of \$3,000 as "Young and Inexperienced Driver Excess" (YIDEX) if you are or your Authorized Driver (named or unnamed) is under the age of 25 and 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, racing, reliability trial or speed testing, the carriage of goods other than parcels 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 6 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 165) and Section 94 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
 Fire - 20 (Own Damage) - 1000 (Theft) - 50 (Theft Cover) - 50

Section 2
 Property Damage - 50

Windscreen : 5100

Named Driver and Excess (where applicable)

Nor Azura Binti Rahim - 5000 (Own Damage)

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

1 Trans Eureka Pte Ltd Add 5, Ubi Close, Singapore 408005 02018888

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6320 6100. Alternatively, you may refer to AIG website www.aig.com.sg or AIG 50 Mobile App. Simply search and download "AIG 50" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE 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. 165), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503559190

ARF (AP) PTE LTD - MAZDA
 7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX
 SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Janik

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

5505AN

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

