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.

By the lodgement of this report to the insurers, you aforesaid.	hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	14/07/2018 12:02
Date Of Accident	12/07/2018 17:50
Exact Location Of Accident	ERP GANTRY OF CLEMENCED AVE TOWARDS SOMERSET ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJS5884P
Insured/Policyholder	
Name Of Registered Owner	MITSUHIRO SHIBATA
NRIC No	F1926031M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98307411
Alternative Phone No	OTHERS-98307411
Vehicle Particulars	

TOYOTA Manufacturer

Model **COROLLA ALTIS 1.6 AUTO**

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?

THIRD PARTY If No, Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company MSIG INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number J300000569QMY

Cover Note Number

Driver

Name of Driver HASHIMOTO TAKASHI

G6398559M Passport No/FIN Date Of Birth 15/06/1971 Occupation INDOOR **Date Of Driving Pass** 04/01/2016

Driving Experience 2 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98307411

Fax Number

Contact Number

EMail Address NOEMAIL Address 55 DEVANSHIRE RESIDENCE, DEVENSHIRE ROAD #03-02

Postcode 229466

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - STAFF

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident CHAIN COLLISION

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?

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.

YES

NO

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

AS 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 SLQ5556Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number 96936479

Address

Postcode

Insurance Company Name AXA INSURANCE PTE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJQ38117

Page 2 of 37

Maria Barria Canal

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver MR ZAINUL

NRIC/Passport Number

Contact Number 96289211

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
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- 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 Sirigapore (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)

Lunderstand, 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
- 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.
- 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.

		Bik 8 Sin Ming Road #01-58/60/62 Sin Ming Ind Est Singapore 57/2543 Tel: 6453 1236 Fav 6453 7944			
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel Signature Name:			
	Date 8 Time:	NRIC/FIN No.:			

CITY ALITO DIE LID

Accident Sketch Plan

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Individual Statement Pg. 1

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:

SJS5884P

No Attachment

Vehicle Type:

P10 - Passenger Motor Car

Vehicle Scheme:

Normal

14 LLOS: 11234 65080

Vehicle Attachment 1:

Vehicle Attachment 2:

Vehicle Attachment 3:

COROLLA ALTIS 1.6 AUTO

Vehicle Make:

TOYOTA

Vehicle Model:

Chassis No.:

MR053ZEE106151319

Engine No.:

3ZZ4918929

Motor No.:

Trailer Chassis No.:

Propellant:

Petrol

Passenger Capacity:

Engine Capacity:

1598 cc

Power Rating:

Unladen Weight:

1195 kg

Maximum Laden Weight: 1630 kg

Primary Colour:

Blue

Original Registration

Secondary Colour: 25 Aug 2009

First Registration Date:

25 Aug 2009

Manufacturing Year:

2009

Open Market Value:

\$17,853.00

PARF Eligibility:

Yes

Minimum PARF Benefit:

\$8,926.00

No. of Transfers:

Owner Particulars

Owner Name:

MITSUHIRO SHIBATA

Owner ID Type:

Foreign Passport

Owner ID:

TZ0588633

Country:

Japan Private Residential (Condo Apt or

Registered Address

House) / Shopping / Office Complexes

Type: Registered Block/House

Registered Street Name:

EWE BOON ROAD

Registered Unit No.:

02 - 01

Registered Building

Name:

259344

Registered Postal Code:

COE No. / Expiry Date:

2009080101000404K / 24 Aug 2019

COE Bid Category:

A - Car (1600cc & below) & Taxi

QP Paid:

\$14,310.00

Transaction Details

Business Transaction

20090825104655119474

Ref. No.

Business Transaction

25 Aug 2009

Date:

Business Transaction

Time:

10:46:55

Message

The above vehicle has been successfully registered.

Please note that \$22,687.50 will be deducted from your GIRO account.

The notification delivery date will be subject to validation of address with source agency.



Please read through the Privacy Policy, Conditions of Use and Disclaimer.

Please do not use the **Back** or **Forward** buttons on your browser as this may alter the results of the transactions.

Best viewed with IE 5.5 SP2 and above. 800 X 600 resolution

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MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of MS&AD INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

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

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)

(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

MOTORMAX PLUS Comprehensive

Certificate No.

1300000569 OMY

Excess: SGD300

Windscreen Excess: SGD100

 Index Mark and Registration Number of Vehicle SJS5884P

2. Name of Policyholder

Mitsuhiro Shibata

- 3. Effective Date of the Commencement of Insurance for the purposes of the Act 25/08/2018
- Date of Expiry of Insurance 24/08/2019
- 5. Persons or Classes of Persons entitled to drive*

Mitsuhiro Shibata

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

*Provided that the person driving is permitted in accordance with the licensing or other laws or 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. Limitations as to Use *

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

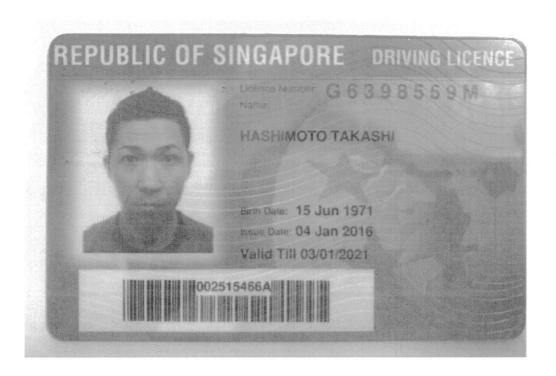
This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

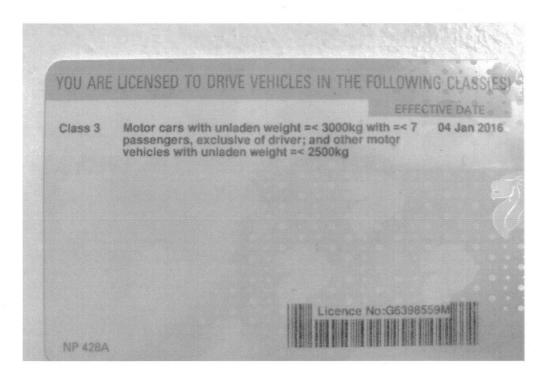
I/WE HERESY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

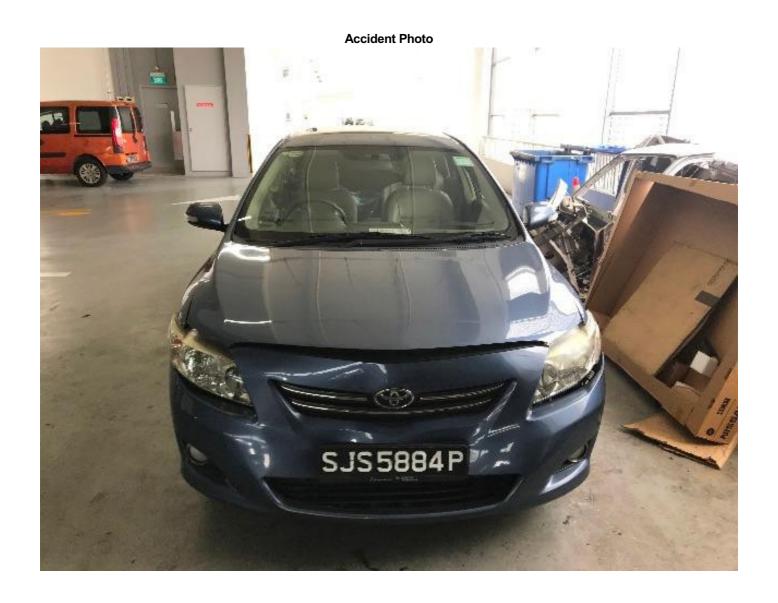
Michael W Gourlay Chief Executive Officer













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