Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 24/08/2018 16:41

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.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	24/08/2018 16:25
Date Of Accident	21/08/2018 14:45
Exact Location Of Accident	ALONG CLEMENTI ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBG4439G
Insured/Policyholder	
Name Of Registered Owner	FEDERAL EXPRESS (SINGAPORE) PTE LTD
Co Reg No	198402740W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-69222929
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HIACE-3.0 (A)
Exact Purpose for which vehicle was being used at time of accident	DELIVERY AND PICK-UP
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	100829969
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD IZZUDDIN BIN RAJABALLY
NRIC No	S8516093A
Date Of Birth	23/05/1985
	OUTDOOD

OUTDOOR

08/02/2007

11 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96337854

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 633B SENJA ROAD

#04-151

Postcode 672633
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

venicie

Insurance Company of Driver's Own Vehicle

-

NO

NO

NO

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.

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?

If Yes, against whom?

Circumstances of Accident

ON 21/08/2018 AT 14:45 I WAS DRIVING ALONG CLEMENTI ROAD, TRAFFIC LIGHT WAS ON AMBER FRONT CAR JAMMED HIS BRAKE. I WAS NOT ABLE TO REACT AND HIT HIS CAR FROM BEHIND.

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 SLS4732C
Vehicle Make/Model/Colour HONDA CRV

Details Of Properties REAR BUMPER AND PANEL DENTED

Vehicle Category PRIVATE CAR

Name of Driver TAN JIE KAI

NRIC/Passport Number S9537959A

Contact Number Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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:
 - 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:

river's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signa

Name

NRIC/FIN No.:

SKETCH PLAN				
Veh A = Q	BG 4439G			
VPLB:SI			8	
VPR 13: 32	377520		T I	
		В		
		A		
		l n		
Story	Clementi Roa	d		
ESCRIBE CIRCUMSTANCES O				
On 21/0 Clementi Roa Car janned and hit his	08/2018 at 1	4:45 2	was driv	my along
Chementi Roa	d, troffic.	eight wa	son any	ber prout
Carjanned	his broke.	2 was	not able	to reach
and hit his	car prou be	hord .		
ECLARATION We glasse the foregoing particul	lars are true in every respect.			
- Yo		37884.	20 0	2-
000		117.31	-	011
olicyheldar Signature ate & Time:	Driver's Signature (If driver is not the policyho Date & Time:	older)	Reporting Centre Per Name: NRIC/FIN No.:	rsonnel's Signature



HOTEMETEL 495,647 9-50 F

CERTIFICATE OF INSURANCE

NOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACTIONABILES (*) ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHIC AS (THIRD PARTY RISKS) RULES 1951 (MALAYSIA)

37.80

THIRD PARTY COMMERCIAL MOTOR

WINDSCREEN EXCESS

OWN DAMAGE EXCESS \$\$0.00 N/A

CERTIFICATE NO. 999995246/100829969-00000

(for percess P. effect from 1st Forcet Bot 2002)
SUM INSURED S\$0.00
INSURING WITH COE/PARF NO

1) VEHICLE REGISTRATION NO.

GBG4439G

2) NAME OF INSURED

FEDERAL EXPRESS (SINGAPORE) PTE LTD

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

1 Oct 2018 2 Oct 2017

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.

Provided that the person driving is permitted in accordance with the scensing 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 Low or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE*

Use in connection with the Injured's business.
 Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.
 Use for social domestic or pleasure purposes.
 This Policy does not cover.
 Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
 Use for hire or reward a traiter except the towing of any one disabled mechanically propelled vertice.

LOSS OF USE NOT INCLUDED

"NAMED DRIVER N/A

HIRE PURCHASE COMPANY NA

*Limitations rendered vioperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Phod Transport Act, 1697, Main and the net to be produced under these tomorrow

L/ We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provision Party Risks and Compensation) Act (Chapter 189) and iPart IV of the Road Transport Act, 1987 (Malaytia) ith the provisions of the Motor Vehicles (Third

Issued in Singapore 25 Sep 2017

AIG ASIA PACIFIC INSURANCE PTE. LTD

039052-099

MARSH (SINGAPORE) PTE LTD 8 MAPINA VIEW #09 02 ASIA SQUARE TOWER 1 SWIGHFORE 018960

Authorised Representative

ORIGINAL.







DRIVER-NRIC-DL-BK







Date of issue

07-09-2017

APT BLK 633B SENJA ROAD #04-151 SINGAPORE 672633

Motorcycles =< 200 CC
Motorcycles between 204-CC and 400 CC

Motorcycles > 400 CC
Motor cars = 3000 kg with = 7 page ers, exclusive of the driver, and notof tractors vehicles = < 250 0 kg Class 3

07 Jul 2004

25 Oct 2005

Sic

04 Jan 2008

08 Feb 2007

91813774

S8516093A

S / No. 90000664







