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 conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	20/09/2018 11:15		
Date Of Accident	20/09/2018 08:30		
Exact Location Of Accident	BUKIT TIMAH ROAD TOWARDS UPPER BUKIT TIMAH ROAD		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SLQ3528T		
Insured/Policyholder			
Name Of Registered Owner	ACE FLEET MANAGEMENT PTE LTD		
Co Reg No	201710914n		
Email Address	SQUARECAR123@GMAIL.COM		
Mobile Phone No			
Alternative Phone No	Office-86667800		
Vehicle Particulars			
Manufacturer	HONDA		
Model	VEZEL HYBRID		
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE		
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 HIRE		
Insurance Company			
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	SLQ3528T		
Cover Note Number			
Driver			
Name of Driver	ARUMUGAM SELVAKUMAR		
NRIC No	S1285613Z		
Date Of Birth	08/10/1958		

OUTDOOR

22/05/1980

38 YEARS AND 3 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-98506850

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 59 LENGKOK BAHRU Address

#08-539

NO

NO

3

Postcode 150059 NO

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured **OTHER - PRIVATE HIRER**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : LADY

> Gender: : Female

Passenger 2 Name: : GIRL

> 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

PLEASE REFER TO 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

SLQ5362R

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

Sketch Plan

SKETCH PLAN

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- 6. 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
- 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:

- 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.
- (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.

Date & Time:

Reporting Centre

Name:

NRIC/FIN NBoh Kwee Choo S6840583A

11718 8

SKETCH PLAN	Toward	upper Bukit	Timah Re
	Bukit Timah R	d	
A:SLQ3528T B: QQ5362R	₹		

DESCRIBE CIRCUMSTANC			
was driving when I trime: 8	to exit to lone one inc trong lane I his	we That is	on side root lit on who all
Date: 2	0[09/18		
DECLARATION I/We declare the foregoing pa	rticulars are true in every respect.		
Date 2 SEP 2018	Driver's နိုးစွာချီးပူးစုံ (If driver is no စုံ စာခြေစပြီးလှုံးဖွဲ့ဖြစ်၏) Date & Time:	Reporting Central Pers Name: NRIC/FIN No.: Poh k S6i	onnel's Signature (wee Choo 840583A

Cass of Germanican, Vs.

M 2,400



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (DIMED PARTY HISKS AND COMPENSATION) ACT [CHAPTER 144] MOTOR VEHICLES (SHIND PARTY HISKS AND COMPENSATION) HIRES, 1846 HOAD TRANSPORT ACT, 1947 (MALAYSIA)

Comprehensive Commercial Auto Plan CERTIFICATE NO. SLQ3528T

MOTOR VEHICLES (SHIP PARTY HIRKS) RUCES, 1995 (MALAYSIA)

(The below excess is subject to CST) POLICY EXCESS

S\$1,000.00 (I & II) WINDSCREEN EXCESS \$\$100,00

SUM INSURED

Market Value

INSURING WITH COE/PARF Yes SLQ3528T

1) VEHICLE REGISTRATION NO.

2) NAME OF POLICYHOLDER

Ace Fleet Management Pte Ltd

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

31 July 2018

4) DATE OF EXPIRY OF INSURANCE

30 July 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the insured's order or with their permission. Authorised Orivers must be age 22 to 65 years old with at least 2 years Driving Experience
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

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 ordinal Court of Law or by reason of any enectment 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 himd,
- 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 itsilors, driving test, resing, pace-making, reliability trial or speed-testing, 2) Use whilst drawing a trailer except the lowing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Applicable

HIRE PURCHASE COMPANY

SINGAPURA FINANCE LTD

"Umitations rendered tropprative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1997 (Nate are not to be included under these headings.

17 We hereby Cestly that the policy to which this Certificate relates is issued in accordance with the provisions of a (Third- Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1997 (Malaysia).

Issued in Singapore 08 Aug 2018

0504850-000 All Ins Agency Pte Ltd 22 Sin Ming Lane #05-78 Midview City Singapore 573969

STATE OF THE PARTY OF

AIG Asia Pacific Insurance Pte, Ltd.

AUTHORISED REPRESENTATIVE

ORIGINAL

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$1285613Z



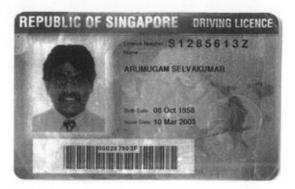


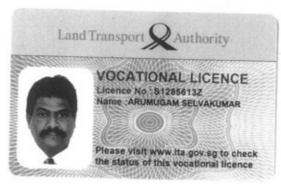
ARUMUGAM SELVAKUMAR

ஆ செல்வகுமார்

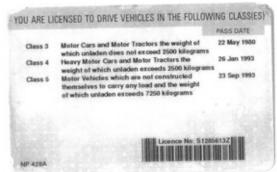
08-10-1958 M

SINGAPORE









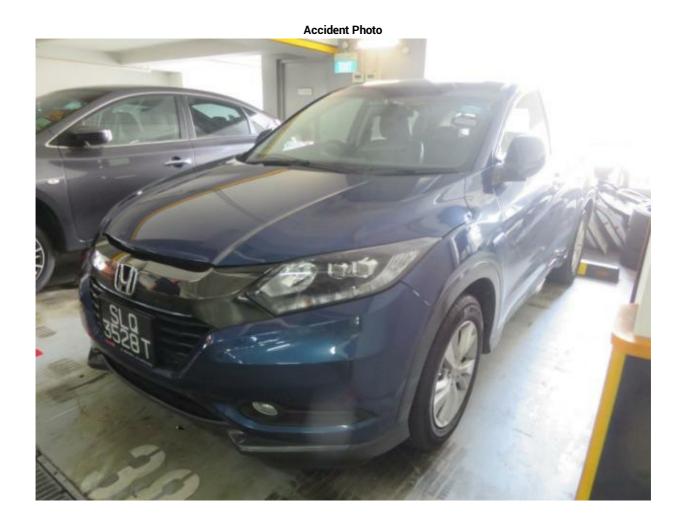
This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Description Type 13 PRIVATE HIRE CAR VL 28/06/2018









Accident Photo



CHASSIS NUMBER

