

Remarks	LINE	LINE	DATE	TIME	Sample Use	Done by
1) Apply for Transition Allowance ( ) / Courtesy Car ( )						
2) QC Check / Post Repair Inspection ( )						
3) Upload Repair Photo (Repair Cost > \$3000) ( )						

[illegible]

NIA 806838		Invoice Preparation Checklist	Ames	Walt
Human's Particulars		1) AR: Accident Reporting (\$20)	2) DA: Damage Assessment (\$100)	INC (\$20)
Driver/Owner:		3) TP: Towing Fee \$40/\$43		
Contact No:		4) FT: Follow-Through Survey \$130		
Damaged Portion:		5) FT: Follow-Through Survey (Re-survey) \$20		
		For preliminary analysis INC Only (twofold in 200)		
		6) TR: Re-inspection \$73		
		7) NI: (DA + SMRT Survey) \$160		
		8) NTUC Additional Services		
		9) NI		
		NI: Courtesy Car / Taxi Allowance \$3		
		NI: Repairs Coordination \$10		
		NI: Post Repair Inspection \$23		
		NI: DY / Collect Unsettled Compensation \$1		
		TP (NI) / TP (Non INC) against INC \$20		
		TP (NI) / TP (Non INC) against INC \$0		
		Invoice dated	Not Charged	
		Invoice Period	Not Charged	

## 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 liability.
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	22/10/2018 09:47
Date Of Accident	19/10/2018 15:20
Exact Location Of Accident	TAMPINES MALL DROP OFF POINT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP3962B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ASSET LIMO
Co Reg No	53309913K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94896127
Alternative Phone No	OFFICE-94896127

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	999994656
Cover Note Number	

### Driver

Name of Driver	BAKAR FRIDDIE
NRIC No	S0223167J
Date Of Birth	18/05/1953
Occupation	OUTDOOR
Date Of Driving Pass	03/05/2002
Driving Experience	16 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94896127
Fax Number	
Contact Number	OTHERS-94896127
Email Address	NOEMAIL



Address	BLK 902 TAMPINES AVENUE 4 #15-214
Postcode	520902
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - 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 - OPENING DOOR OF VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
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.	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

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

Vehicle Registration Number	SHB1215K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
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.
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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.
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 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)**

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.

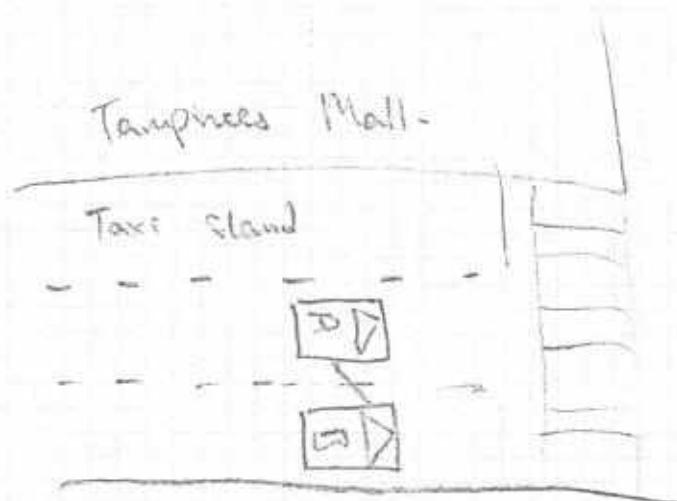


Policyholder's Signature  
Date & Time:

*Bakari F.*  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 22/10/2018  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.: *Rashid Haniff*

# SKETCH PLAN



B) SHB1215K

A) SDP3962B

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above stated date & time, I <sup>was picking</sup> up my passengers at Tampines Mall moving at a dead slow speed. Suddenly vehicle B, a taxi's passenger open the door fully and hit onto my car.

It was a zebra crossing in front of me so I would like to state that I was moving very slow and the damage was at the right rear portion of my vehicle. Hence it was because the passenger did not see my car.

## DECLARATION

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



Policyholder's Signature

Date & Time:

*[Signature]*

Driver's Signature

(If driver is not the policyholder)

Date & Time:

*[Signature]* 22/10/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

*[Signature]*



Email: [sm@idac.com.sg](mailto:sm@idac.com.sg)

Tel no: 6555 6888 Fax no: 6454 3279

### Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 19/10/18 (dd/mm/yy) Time of Accident: 15:20 (24-HR-FORMAT)  
Vehicle No.: SJP 3962 B Vehicle Make & Model: Toyota Vios  
Exact location of Accident: Tampines mall drop off point  
Policyholder's Name / IC No.: Asset Limo 53309913K  
Driver's Name / IC No.: Bakar Friddie S0223167J (As Above) ☐  
Driver's Contact No.: 94896127 Company Contact No.:  
Driver's Address: Blk 902 Tampines Ave 4 #15-214 s520902  
Insurance Company: AIG Email address (if any):

### Relationship between Owner & Driver:

or Others specify: Rental

### What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

### Exact purpose for which the vehicle Was being used at time of accident?

☐ Private use / ☒ Work purpose

Occupation (nature of job) ☐ Indoor / ☒ Outdoor

No. of Passengers (Including Driver): 1

Passenger Name :

Gender :

Passenger Name :

Gender :

### Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others:

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name:

Injuries Sustain: Injured Person in Which Vehicle:

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station:

### The Other Party(s) Details:

1. Driver's Name / IC No: Vehicle No: SHB 1215 K

Driver's Contact No: Insurance Company (If any):

2. Driver's Name / IC No: Vehicle No:

Driver's Contact No: Insurance Company (If any):

\*Independent Witness (If Any): Contact No:

Preferred Workshop Name: Contact No:

\*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

NRIC No: S0223167J

**BAKAR FRIDIE**

Birth Date: 18 May 1953  
Issue Date: 03 May 2003

000440775F

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. S0223167J

Name: **BAKAR FRIDIE**

Race: **MALAY**

Date of Birth: **18-05-1953** Sex: **M**

Country of birth: **SINGAPORE**

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

Class	Description	Valid Until
Class 2B	Motorcycles not exceeding 200 cc	12 Dec 1977
Class 2A	Motorcycles between 201 cc and 400 cc	12 Dec 1977
Class 2	Motorcycles exceeding 400 cc	12 Dec 1977
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	03 May 2003

NP 428A

Licence No: S0223167J

NRIC No: S0223167J

26-05-1992

APT BLK 902 TAMPINES AVENUE 4 #15-214  
SINGAPORE 520902

NRIC No: S0223167J Date: 30/01/1996 (R)



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, 1963

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

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

M.Z.400

(The below excess is subject to GST)

THIRD PARTY	COMMERCIAL MOTOR	POLICY EXCESS	S\$1500.00 (Sect II)
CERTIFICATE NO.	SJP3962B	WINDSCREEN EXCESS	NA
POLICY NO.	999994656		

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

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

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

S\$1,500.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.

The policy does not cover drivers who are below 22 years old with less than 2 year driving experience.

Intended usage is for limousine/ rental purposes.

SUM INSURED NA

INSURING WITH COE/PARF NA

SJP3962B

ASSET LIMO

25 May 2018

09 March 2019

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 tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (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 Included

HIRE PURCHASE COMPANY NA

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

I / 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 25 May 2018

AIG Asia Pacific Insurance Pte, Ltd.

503052-000  
HUND  
55 Lorong L Telok Kurau  
#02-59 Bright Centre  
Singapore 425500

  
AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC