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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

| aforesaid. | | |
|--|---|--|
| | ACCIDENT STATEMENT | |
| Date Of Report | 20/11/2018 11:32 | |
| Date Of Accident | 19/11/2018 18:00 | |
| Exact Location Of Accident | AYE TOWARDS CITY AFTER JURONG TOWN HALL RD | |
| Country/State of Loss | SINGAPORE | |
| DETAILS OF OWN VEHICLE | | |
| Vehicle Registration Number | SKU2545R | |
| Insured/Policyholder | | |
| Name Of Registered Owner | TOKYO CENTURY LEASING (SINGAPORE) PTE. LTD. | |
| Co Reg No | 197901535G | |
| Email Address | NOEMAIL | |
| Mobile Phone No | | |
| Alternative Phone No | OFFICE-68443611 | |
| Vehicle Particulars | | |
| Manufacturer | ТОУОТА | |
| Model | CAMRY 2.5 AUTO | |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE | |
| 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 CAR | |
| Insurance Company | | |
| Name of Insurance Company | MSIG INSURANCE (SINGAPORE) PTE. LTD. | |
| Type Of Coverage | COMPREHENSIVE | |
| Fleet Policy | YES | |
| Policy Number | J300045901MCY | |
| Cover Note Number | | |
| Driver | | |

Driver

Name of Driver KANAMOTO SEIJUN

 NRIC No
 G3292153T

 Date Of Birth
 21/01/1988

 Occupation
 INDOOR

 Date Of Driving Pass
 20/09/2016

Driving Experience 2 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-90307944

Fax Number
Contact Number

EMail Address S KANAMOTO@KANAMOTO.CO.JP

Address

Postcode

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 - HEAD TO REAR

Weather Conditions RAINING
Road Surface WET

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?

NO

Was any other material or property damaged? YES

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

NO 2

Number of Passengers (Including Driver)

Passenger 1

NAME: : KENJI MUROTA

GENDER: : MALE

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

I SKU2545R was driving along AYE city just after Jurong town hall exit on the 1st lane. As I was driving with a slow speed due to the heavy traffic, while I was following the traffic in front and my vehicle was on a stationary position, suddenly I felt an hard impact coming from behind, and discover that the 3rd party SGJ8559S had collided onto my rear vehicle. I manage to take some photos at the scene and exchange particular with the other party, no injuries was involved at the scene.

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 SGJ8559S

Vehicle Make/Model/Colour SUZUKI/VITARA 2.0 A/BLACK

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver MUHAMMAD IRWAN BIN RATMAN

NRIC/Passport Number S8631529G Contact Number 97634557

Address Postcode

Insurance Company Name

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
 This Form must be completed by the Policyholder and/or the Authrolsed Driver.
 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.
 The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
 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 application by interested parties.
 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. ng made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)
- I understand, acknowledge, agree and consent that:

 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 (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or (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 and personal information set out in this form) and any other personal information to all insurer(s) who have insured we hicle(s) involved in this accident shall be collectively referred to as the vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident agency/authority (such as "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the police), for the purpose(s) of : the claims

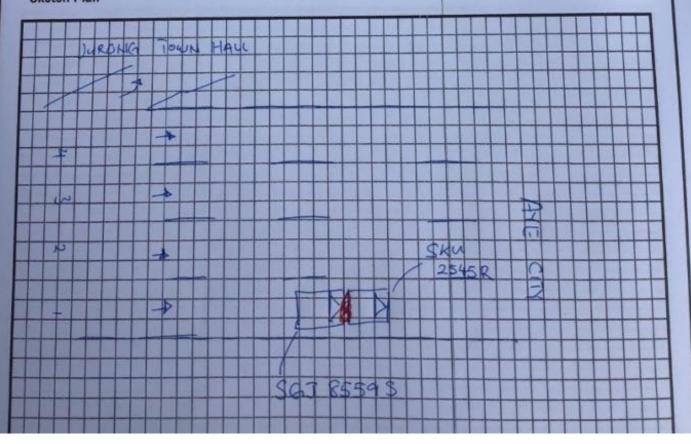
- (ii) Investigating the accident and/or my claims:
 (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain 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.

VERIFIED BY AJAX MARS REPORTING OFFICER MUHAMMAD SUMARDI BIN

MOHD AFFANDI

Witnessed by Reporting Centre Personnel

Sketch Plan



Common Statement Pg. 1

ACCIDENT STATEMENT (2000 characters)

| lane. As I was driving with a slow speed the traffic in front and my vehicle was or | |
|--|--|
| Taxi Voucher No.: | |
| DECLARATION I/We declare that the above particulars & information provided above are true in every aspect | |
| VERIFIED BY AJAX MARS REPORTING OFFICER - MUHAMMAD SUMARDI BIN MOHD AFFANDI | 1 |
| MARS Officer | Registered Owner or Driver's Signature |
| Job Complete Date/Time | Date/Time: |
| 20 November 2018 at 9:24 AM | 20 November 2018 at 9:24 AM |
| | |







