### 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 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	24/11/2018 10:58
Date Of Accident	24/11/2018 08:30
Exact Location Of Accident	JUNCTION OF JURONG WEST AVE 2 & ST 32
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJQ1918M
Insured/Policyholder	
Name Of Registered Owner	MOHAMED AFFANDI BIN BURHANUDDIN
NRIC No	S1580755E
E '1 A I I	NOTAM

**Email Address NOEMAIL** 

Mobile Phone No (LOCAL) +65-96210021 Alternative Phone No OFFICE-96210021

**Vehicle Particulars** 

Manufacturer **HONDA** 

Model CITY 1.5L I-VTEC 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?

REPORTING ONLY If No, Please state action to be taken PRIVATE CAR Vehicle Category

**Insurance Company** 

Name of Insurance Company EQ INSURANCE COMPANY LTD Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number DMPPHQ18-003084

Cover Note Number

Driver

Name of Driver MOHAMED AFFANDI BIN BURHANUDDIN

NRIC No S1580755E Date Of Birth 09/12/1963 Occupation INDOOR **Date Of Driving Pass** 06/06/2018

**Driving Experience** 0 YEAR AND 5 MONTH

Gender MALE

Mobile Number (LOCAL) +65-96210021

Fax Number

OFFICE-96210021 Contact Number

**EMail Address NOEMAIL**  Address BLK 61CHAI CHEE ROAD #11-850

Postcode 46006

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

**General Information of the Accident** 

Type Of Accident COLLISION - CROSS JUNCTION

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?

Was any other material or property damaged? YES

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

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NO

2

NO

NO

GENDER:

NAME: : UNCLE

: MALE

**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** 

PLEASE REFER TO ATTACHED

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 PA8423R

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 12

# Sketch Plan Pg. 1

SKETCH PLAN	1	
A: SJ Q1918M B:P40423B	P A2	

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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THE ACCID	ENT	MAPPE	JED	<u>الاه</u>	24	11/2018	<u>A†</u>	8:3	DAN	Ar.	DHP
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ECLARATION			$\overline{\Box}$						^	1 /	CARS SE

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

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### Sketch Plan #2 Pg. 1

#### SKETCH PLAN

### **IMPORTANT NOTICE**

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- 3. Information provided must be as <a href="mailto:truthful and accurate as possible">truthful and accurate as possible</a>. 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.
- 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)

Lunderstand, acknowledge, agree and consent that:

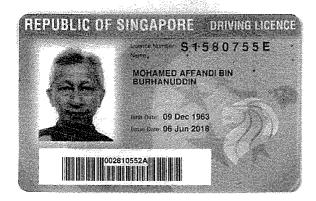
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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) 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: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Person Name: NRIC/FIN No.:







MOHAMED AFFANDI BIN BURHANUDDIN

MALAY
Date of birth
09-12-1963
Country/Place of birth
SINGAPORE

Sex M

\$1580755

5734498

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight =< 3000kg with =< 7 05 Jun 2018

- passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

NP 428A



NRIC No. S1580755E

Date of Issue 07-04-2017

APT BLK 61 CHAI CHEE ROAD #11-850 SINGAPORE 460061

### INS CERT Pg. 1

**EQ Insurance Company Limited** 

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no. 1978-00490-N



#### 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

### PRIVATE CAR Third Party Fire & Theft

Certificate No.: DMPPHQ18-003084

Form: MX2

Excess:

Insured&Named Driver Unnamed Driver S\$0.00(Section 1 - Own Damage)

S\$0.00(Section 1 - Own Damage)

1. Index Mark and Registration Number of Vehicles

SJQ1918M

2. Name of Policyholder

MOHAMED AFFANDI BIN BURHANUDDIN

- 3. Effective Date of the Commencement of Insurance for the purpose of the Act 15/05/2018
- 4. Date of Expiry of Insurance 14/05/2019
- 5. Person or Classes of persons entitled to drive\*
  - (a) The Policyholder
  - (b) Any other person who is driving on the Policyholder's order or with his permission.
  - \* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.
- 6. Limitation as to use\*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing,pace-making,reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purpose in connection with the Motor Trade

\*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.

IWE 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase:

A000302/Perpetual Insurance Agency Pte Ltd Date of Issue: 15/05/2018 11:49

Authorised Signatory
EQ Insurance Company Limited







