SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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

	ACCIDENT STATEMENT
Data Of Danast	
Date Of Assistant	01/12/2018 13:15
Date Of Accident	01/12/2018 00:15
Exact Location Of Accident	BEHIND MUSTAFA LOADING BAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YN673M
Insured/Policyholder	
Name Of Registered Owner	B.I DISTRIBUTORS PTE LTD
Co Reg No	199705899Z
Email Address	KASSIMRJ@GMAIL.COM
Mobile Phone No	
Alternative Phone No	Office-64190671
Vehicle Particulars	
Manufacturer	HINO
Model	GH8JRKA-7.7 D (M)
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?	NO
lf 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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100268670
Cover Note Number	
Driver	
Name of Driver	MOHAMED ARIF PAQUIRY MOHAMED
NRIC No	G0832457W
Date Of Birth	14/12/1969

OUTDOOR

24/08/2016

2 YEARS AND 3 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-96135604

Fax Number

Contact Number

EMail Address NOEMAIL

C/O BLK 668 CHANDER ROAD #02-18 Address

SINGAPORE

Postcode 210668 YES

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

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?

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)

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

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

NO

NO

0

NO

NO

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SFG1819R Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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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)
 - (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
- (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 Perso Ranger

Names

NRIC/FIN No.:

H PLAN			Mahiala
	parking.		<u>Vehicle</u>
			A-YN673
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			2
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			Vehicle Motorcycle
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MIDE CINCOMSTANCES OF	1112710411111		
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declare the foregoing particul be advised that your insurer may ha	ve a fourteen (14) days clause whereby the claim a	gainst own policy must be made w	Othin the stipulated timeframe
he day of occurrence. Kindly check y	our policy for more details.	Xn	100
4.5-			V
	Driver's Signature	Reporting Centre	Personnel's Signature
holder's Signature			
holder's Signature	(If driver is not the policyholder)	Name: NRIC/FIN No.:	pennen



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : B. I. Distributors Pte Ltd : YN673M Vehicle No. : 2100268670-07 Period of Insurance : 04 Aug 2018 To 03 Aug 2019 Policy No.

: J08EUB11334 Endorsement No. Engine No.

: GH8JRK10639 Issued Date : 06 Jul 2018 Chassis No.

ABOUT THE COVER

: HINO GH8JRKA

Engine Capacity/Tonnage: 8.2 Tonnage First Year of Registration : 2009 Sum Insured : Market Value Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) Any person who is driving on the Policyholder's order or with their permission.
 b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

1) Use in connection with the Policyholder's business,
2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business,
3) Use for social, demestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving ballon, driving lost, racing, pace-making, rollability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle, c) use for any purpose in connection with Motor Trade.

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

Section 1 Fire - SO Own Damage - \$1400 Theft - \$0

Section 2 Property Damage - \$0

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reperting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG website www.sig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTures or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: UOB LIMITED

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cop. 189), Part IV of the Read Transport Act, 1997 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

ASHADEVI JITENDRA KUMAR SHAH

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

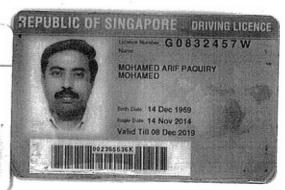




MOHAMED ARIF PAQUIRY MOHAMED

Sex M

14-12-1969 Nationality INDIAN





VISIT PASS

Immigration Regulations



MULTIPLE JOURNEY VISA ISSUED

Date of Explry 14-06-2019



