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 aforesaid

	ACCIDENT STATEMENT
Date Of Report	26/03/2019 16:17
Date Of Accident	26/03/2019 08:10
Exact Location Of Accident	VICOM KAKI BUKIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SLZ2149M
nsured/Policyholder	
Name Of Registered Owner	DILIP KUMAR NAIR
NRIC No	S7769880I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92386743
Alternative Phone No	Office-92386743
/ehicle Particulars	
Manufacturer	KIA
Model	CERATO K3
exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
/ehicle Category	PRIVATE CAR
nsurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
ype Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800017751
Cover Note Number	
Oriver	
Name of Driver	DILIP KUMAR NAIR
NRIC No	S7769880I
Date Of Birth	08/03/1977

INDOOR

26/11/2015

3 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92386743

Fax Number

Contact Number OFFICE-92386743

EMail Address NOEMAIL

Address BLK 487 PASIR RIS DRIVE 4 #11-523

Postcode 510487 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 - HEAD TO REAR

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

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)

Passenger 1 Name: : DIVYA

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

I WAS INSIDE THE CAR AND WHEN I GOT OUT OF THE CAR TO MAKE PAYMENT AT VICOM FOR ROAD TAX RENEWAL IS WHEN THE LEG GOT LIFTED FROM ACCELERATOR AND CAR MOVED IN FRONT TO HIT THE BACK BUMPER TAIL GATE.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLC1499E

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B
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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- 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
- (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.
- 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: 26 Apr 2013

Driver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: 26/3/2019 1045 hrs.

GIARMC SketchPlanForm_V3

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was inside the car and when I got out of the car to make payment at Viacom for Road Tax Renewal is when the are legget littled from accelerator and car moved in front to hit the back barmper, Tailgare
is when the ser le got little from accelerator and
car moved in front to hit the back burger, Tailgate

DECLARATION

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

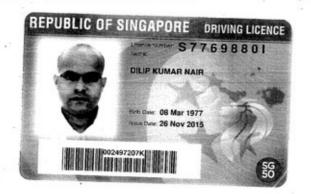
Policyholder's Signature

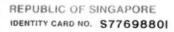
Date & Time: 26th Apr 2019
9:15am
GIARMC SketchPlanForm_V3

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:









DILIP KUMAR NAIR

Race INDIAN 08-03-1977 M Country of birth

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

EFFECTIVE DATE

No S77698801

INDIAN

APT BLK 487 PASIR RIS ORIVE 4 #11-523 SINGAPORE 510487

Date: 19/05/2014 (R)





POLICY SCHEDULE

KIA AUTO PROTECTOR PRIVATE VEHICLE

Policy No.

: 1800017751

Period of Insurance : 26 Apr 2018 to 25 Apr 2020

Issued Date : 09 May 2018

ABOUT THE POLICYHOLDER

Name of Policyholder

: Dilip Kumar Nair

Address

: 487 PASIR RIS DRIVE 4

#11-523

SINGAPORE 510487

Occupation/Nature of Business: IT Professionals.

ABOUT THE VEHICLE

Registration No. : SLZ2149M

Chassis No. : KNAFX411MJ5761737

First Year of Registration : 2018

Engine No.

Engine Capacity/Tonnage: 1,591.00 CC : G4FGHH692096

Seating Capacity: 5

Body Type

: Sedan

Make/Model : KIA Cerato K3 1.6 EX

Hire Purchase Company/Employer's Loan

: Standard Chartered Bank (Singapore) Limited

ABOUT THE COVER

: Market Value

Off Peak Car

: Yes

Driver Restriction

: NA

Insuring with COE/PARF : Yes

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/her permission. 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

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Other Key Policy Benefits :

Act of God, Loss of Use 1500cc - 1500cc, Strike, Riots and Civil Committions, PA to Authorised Driver / Unnamed Passengers - \$10000, Dealer + AIG Authorised Workshops, New For Old (36 months), PA Insured - \$100000, Fixture and Accessories (Cosmelic) - \$5000, Solar Film- \$1150, Loan Protection, In-Car Camera Excess Waiver, Glass Rooff Moon Rooff Panaromic Glass Roof

EXCESS

Section 1 Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver Dilip Kumar Nair - \$600 (Own Damage) PREMIUM

Premium

2,014.68 : \$

GST (7%) : \$ 141.03

:\$

2,155.71 Your Premium includes the following discount(s):

Online Driver Risk Test Disc_3 - 15.00%, No Claim Discount - 0%









Accident Photo







Accident Photo

