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 | 07/05/2019 08:59 |
| Date Of Accident | 06/05/2019 13:45 |
| Exact Location Of Accident | HARLYN ROAD / TREVOSE CRESCENT |
| Country/State of Loss | SINGAPORE |
| DETAILS OF OWN VEHICLE | |
| Vehicle Registration Number | SJZ7846A |
| Insured/Policyholder | |
| Name Of Registered Owner | ASHOK SINGHANIA |
| NRIC No | S2704350Z |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98236867 |
| Alternative Phone No | OFFICE-98236867 |
| Vehicle Particulars | |
| Manufacturer | MERCEDES-BENZ |
| Model | E250 |
| Exact Purpose for which vehicle was being used a time of accident | ıt |
| 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 Income of Comment | ALC ACIA DACIFIC INCUDANCE DTE LTD |

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number 2100242224-08

Cover Note Number

Driver

Name of Driver **RASHMI SINGHANIA**

NRIC No S7183096I Date Of Birth 20/12/1971 Occupation **INDOOR Date Of Driving Pass** 16/01/2003

Driving Experience 16 YEARS AND 3 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-98236867

Fax Number

Contact Number

EMail Address NOEMAIL

2 HARLYN ROAD Address

Postcode 299441

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **SPOUSE**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions **CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

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

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

SLE3393C Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

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:

- (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:
 - 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:
 - 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 Signature

Date & Time

Driver's Signature

(If driver is not the policyholder)

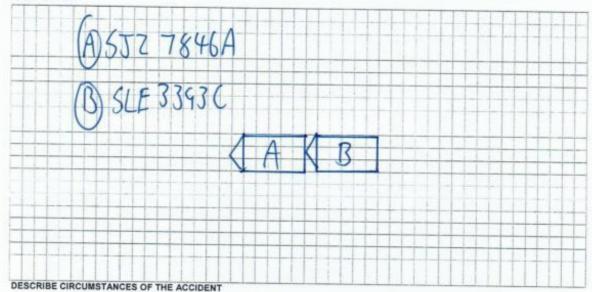
Kashini Siylon

Date & Time

Reporting Centre Personnel's

Name: Hay ON

SKETCH PLAN



Ref to one letter for detail.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Statement of Events

- At 1.42pm, I was stationary at Harlyn Road Trevose Crescent junction, waiting to turn right onto Trevose Crescent from Harlyn Road.
- Suddenly, I heard a bump sound at the back of my car. As my car was stationary at the stop line, I turned back to see that a vehicle (SLE3393C) had collided into my car at the back.
- I alighted from the vehicle to inspect the damage; and the driver of SLE3993C alighted as well.
- The driver of the perpetrating vehicle (SLE3993C) proceeded to apologize several times, claiming that she was "sorry."
- We took pictures, and the perpetrating driver requested me to move the car as there were many cars in the way.
- She again apologized and said that "it was her mistake, and that she should be more careful."



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Ashok Singhania Vehicle No. : SJZ7846A Period of Insurance : 28 Dec 2018 To 27 Dec 2019 Policy No. : 2100242224-08

Engine No. : 27186030149047 Endorsement No.

Chassis No. : WDD2120472A343578 Issued Date : 21 Dec 2018

ABOUT THE COVER

: MERCEDES BENZ E250 CGI BE

Engine Capacity/Tonnage : 1,796.00 CC Sum Insured : Market Value First Year of Registration : 2010 Driver Restriction : NA Off Peak Car : No 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 triexperienced 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 neward, driving sulton, driving test, racing, pace-making, reliability trial or appectitesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

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

EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Windscreen: \$100

Named Driver and Excess (where applicable)

Ashok Singhania - \$800 (Own Damage)

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

1. Cycle & Carriage Eunos Service Center (For accident reporting only). Add: 330 Ltbl Road 3 Singapore 408650 62061818.
2. Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818.

For other: Approved Reporting Centres/A/G Authorised Repairers, please contact our 24-hs or A/G SG Mobile App, Simply search and download "A/G SG from iTunes or Google Play. ct our 24-hour accident emergency hottine at +55 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

IVWs 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 (Cap. 189), Part IV of the Road Transport Act. 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500660374

CYCLE & CARRIAGE - EDTANG 239 ALEXANDRA ROAD SINGAPORE 159930 ANSP-MOTOR Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE



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

PASS DATE

Class 3 Moto. Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

16 Jan 2003

FOR CACUSE ONLY

NP 4284



