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	26/06/2019 12:48
Date Of Accident	26/06/2019 09:00
Exact Location Of Accident	TAMPINES STREET 11 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGT8642G
Insured/Policyholder	
Name Of Registered Owner	SIDEK BIN MOHAMED ALI
NRIC No	S1446278C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96171124
Alternative Phone No	OFFICE-60000000
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00619665
Cover Note Number	
Driver	

Name of Driver MUHAMMAD ZAKIR BIN SIDEK

NRIC No S9124732A

Date Of Birth 22/07/1991

Occupation OUTDOOR

Date Of Driving Pass 12/11/2012

Driving Experience 6 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84822120

Fax Number
Contact Number

EMail Address NOEMAIL

Address 830 HOUGANG CENTRAL #02-520

Postcode 530830

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

2

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

Number of Passengers (Including Driver)

0

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

Report please 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 video captured by Car Camera

...

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJP238D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TANG KAH HEE

NRIC/Passport Number S0010327F

Contact Number 94651844

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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Sketch Plan

SKETCH PLAN

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 interested parties.
- 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) 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's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

571318 9E

Sketch Plan #2

SKETCH PLAN	
Open space Carpark o	(A) SCT 86426;
Tan prines st !!	B ST 238P
A — stationom	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
On 26-06-2019 at about	09:00 hrs, I parked mo
rehicle at open space Canpark of	impines of 11. When I come
back to my reliable, I saw freres,	a damaged on my front
bumper. Then a lady by a name	
approached me and told that s	re accidentally hit outo
my vehicle for relicle number is s	JP 238P.
DECLARATION I/We declare the foregoing particulars are true in every respect.	
hope (hi	
Policyholder's Signature Date & Time: Date & Time: Date & Time: Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: 57/318096

GIARMC SketchPlanForm_V3

Driving License





Insurance Cert



Contact us at

Hotline: (65) 6532 2888 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

MT/00619665 Certificate No.

Car Comprehensive (Value Plan) Type of Coverage / Driver Plan

SGT8642G 1) Vehicle Registration No.

MR053ZEC107143778 Chassis No.

2) Name of Policy Holder Mohammed Ali, Sidek Bin

3) Effective Date / Time of Commencement

25/04/2019 00:00 of Insurance for the Purpose of the Act

4) Date/Time of Expiry of Insurance 24/04/2020 23:59

5) Persons or Classes of Persons Entitled to Drive

Any person who is named on the policy who is driving on the Policyholder's permission.

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Market Value Sum Insured S\$ 800.00 (before any applicable GST) Own Damage Excess S\$ 100.00 (before any applicable GST) Windscreen Excess DirectAsia approved workshops Choice of workshop Finance company / Hire Purchase Mohammed Ali, Sidek Bin Main driver Named Driver Ref Sidek, Nur Zakiah Binte Named driver (1) Sidek, Muhammad Zakir Bin Named driver (2)

Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.













