

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 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.
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	15/07/2019 15:07
Date Of Accident	12/07/2019 22:00
Exact Location Of Accident	JALAN BOON LAY EXIT (AYE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML6651P
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Insured/Policyholder

Name Of Registered Owner	HAMEED SULTHAN NIJAM MOHIDEEN
NRIC No	S7863867B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94247730
Alternative Phone No	Office-94247730

Vehicle Particulars

Manufacturer	TOYOTA
Model	SIENTA-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900102440
Cover Note Number	

Driver

Name of Driver	HAMEED SULTHAN NIJAM MOHIDEEN
NRIC No	S7863867B
Date Of Birth	11/05/1978
Occupation	INDOOR
Date Of Driving Pass	06/10/2009
Driving Experience	9 YEARS AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-94247730
Fax Number	
Contact Number	OFFICE-94247730
E-Mail Address	NOEMAIL
Address	BLK 633 JURONG WEST ST 65 #11-304
Postcode	640633
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	SIDE SWIPE
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?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG DIVISION HQ
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 18007910000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM8972G
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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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:
 - (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: 11.30

Driver's Signature

(If driver is not the policyholder)

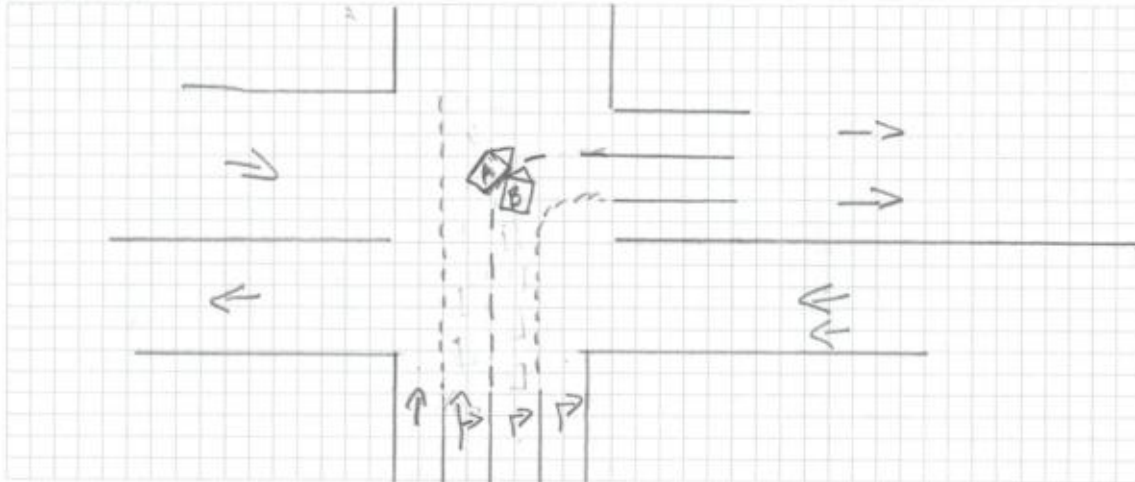
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WAS EXITING JALAN BOON LAY EXIT (AYE) ON FRIDAY, 12 JULY 2019 AT
 AROUND 10 P.M. JUST AT THE EXITING POINT, THERE'S A TRAFFIC
 LIGHT, WHICH I STOPPED, AND PROCEEDED WHEN THE LIGHT
 TURNED GREEN. I WAS TURNING RIGHT, KEEPING TO MY LANE,
 WHEN, ANOTHER CAR, # SLM 8972 G, STEERED TOWARDS HIS LEFT,
 INTO MY LANE, AND HIT ME FROM MY RIGHT. BECAUSE
 OF THE IMPACT, MY FRONT RIGHT FENDER HAS SCRATCHES AND
 DENTS, TOGETHER WITH MY DRIVER'S DOOR, WHICH ALSO HAS
 SCRATCHES AND DENTS. EVERYTIME I OPEN THE DRIVER'S DOOR,
 THERE'S A KNOCKING SOUND. FROM THE ACCIDENT, MY SIDE
 MIRROR WAS TITLED TO THE OPPOSITE DIRECTION, WHICH
 I TITLED BACK USING MY HANDS. IT HAS SOME SCRATCHES.

DECLARATION

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

H. NISAM

Policyholder's Signature

Date & Time: 11.30 PM
15/7/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



COVER NOTE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder	: HAMEED SULTHAN NIJAM MOHIDEEN	Vehicle No.	:
Period of Insurance	: 24 May 2019 to 23 May 2021	Cover Note No.	: 1900102440
Engine No.	: 2NRX438424	Endorsement No.	:
Chassis No.	: MHFZ28H3300063029	Issued Date	: 24 May 2019

ABOUT THE COVER

Make/Model	: TOYOTA SIENTA 1.5	Sum Insured	: Market Value	First Year of Registration	: 2019
Engine Capacity/Tonnage	: 1,496.00 CC	Off Peak Car	: No	Insuring with COE/PARF	: Yes
Driver Restriction	: NA				

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.

Loss of Use 1500cc - 1500cc

* 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 - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

HAMEED SULTHAN NIJAM MOHIDEEN - \$600 (Own Damage)

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

1. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

2. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6220. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.
We hereby certify that this Cover Note 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). For Corporate Policies, this Cover Note is valid for 60 days from the commencement date of the period of insurance.

0504667222

INCHCAPE AUTO TOYOTA - B8TL042

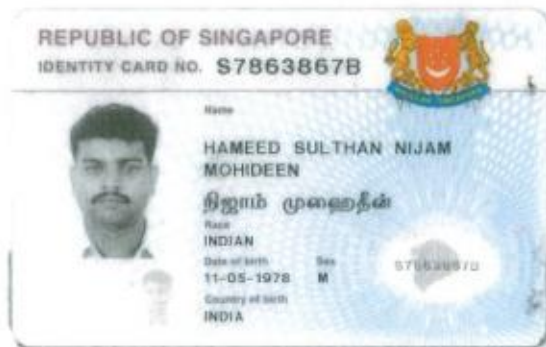
33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE *Siew Yee Chua*





POLICE REPORT (NP299)

Report No. J/20190712/7037

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 12/07/2019 23:11	Vide Report No.	Station Diary No.		
Name Of Informant HAMEED SULTHAN NIJAM MOHIDEEN	Address APT BLK 633 JURONG WEST STREET 65 #11-304 SINGAPORE 640633			
ID Type / ID No. NRIC NO / S7863867B	Contact No. Home/Office:	Mobile: 94247730		
Nationality INDIAN	Email Address nijam.sahi@gmail.com			
Occupation business	Sex Male	Age 41	Date of Birth 11/05/1978	Race Indian
Institution/School Name	Language English			
Date/Time Of Incident 12/07/2019 22:00 - 12/07/2019 22:00	Location Of Incident JALAN BOON LAY			

Brief details.

While I am driving during the turning at Jln Boon Lay exist on line 3, the car number SLM8972G next to me hit my car SML6651P and dont give any of his IC details or contact details. He was on hurry to drop his passenger. He just took picture of my car and his car and run away from the place. I would like to lodge the complain against him .

Subjects Involved	
Victim	
Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. Date/Time: 12/07/2019 23:11 Classification Of Case:
Not applicable	
Signature Of Interpreter: Not applicable	
Officer In-Charge Of Case:	

Authentication Stamp



**SINGAPORE
POLICE FORCE**



J/20190712/7037

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20190712/7037

Person Name	HAMEED SULTHAN NIJAM MOHIDEEN		
ID Type	NRIC NO	ID No	S7863867B
Gender	Male	Age	41
Race	Indian	Language	English
Occupation	business	Address Type	
Address	APT BLK 633 JURONG WEST STREET 65 #11-304 SINGAPORE 640633		Mobile No 94247730
Is Informant A Victim?	Yes		
Person Name	HAMEED SULTHAN NIJAM MOHIDEEN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/07/2019 23:11
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

