

NATIONAL Assessment Centre Services		Date & Time Completed		Done by
Date In: 05/08/2019	12/40	Job description		
Ref No: N88/0161901364/y		SAS e-filing		
Veh No: SJT 4350 P		E-mail (w/don Mhrs, AIG 2hrs)		
D.O.A: 06/08/2019	17:00	I-Motor Claim Form		
OD (TP) Reporting Only		I-Motor W/O (Withn: OD 2hrs, TP 4hrs)		
		I-Photo Uploaded		
		Assessment/Survey Report		
TP Insurer:		Ass't Report by Fax / Hand to Owner/Whsp		

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	05/08/2019 12:40
Date Of Accident	01/08/2019 17:00
Exact Location Of Accident	PIE TOWARDS CHANGI BEFORE CTE/SLE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT4350P
Insured/Policyholder	
Name Of Registered Owner	MKM CAR LEASING PTE LTD
Co Reg No	201224734R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90117676
Alternative Phone No	OFFICE-90117676
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VIOS
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994421
Cover Note Number	
Driver	
Name of Driver	LIM AIHONG, KAREN
NRIC No	S9030743F
Date Of Birth	12/08/1990
Occupation	OUTDOOR
Date Of Driving Pass	09/11/2009
Driving Experience	9 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90117676
Fax Number	
Contact Number	OTHERS-90117676
EMail Address	NOEMAIL

Address BLK 108 JALAN RAJAH
#04-126
Postcode 320108
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - HIRER
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? 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) 3
Passenger 1 NAME: : PASSENGER
GENDER: : FEMALE
Passenger 2 NAME: : PASSENGER
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

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 audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBK1782M
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver MUHAMMAD SYAFIQ BIN MOHD SHIRALI
NRIC/Passport Number
Contact Number
Address
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

IMPORTANT NOTICE

- I understand, acknowledge, agree and consent that:

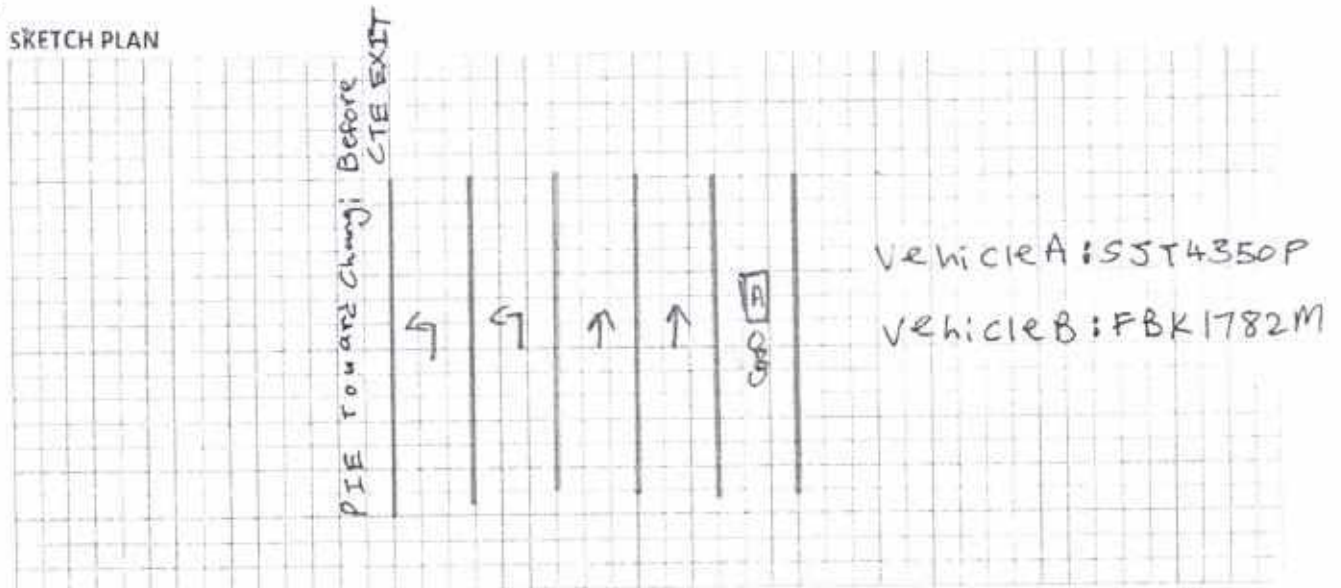
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.



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

Reporting Centre Personnel's Signature
Name: Rosa
NRIC/FIN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated Date and time I vehicle A was travelling
on my stated lane front car start to slow Down and
stop as I follow suit and I felt an impact from my
rear as I aight I realise vehicle B have collide on
my rear bumper that is all

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Person's Signature
Name:
NRIC/FIN No.:

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 01/08/2018 (dd/mm/yy) Time of Accident: 17:00 (24-HR-FORMAT)

Vehicle No.: SJT4350P Vehicle Make & Model: Toyota Vios

Exact location of Accident: PTE toward Changi before CTE SLE Exit

Policyholder's Name / IC No.: MKM Car Leasing Pte Ltd 201224734R

Driver's Name / IC No.: S9030743F Lim Ai Hong Karen (As Above) ☐

Driver's Contact No.: 90117676 Company Contact No.: _____

Driver's Address: Blk 108 Jalan Raya #04-126

Insurance Company: AIG Email address (if any): _____

Relationship between Owner & Driver:

Owner / Spouse / Children / Friend / Partner or Others specify: _____

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

☐ Private use / ☒ Work purpose

Occupation (nature of job): ☐ Indoor / ☒ Outdoor

No. of Passengers (Including Driver): 3

Passenger Name: mob passage

Gender: Female

Passenger Name: mob passage

Gender: Female

Weather condition & Road conditions* (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No.: Muhammad Syafiq Bin Mohd Shirali Vehicle No.: FBK 1782M

Driver's Contact No.: _____ Insurance Company (If any): _____

2. Driver's Name / IC No.: _____ Vehicle No.: _____

Driver's Contact No.: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No.: _____

Preferred Workshop Name: _____ Contact No.: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

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

PASS DATE

Class 5 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg 09 Nov 2009

For LKK/NAC Use Only



Licence No. S9030743F



NRIC No. S9030743F



For LKK/NAC Use Only

Date of issue
26-06-2009

Address

APT BLK 108 JALAN RAJAH
#04-126
SINGAPORE 320108

REPUBLIC OF SINGAPORE DRIVING LICENSE

License Number S9030743F

Name

LIM AIHONG, KAREN

For LKK/NAC Use Only

Birth Date 12 Aug 1990

Issue Date 09 Nov 2009



001802537C

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9030743F



For LKK/NAC Use Only

LIM AIHONG, KAREN

林愛鴻

Race

CHINESE

Date of birth

12-08-1990

Country of birth

SINGAPORE

Sex

F



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	18/07/2018

For LKK/NAC Use Only



Land Transport Authority



VOCATIONAL LICENCE

Licence No : S8030743F

Name : LIM AIHONG, KAREN

For LKK/NAC Use Only

Please visit www.lta.gov.sg to check the status of this vocational licence



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1968
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

Comprehensive Commercial Auto Plan
CERTIFICATE NO. SJT4350P
POLICY NO. 999994421

SUM INSURED Market Value
INSURING WITH COE/PARE Yes

1) VEHICLE REGISTRATION NO.

SJT4350P

2) NAME OF POLICYHOLDER

MKM CAR LEASING PTE LTD

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE
FOR THE PURPOSES OF THE ACT

17 August 2018

4) DATE OF EXPIRY OF INSURANCE

16 August 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.
Authorised Drivers must be age 22 to 65 years old with at least 2 years Driving Experience
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing; 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle; 3) Use for any purpose in connection with the Motor Trade

LOSS OF USE Not Applicable

HIRE PURCHASE COMPANY DBS BANK LTD

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

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 17 Aug 2018

AIG Asia Pacific Insurance Pte. Ltd.

0504650-000
All Ins Agency Pte Ltd
22 Sin Ming Lane
#05-78 Midview City
Singapore 573969

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPIUS