MAII19156318 / Auto Insure Pte Ltd - HQ ENTRY DATE & TIME: 26/11/2019 16:56 SUBMITTED BY: Ngiaw Jie Ling

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 27/11/2019 11:41

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 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

foresaid.		
	ACCIDENT STATEMENT	
Date Of Report	26/11/2019 16:56	
Date Of Accident	15/11/2019 09:15	
Exact Location Of Accident	ALONG KPE TOWARD TAMPINES	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMG6015C	
Insured/Policyholder		
Name Of Registered Owner	BIS MOTORING PTE LTD	
Co Reg No	201735055D	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	Office-31572626	
Vehicle Particulars		
Manufacturer	RENAULT	
Model	GRAND SCENIC IV 1.5 DCI AT EU6	
Exact Purpose for which vehicle was being used at time of accident		
Are you claiming under your own insurance policy for repair to your vehicle?	NO	
f No, Please state action to be taken	REPORTING ONLY	
Vehicle Category	PRIVATE HIRE	
Insurance Company		
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	YES	
Policy Number	999994322	
Cover Note Number		
Driver		
Name of Driver	SHARIN ARI BIN HANAFI	
NRIC No	S9106195C	
Date Of Birth	18/02/1991	

OUTDOOR

04/11/2003

16 YEARS AND 0 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-96826300

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 513D YISHUN ST 51 #08-331

Postcode 764513

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?

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : NA

> Gender: : Male

NO

2

NO

NO

NO

2

NO

NO

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

WE UNABLE TO LOCATE OUR DRIVER AND DO NOT KNOW HOW THE ACCIDENT OCCURRED . WE ONLY RECEIVED EMAIL FROM OUR INSURER TO LODGE AN ACCIDENT REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHD9842L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI Name of Driver NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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- 7. 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)
 - (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")
- 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

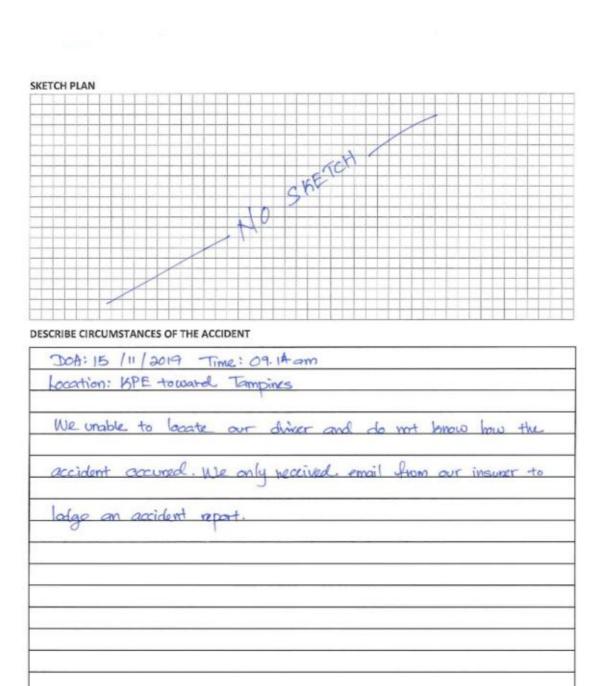
(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

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

Reporting Centre Personnel's Signature Name

NRIC/FIN No.:



DEC	1 A	RA'	TION

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

Policynotder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GIARMC StetchPlanForm_v3



Accident Sketch Plan



Accident Sketch Plan



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1967 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

(The below excess is subject to GST)

COMMERCIAL MOTOR POLICY EXCESS S\$1500.00 (Sect I & Sect II) COMPREHENSIVE

CERTIFICATE NO. SMG6015C WINDSCREEN EXCESS \$\$100.00 999994322 POLICY NO

SUM INSURED Market Value INSURING WITH COE/PARF YES

1) VEHICLE REGISTRATION NO. SMG6015C

2) NAME OF INSURED BIS MOTORING PTE LTD

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

26 December 2018 4) DATE OF EXPIRY OF INSURANCE 25 December 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their pern

Authorised driver must be between age 25 to 65 with at least 2 years driving experience. Acodent requir can be carried out at Munich Auto Care in the condition that all repairs have to be surveyed, appointed by AIG surveyors before proceeding with requir

Provided that the person driving is permitted in accordance with the Scensing 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
- Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
 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-lessing. 2) Use whilst drawing a trailer excibe lowing (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 Included

HIRE PURCHASE COMPANY RHB BANK BERHAD

**Umitations rendered inoperative by Section 6 of the Motor Veh/cles (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 N of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 27 Dec 2018

500656-000 Cowell Insurance (Agency) Pte. Ltd. 8 Burn Road #09-09 Trivex Singapore 369977

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC





Accident Photo





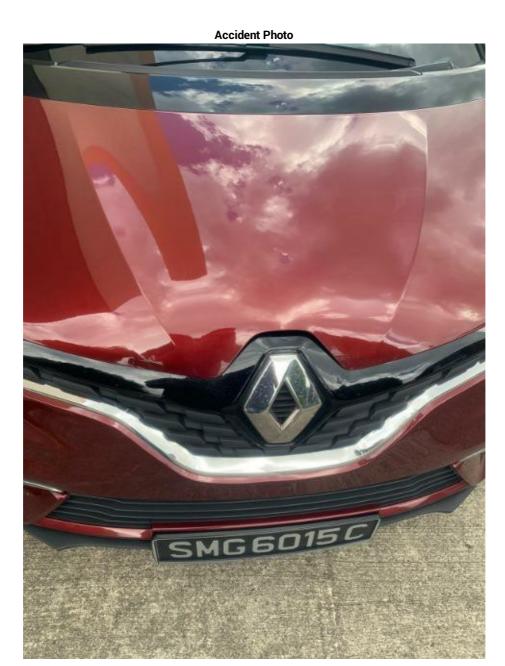
Accident Photo





Accident Photo





Accident Photo

