

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	21/05/2020 17:30
Date Of Accident	21/05/2020 16:00
Exact Location Of Accident	ALONG WOODLANDS ST 81 INFRONT OF BLK 870
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ929P
Insured/Policyholder	
Name Of Registered Owner	NAVENDREN S/O KANAKALINGAM
NRIC No	SXXXX195Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81384241
Alternative Phone No	OFFICE-81384241

Vehicle Particulars

Manufacturer	KIA
Model	CERATO-1.6 EX (A)
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
If No, Please state action to be taken	REPORTING ONLY
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	1900018208
Cover Note Number	

Driver

Name of Driver	NAVENDREN S/O KANAKALINGAM
NRIC No	SXXXX195Z
Date Of Birth	28/02/1989
Occupation	INDOOR
Date Of Driving Pass	04/10/2007
Driving Experience	12 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81384241
Fax Number	
Contact Number	OFFICE-81384241
Email Address	NOEMAIL

Address	224B SUMANG LANE #14-121
Postcode	822224
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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)	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

ON 21/05/2020 AT ABOUT 1600 HRS, I WAS TRAVELLING ALONG WOODLANDS ST 81 JUST OUTSIDE BLK 870 JUST AS I FINISHED DOING A RIGHT TURN. A VEHICLE IN FRONT OF THE TAXI SHD6505E JAMMED BRAKE, THE TAXI FOLLOW SUIT AND BRAKE, I COULDN'T BRAKE ON TIME AND COLLIDED ONTO VEHICLE B (SHD6505E). I WISH TO STATE THAT THE DAMAGE TO MY CAR. AND THE DRIVER OF THE TAXI WAS WALKING ABOUT FINE. NO INJURIES.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE IS TOO LARGE
Was there any audio recorded?	NO

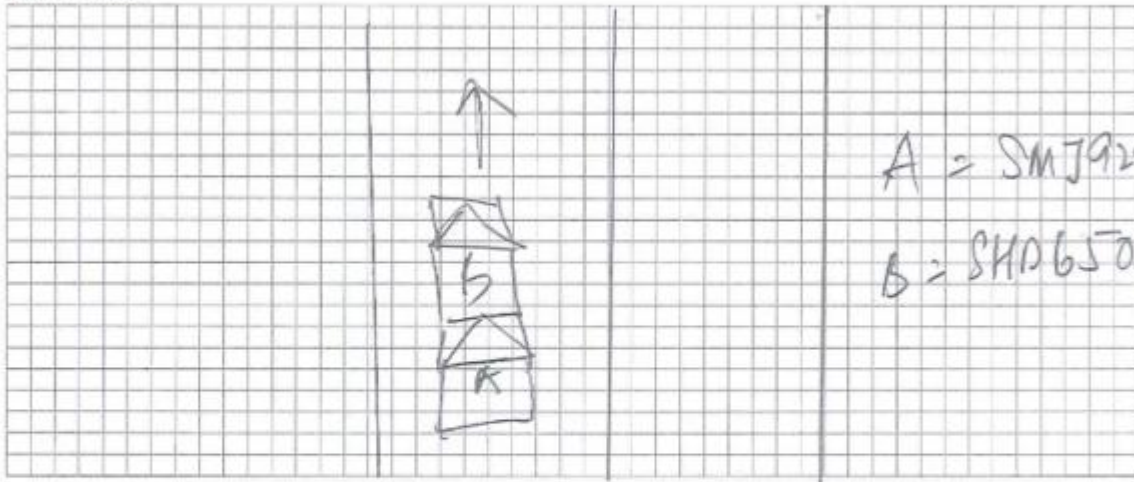
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD6505E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MOHAMAD LUCIAN BIN MAIDIN
NRIC/Passport Number	SXXXX875F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 21/05/2020 AT ABOUT 16:00 HRS, I WAS TRAVELLING ALONG WOODLANDS ST 81 JUST OUTSIDE BLK 870. JUST AS I FINISHED DOING A RIGHT TURN, A VEHICLE IN FRONT OF THE TAXI SHD6505E JAMMED BRAKE. THE TAXI FOLLOW SUIT AND BRAKE, I COULDN'T BRAKE ON TIME AND COLLIDED WITH VEHICLE B (SHD6505E). I WISH TO STATE THAT THE DAMAGE TO THE TAXI WAS VERY MINOR AND THERE WAS NO DAMAGE TO MY CAR AND THE DRIVER OF THE TAXI WAS WALKING ABOUT FINE. NO INJURIES.

DECLARATION

I/We declare the 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 Personnel's Signature

Name:

NRIC/FIN No.:


SKETCH PLAN

IMPORTANT NOTICE

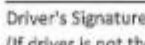
1. Please report correctly the details of the accident to speed up the claims process.
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8. **Consent under the Personal Data Protection Act (PDPA)**

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:



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



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

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Navendren S/O Kanakalingam
 Period of Insurance : 22 Feb 2019 To 21 Feb 2021
 Engine No. : G4FGJH720480
 Chassis No. : KNAF3416MK5030684

Vehicle No. : SMJ929P
 Policy No. : 1900018208
 Endorsement No. :
 Issued Date : 05 Mar 2019

ABOUT THE COVER

Make/Model : KIA Cerato

Engine Capacity/Tonnage : 1,591.00 CC

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 - 1600cc

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 180) 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 - \$500 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Navendren S/O Kanakalingam - \$500 (Own Damage)

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

1.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 800 Sin Ming Ave Singapore 575733 69328000

2.Cycle & Carriage Body & Paint Centre Add: 209 Panchor Gardens Singapore 609339 65984501

3.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800

4.Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. 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: Standard Chartered Bank (Singapore) Limited

(We 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).)

0504624050

FULCOKICP2 - CORPORATE

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. J. J. J.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

SSCASH

REPUBLIC OF SINGAPORE DRIVING LICENCE

License No: S8907195Z

Name: NAVENDREN S/O KANAKALINGAM

DOB Date: 26 Feb 1989

Issue Date: 04 Oct 2007

001S34454J



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8907195Z



Name: NAVENDREN S/O KANAKALINGAM

க நவீந்திரன்

Race: INDIAN

Date of birth: 26-02-1989

Country/Place of birth: SINGAPORE

Sex: M

S8907195Z




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

PASS DATE

Class 2 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2000kg 04 Oct 2007

NP 426A

License No: S8907195Z



NRIC No. S8907195Z



Date of issue: 07-09-2019

Address: APT BLK 224B SUMANG LANE #14-121 SINGAPORE 622224

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

