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.

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	ACCIDENT STATEMENT
Date Of Report	10/06/2020 12:28
Date Of Accident	09/06/2020 16:50
Exact Location Of Accident	MINOR ROAD OF AMK AVE 8 BESIDE ESSO PETROL STATION
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMC7098C
Insured/Policyholder	
Name Of Registered Owner	SHARM ABIRAM RANJAN
NRIC No	SXXXX982F
Email Address	SHARMNAIDU85@YAHOO.COM
Mobile Phone No	(LOCAL) +65-92281178
Alternative Phone No	OTHERS-92281178
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC-1.5 TURBO VTI-S SR (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL 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	
Cover Note Number	
Dulivan	

Driver

Name of Driver SHARM ABIRAM RANJAN

NRIC No SXXXX982F
Date Of Birth 19/01/1985
Occupation OUTDOOR
Date Of Driving Pass 17/03/2007

Driving Experience 13 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92281178

Fax Number

Contact Number OTHERS-92281178

EMail Address SHARMNAIDU85@YAHOO.COM

APT BLK 333 ANG MO KIO AVENUE 1 #08-1931 Address

Postcode

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 - CHANGE/CROSS LANE**

Weather Conditions **CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

2

NO Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

NO

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera?

Was there any audio recorded?

YES NO

Vehicle Registration Number

SLQ1873J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

DETAILS OF OTHER VEHICLE PROPERTY 1

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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- 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)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/arg permitted to collect, use, disclose anti/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" i, 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 daims and any necessary investigations relating to the claims;
 - (iii) investigating the accident and/or my dalms;
 - hill carrying out and/or dealing with my instructions or responding to any enquiries by mo;
 - (iv) esiministering my claims (including the mailing of correspondence, statements, invoices, reports of 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 administening, 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' invoyers/law firms, may/are pormitted to collect, use. (Isolose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information mety/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law lirms), 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 complic daims history for the purpose of froud detection, investigation and management in present and all foture daims.
- (n) 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 Vgrature Date & Time

Orient's Signature (If cities is not the policyholder)

Date & Time:

Reporting Centry Personnel's Signature

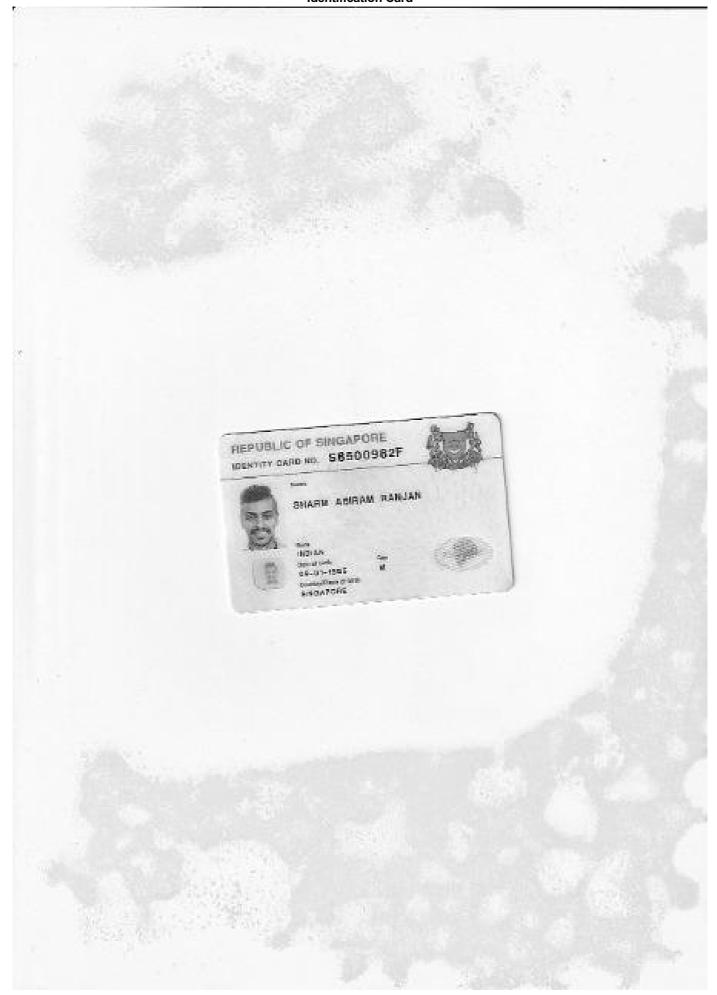
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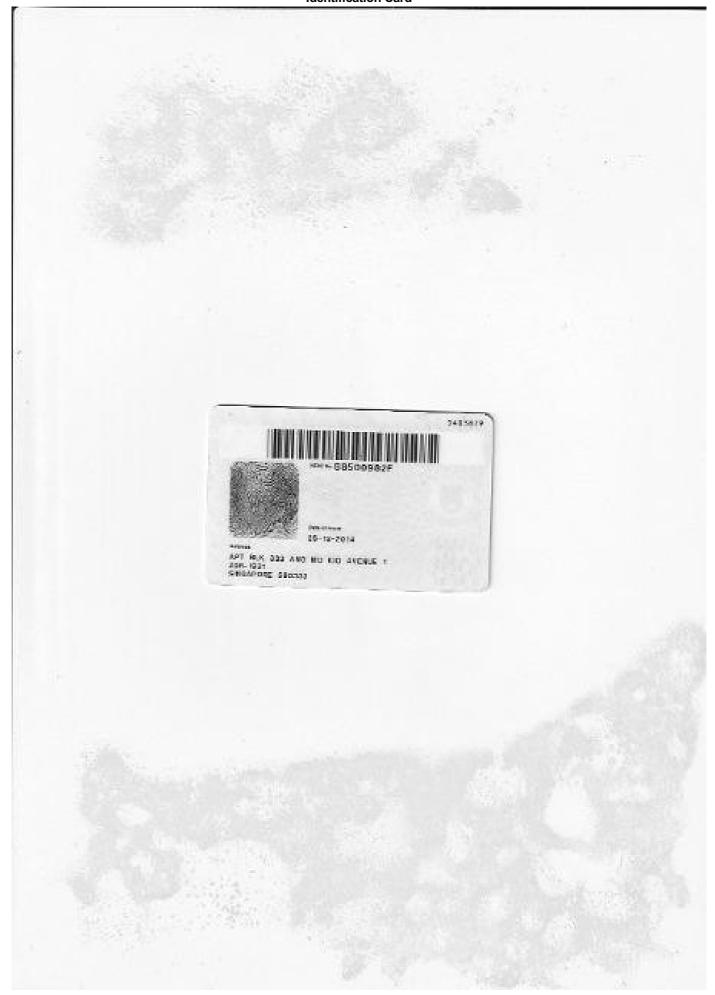
SKETCH PLAN A: SMC 7098C 4-P 50 B. SLO 1873] Me AMK Eso peron station DESCRIBE CIRCUMSTANCES OF THE ACCIDENT minor road AMK Station to main road IMpact. Veh "B" esso. Came FNO trom Christo More DEMON my damage. A DECLARATION I/We declare the foregoing particulars are true in every (gapect. Palecyholder's Signature Onver's Signature (If driver is not the policyholder) Hepoting Centre Personnel's Signature Name: (1)00 0/017 001 .

Date & Time:

Date & Time:

NRIC/FIN No.:











Contact us at

Hoteino (65) 8532 XMM E-mail: CustumerService@Direct/falsycom

CERTIFICATE OF INSURANCE

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

This document forms part of year 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 arrended or updated

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

1) Vehicle Roeistration No. 5 SMC2008C

Chassis No. MRHFC1660GT000364

2) Name of Policy Holder Banjan, Shaon

Effective Oate / Time of Commencement of Insurance for the Purpose of the Act

: 10/08/1019 00:00

4) Date/Time of Expiry of Incurance 09/08/2020 23/99

5) Persons or Classes of Persons Estitled to Drive

(a) Any named person under the policy who is driving on the Folicyholder's permission-

(b) Arm authorised person, provided such person is aged 30 and above and holds a valid driving license of 2 years unmore, 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 suspendion or disqualification from driving,

5) Limitations as to use

Use only for private purposes, in accordance with the decianed car usage stated on your Policy Schodule. The policy noes not cover use for him or roward, nation, driving test, racing, pace-making, reliability trials, speed tests. The carriage of goods for payment or for any purpose in connection with the motor trace business. Private car pooling arrangements where you commute with passengers and split the first expense is covered under the classifier uniform. Grab lifted will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are parmitted a day. Other forms of commercial car-pooling or any rate hailing services (e.g. Grets, Gu-lek etc.) are not ditioned

"um tations readered incorrective by Section 8 of the Aut and Section 95 of the Road Transport Act. 1987 (Noticesto). are not to be included under this heading.

Sum Insured

Own Damage Excess 34 sun up (neture any applicable GST) S& 100,00 (before any applicable GST). Windsheen French Choice of workshop percussia approved workshops

Finance company / Hire Purchase

Main driver Rentan, Sharm

None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

ty We haveby cartify that the Policy to which this Contilicate relates is issued in apportance with the provisions of the Motor Vehicles (Third-Party Roles and Compensation) Act (Chapter 389) and the Role Transport Act, 1987 (Motoysia).

inweed one 011017/2019 Direct Asia Insurance (Singapore) Pte. Ltd. Cham

Edip Own (Chief Underwriting Officer)

Direct Asia Insurance (Singapore) Ptc Utl 26 Assoc Boart 208-01 Twenty Assoc Singapore 0/9912 www.Direct/sic.com







