SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	29/06/2020 18:07
Date Of Accident	26/06/2020 16:35
Exact Location Of Accident	TAMPINES MALL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKQ5708P
Insured/Policyholder	
Name Of Registered Owner	GONDHALEKAR YOGESH VIJAY
NRIC No	S7064362F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92959279
Alternative Phone No	Office-92959279
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E200
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	1800038568-02
Cover Note Number	
Driver	
Name of Driver	GONDHALEKAR YOGESH VIJAY
NRIC No	S7064362F
Date Of Birth	13/07/1970

INDOOR

07/06/2005

15 YEARS AND 0 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-92959279

Fax Number

Contact Number OFFICE-92959279

EMail Address NOEMAIL

Address 760 BEDOK RESERVOIR RD #04-01

Postcode 479245 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**

2

NO

NO

YES

NO

2

NO

NO

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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: : UNKNOWN

> Gender: : Female

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

REFER TO ATTACHED.

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

SLU9666S Vehicle Registration Number

TOYOTA WHITE Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number Contact Number

90091816

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- The 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.
- 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 shell be collectively referred to as the "insurers"), the insurers "awyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - 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 peckages); and/or
 - (v) complying with applicable lew 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 end the insurers' lawyers/law firms, may/are permitted to collect, use, disclose end/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 fawyers/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 29 6 2020

5-00 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time 29 6 2520

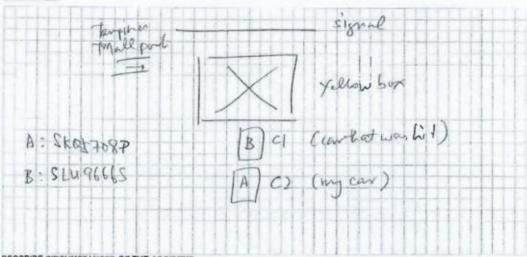
5.00 pm

Reporting Centre Personnel's

Name:

TONY LAM HP: 9247 0676 DID: 6740 3812

Ms



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As mentioned, the can in front suddenly stopped due to redlight and xellow box.

Allhough we were very slow, the car touched a commin-the front. It dislodge the back cover mydguard -

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Falling to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature

Date & Time 17 6 2010

Jph

Driver's Signature

(If driver is not the policyholder)
Date & Time 29 (12620

5 pm

Reporting Centre Personnel's

Name:

HP: 9247 0676

DID: 8740 2812



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Gondhalekar Yogesh Vijay Period of Insurance : 10 Jun 2020 To 09 Jun 2021 Engine No. : 27492030291385

Chassis No. : WDD2120342B086669

: SKQ5708P Vehicle No. : 1800038568-02 Policy No.

Endorsement No.

Issued Date : 08 May 2020

ABOUT THE COVER

: MERCEDES E200

Engine Capacity/Tonnage : 1,998.00 CC Sum Insured : Market Value First Year of Registration : 2014 Driver Restriction Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Polityheliter
b) Any other person who is deveng on the Policyheliter's order or with higher permission.
This Policy will internally the Policyheliter or any authorised driver only it wishles exists the specified age condition.

You have to pay an additional sum of \$3,000 as "Young ancifor 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 to eachst, denissible and pleasure purposes and for the Policyholde's business. This Policy does not cover use for hite or reward, driving failure, driving less, racking, pace making, refability intail or speed-lessing, the cartage 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 Optional

* Unitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Companisation) Act (Cop. 180), Section 95 of the Road Transport Act, 1967 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Gondhaleitar Yogesh Vijay - \$800 (Own Damage), \$800 (Flood Cover)

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

Approved Reporting Centrest AIG Authorised Repairers (For claims related repairs).

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle is Singapore. You have the option of having the accident repairs carried out at the Dole Agent's workshop.

For other Apotened Reporting CentrestAid Authorised Repairers, stease confact our 24-hour accident emergency hotims at +45 8338 8200. Alternatively, You may refer to AIG website www.atg.sq.cr

AIG 8G Mobile Age. Simply search and download "AIG 8G" then ITunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: SING INVESTMENTS & FINANCE LTD

ITWe barruly certify that the policy to writin this Certificate of Innurance rolates is insured in accordance with the provisions of the Mylor Vehicles(Theri Party Risks and Compensation) Act (Cap. 189), Part IV of a 189 (Malaysia), Pond Transport (Amendment) Act 2019 and Molor Vehicles (Theri Party Risks 164cs, 1650 (Malaysia),

0500656000

COWELL INSURANCE (AGENCY) PL

8 BURN ROAD #09-09 TRIVEX SINGAPORE 369977 ANSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

78 Shariton Way 909-16 AIQ Bullang \$979120 (T +65 5419 00













