

## 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	07/07/2020 17:03
Date Of Accident	28/06/2020 13:00
Exact Location Of Accident	ANG MO KIO AVE 5
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJK2564A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RUSNANI BTE AYUB
NRIC No	S2181289G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87829437
Alternative Phone No	Office-87829437

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS-1.5 (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	1900163205
Cover Note Number	

### Driver

Name of Driver	ASH SHAHID BIN MOHAMED IQUBAL
NRIC No	S9346173H
Date Of Birth	06/12/1993
Occupation	INDOOR
Date Of Driving Pass	20/06/2018
Driving Experience	2 YEARS AND 0 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-87829437
Fax Number	
Contact Number	
EMail Address	ASH_SHAHD@HOTMAIL.SG
Address	BLK457 YISHUN ST 41 #09-85
Postcode	760457
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	
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

REFER TO REPORT 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

Vehicle Registration Number	SMS3899A
Vehicle Make/Model/Colour	HONDA ODESSY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address

Postcode

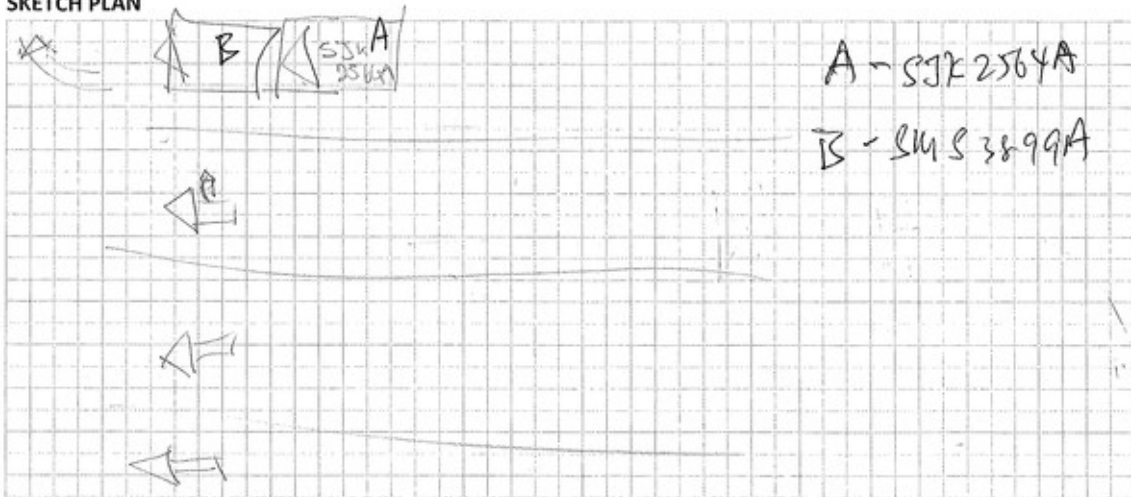
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I was not feeling well and wanted to park the car after the traffic light. While was waiting the car traffic light to go green. I inch forward and hit the front car

We wanted to settle privately. Next few days I receive a call from my insurance that he claim with insurance. ~~Ins~~ they ask me to make a report.

## 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 Name: \_\_\_\_\_  
 NRIC/FIN No.: \_\_\_\_\_

## SKETCH PLAN

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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.:



# CERTIFICATE OF INSURANCE

## AUTOVALUE PRIVATE VEHICLE

Name of Policyholder : RUSNANI BTE AYUB  
 Period of Insurance : 29 Oct 2019 To 28 Oct 2020  
 Engine No. : 1NZX812138  
 Chassis No. : MR053HY9305083617

Vehicle No. : SJK2564A  
 Policy No. : 1900163205  
 Endorsement No. :  
 Issued Date : 08 Oct 2019

### ABOUT THE COVER

Make/Model : TOYOTA VIOS 1.5  
 Engine Capacity/Tonnage : 1,496.00 CC  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2008  
 Insuring with COE/PAF : Yes

Person or Classes of Persons Entitled to Drive\* :  
 Any person other than the Policyholder who is driving on the Policyholder's order or with his/her permission.  
 This Policy will indemnify any authorised driver other than the Policyholder only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and Inexperienced Driver Excess" if you are or your authorised driver (named or unnamed) is under the age of 21 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.

\* Conditions rendered inoperative by Sections 6 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Section 96 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 are not to be included under these headings.

### EXCESS

Section 1  
 Fire : \$0 (Own Damage) : \$600 (Theft) : \$0 (Flood Cover) : \$900

Section 2  
 Property Damage : \$0

Windscreen : \$100

#### Named Driver and Excess (where applicable)

MEHAMED ISA BIN MOHAMED YASIN : \$600 (Own Damage) : \$600 (Flood Cover) : ASH SHAHID BIN MOHAMED KUBIAL : \$600 (Own Damage) : \$600 (Flood Cover)

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers.  
 For other Approved Reporting Centres/Authorised Repairers, please visit our 24-hour accident emergency helpline at +65-6332-4297. Alternatively, you may refer to AIG Asia's website (aig.com.sg) or AIG SG Mobile App. Simply search and download AIG's App from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: GV Credit Pte Ltd

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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504295006

RUSUR LINK PTE LTD

2 KALLANG AVE #09-16 CT HUB


SINGAPORE 330407


Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Insurance Link Pte Ltd  
 100 Robinson Road  
 #09-16 CT Hub  
 Singapore 330407  
 Tel: +65 6332 4297

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORIZED REPRESENTATIVE

4332824





**NRIC No. S9346173H**

Date of issue  
**06-01-2009**

**APT BLK 457 YISHUN STREET 41 #09-85**  
**SINGAPORE 760457**

NRIC No.: **S9346173H** Date: **17/03/2020 (R)**

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

		<b>EFFECTIVE DATE</b>
<b>Class 2B</b>	<b>Motorcycles &lt;= 200 CC</b>	<b>17 Oct 2013</b>
<b>Class 3</b>	<b>Motor cars &lt;= 3000 kg with &lt;= 7 passengers, exclusive of the driver; and motor tractors/vehicles &lt;= 2500 kg</b>	<b>20 Jun 2018</b>

**S9346173H**


**S / No. 9000307676**

NP 428A

**Licence No: S9346173H**

Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9346173H



Name  
ASH SHAHID BIN MOHAMED  
IQUBAL  
اش شاحيد بن محمد اقوبل

Race  
MALAY

Date of birth  
06-12-1993

Country of birth  
SINGAPORE

Sex  
M

S9346173H

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number  
S9346173H

Name  
ASH SHAHID BIN MOHAMED  
IQUBAL

Birth Date: 06 Dec 1993

Issue Date: 17 Oct 2013

002235669A



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

