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 <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

	ACCIDENT STATEMENT
Date Of Report	03/07/2020 17:10
Date Of Accident	03/07/2020 14:00
Exact Location Of Accident	224 EAST COAST ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SKZ8066R
Insured/Policyholder	
Name Of Registered Owner	AISHA BEEVE D/O HANIFFA
NRIC No	S1532125C
Email Address	AQRAM87@GMAIL.COM
Mobile Phone No	(LOCAL) +65-85885284
Alternative Phone No	Others-85885284
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI-2.0 PREMIUM (J10) (A)
Exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
/ehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900079142-01
Cover Note Number	
Driver	
Name of Driver	MOHAMED AQRAM BIN MOHAMED
NRIC No	S8729522B
Date Of Birth	05/09/1987

INDOOR

06/12/2011

8 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-85885284

Fax Number

Contact Number

EMail Address AQRAM87@GMAIL.COM

Address APT BLK 650 JALAN TENAGA

#08-18

Postcode 410650
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 COLLIDED INTO PARKED VEHICLE

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?

NO

NO

NO

NO

Was any other material or property damaged? YES

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

collecting/offering accident claims assistance

Number of Passengers (Including Driver) 2

Passenger 1 Name: : ZARRAH KATRINA

Gender: : Female

Details of Police Action

Was the accident reported to the police?

o. ..

If Yes,Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

SEE ATTACHED SKETCH PLAN AND PHOTO

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 SMJ9939B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver NRIC/Passport Number

SHARON

Contact Number

96487148

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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.
- 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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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.
- 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")
- (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
- 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)

7100

Date & Time: 2

Reporting Cent

NRIC/FIN No.:

GIARMC Sketch PlanForm V3

AUTOLUTION INDUSTRIAL PIE LTD

4086

19 UBI MOAD 4 SINGAPORE, 408

A-SKE8	0666
B-5M0993	99B [] [] [] [BD [] []
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT
Diving alone	Fast Goest Road, bionle infunt of me was too
close. Tried to	signed to my right but vehicle was beside me.
so tried to	be at the left side w/o touching the vehicles
parked alon	Foot Goest Road, bicyle infinit of me was too signed to my right but vehicle was beside me, be at the left side w/o torching the vehicles the road.
under minostry	smy 9939B was slighty out of the lot and banded into how side minor.
muz Side mirror	baryen into hur side mimor.
	AUTOLUTION INDUSTRIAL PTE LTO
I/We declare the foregoing parti	
	the MMUL
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time: 3 / 7/20 16:30 Reporting Centre Personnel's Signature Name:
CI39NC ShatchOlanEnem U3	6xxx4824C

GIARMC SketchPlanForm_V3



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : AISHA BEEVE D/O HANIFFA
Period of Insurance : 22 Mar 2020 To 21 Mar 2021
Engine No. : MR20392386W

Chassis No.

: SJNFBAJ11U1565023

Vehicle No.

: SKZ8066R

Policy No.

: 1900079142-01

Endorsement No.

Issued Date

: 11 Feb 2020

ABOUT THE COVER

Make/Model

: NISSAN QASHQAI 2.0 PREMIUM

Engine Capacity/Tonnage: 1,997.00 CC Driver Restriction

: NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2016

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

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 hershe 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 Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 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 - \$600

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

MCHAMED AGRAM BIN MCHAMED MYDIN - \$600 (Own Damage), \$600 (Flood Cover), AISHA BEEVE DIO HANIFFA - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centres/ 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 in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

For other Approved Reporting Centres/AIG Authorised Repairers, please confact our 24-hour accident emergency hotline at +65-6338-6200. Alternatively, You may refer to AIG website www.aig.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: OCBC Bank Ltd

IWe 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, 1989 (Malaysia).

HENLY ENTERPRISES CO PTE LTD.

18 UBI ROAD 4 #02-07 UBI CAR MALL

SINGAPORE 408616

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AKGSGMOBILEAPP

24-HOUR AIG AUTO HOTLINE: +65 6338 6200

IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES.

What can the 24-hour AIG Auto Emergency Hotline provide for you?

- Emergency breakdown service
- Towing service (accident or non-accident related)
- on Motor Claims procedures

What should I do in the event of an accident?

- Keep calm and move your car to a safe pla
- Do not admit or discuss fault or blame with the other party(jes). Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.
- mons/Correspondences from third party(ies) to AIG Submit Writ/Sun

If no one is injured in the accident:

- You are not required to make any police report.

 Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s).
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.

If the accident involves injuries or damage to government property & vehicles, foreign registered vehicles or non-injury hit & run case:

- Report the accident to the police, providing full details of the circumstances of the acc

- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s), if applicable.

 Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.

 Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working

LOSS OF USE CAR REPLACEMENT BENEFIT

Applicable only if this benefit is included in your motor insurance. Please refer to your Policy Schedule for details. Policy terms and conditions apply. Please call our customer service hotline number (65) 6419-3000 for assistance.

The Certificate of Insurance (CI) should be produced without demand when collecting the Rental Car and the Rental Car Company reserves the right to verify the identity of the holder. The CI is the property of AIG and its use is subject to the terms and conditions contained in the Loss of Use Endorsement under the policy issued to the policyholder.

Steps to activate Loss of Use Car Replacement Benefit and Important Information

- 1. To activate your loss of use car replacement, please contact the Rental Car Company (listed below) after filing/reporting your accident claim.
- Your rental car will be made available within 5 working hours of activation with the Rental Car Company.
 At the time of collection of the Rental Car, the original insurance policy and schedule issued by AIG, a copy of the Accident Report from the Authorised Workshop must be produced.
- 4. The number of days is based on the period your vehicle is in the repair workshop unless the number of days of loss of use entitlement is stated in the Policy.
- Rental cars are strictly for use in Singapore only.
- Extension of rental beyond repair period approved by AIG surveyor will be chargeable by the Rental Car Company on per day
- 7. Upgrade of Rental Car is available upon request subject to additional charges by the Rental Car Company.
- 8. The rental car will be delivered (within Singapore), and MUST BE RETURNED BACK TO the Authorised Workshop upon collection of your accident car.

Rental Car Company: BKW Rent A Car Pte. Ltd.

Activation Hotline: 67387777

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208

Operation Hours: Monday to Friday: 9am to 6pm Saturday (Half Day): 9am to 1pm

"The Rental Car Company's Terms & Conditions apply (i.e., refundable security deposit, excess liability for the Rental Car, Collision Damage Walver, etc.)

IMPORTANT NOTICE

If you sell your motor vehicle, this Notice is IMPORTANT and MUST be complied with. Policyholders are hereby warned that under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.99), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

The Policyholder is further warned that on the sale of a motor vehicle, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.88),

This Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agrees to cover the new owner, they will issue a new Certificate of Insurance in the new owner's name. The premium chargeable may vary according to the new owner's profile.













Accident Photo

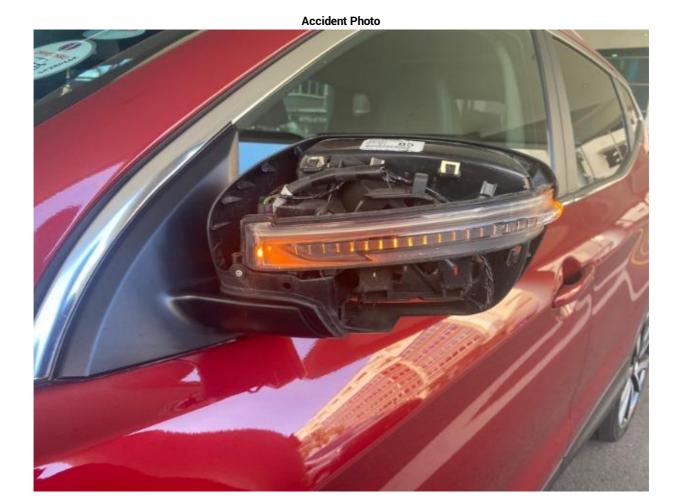


Accident Photo











Accident Photo







