

## 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	08/07/2020 10:39
Date Of Accident	07/07/2020 10:05
Exact Location Of Accident	MARINE DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMH4026D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NUR FAREESHA SHAFEQA BTE ABDUL MALIK
NRIC No	S9118543A
Email Address	FAREESHAMALIK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97902865
Alternative Phone No	Office-97902865

<b>Vehicle Particulars</b>	
Manufacturer	MITSUBISHI
Model	ATTRAGE 1.2 CVT
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

<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900002375
Cover Note Number	22/01/2019-21/01/2021

<b>Driver</b>	
Name of Driver	NUR FAREESHA SHAFEQA BTE ABDUL MALIK
NRIC No	S9118543A
Date Of Birth	03/06/1991
Occupation	OUTDOOR
Date Of Driving Pass	21/03/2011
Driving Experience	9 YEARS AND 3 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-97902865
Fax Number	
Contact Number	OFFICE-97902865
E-Mail Address	FAREESHAMALIK@GMAIL.COM
Address	BLK 412 EUNOS RD 5 #05-104
Postcode	400412
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	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
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 SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDT19U
Vehicle Make/Model/Colour	MERCEDES BENS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KIM HUA SIANG
NRIC/Passport Number	S1124475J
Contact Number	97878795

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Accident Sketch Plan


### SKETCH PLAN

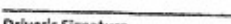
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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

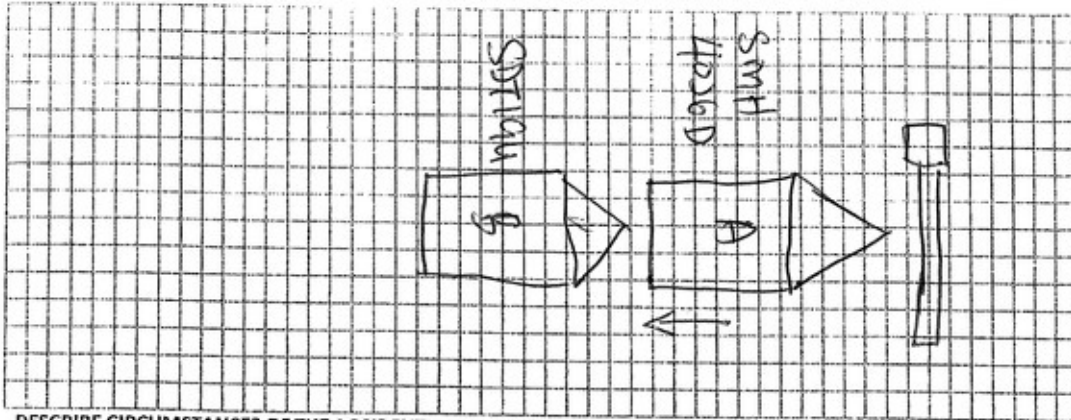
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: Rakesh Kumar Arora  
NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 7<sup>th</sup> of July, my vehicle stopped at the gantry and my IU unit not able to be detected. While reversing, I accidentally hit against the rear vehicle number - SDT 19U. The vehicle sustained minor crack to the front grill. My vehicle, sustaining minor scratches to the bumper.

### Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.



- Reporting Only
- Claim OD
- Claim TP
- Claim OD/ TP at other workshop

### DECLARATION

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

Policyholder's signature  
Date & Time

Driver's Signature  
(if driver not the policyholder)  
Date & Time

Reporting Centre Personnel's Signature  
Name: Paleswaran. Anand  
Nric/Fin No.

CERTIFICATE OF INSURANCE



## CERTIFICATE OF INSURANCE

### CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : NUR FAREESHA SHAFEEQA BINTE ABDUL MALIK  
Period of Insurance : 22 Jan 2019 To 21 Jan 2021  
Engine No. : 3A92UHL9238  
Chassis No. : MMBSTA13AKH000665

Vehicle No. : SMH4026D  
Policy No. : 1900002375  
Endorsement No. :  
Issued Date : 30 Jan 2019

#### ABOUT THE COVER

Make/Model : MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage : 1,193.00 CC

Sum Insured : Market Value

First Year of Registration : 2019

Driver Restriction : NA

Off Peak Car : No

Insuring with COE/PAFF : Yes

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 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189) 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 - \$600 Theft - \$0 Flood Cover - \$0

##### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

NUR FAREESHA SHAFEEQA BINTE ABDUL MALIK - \$600 (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 Authorised Service Centre (For accident reporting & windscreen claim only): Add: 20 Leng Kee Rd Singapore 159094 64708688

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

4. Cycle & Carriage Body & Paint Centre: Add: 209 Pandan Gardens Singapore 609339 65684501

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](http://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: MayBank

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).

0504620212

C&CMICP2 - VW

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSCASH

78 Shenton Way #07-16 AIG Building 8079120 | T: +65 6419 8002 | [www.aig.com.sg](http://www.aig.com.sg)

AIG Asia Pacific Insurance Pte. Ltd.

Identification Card & DL of Owner

**REPUBLIC OF SINGAPORE DRIVING LICENCE**


License Number: **S9118543A**

Name: **NUR FAREESHA SHAFEGA BINTE ABDUL MALIK**

Birth Date: **03 Jun 1991**

Issue Date: **21 Mar 2011**

0019484420



**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S9118543A**

Name: **NUR FAREESHA SHAFEGA BINTE ABDUL MALIK**

Race: **MALAY**

Date of birth: **03-06-1991** Sex: **F**

Country of birth: **SINGAPORE**




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

**Class 3A Motor cars without clutch pedals (Auto) <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals <= 3000kg**

**EFFECTIVE DATE 21 Mar 2011**

License No: **S9118543A**

NP 426A

**3887551**

**NRIC No. S9118543A**

Date of issue: **02-06-2006**

Address: **APT BLK 412 EUNOS ROAD 5 #05-104 SINGAPORE 400412**






Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

