# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 23/07/2020 14:31

#### 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.

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	23/07/2020 14:19							
Date Of Accident	21/07/2020 06:30							
Exact Location Of Accident	SINGAPORE PRISON SERVICE HQ OPEN CARPARK							
Country/State of Loss	SINGAPORE							
	DETAILS OF OWN VEHICLE							
Vehicle Registration Number	SMC4911A							
Insured/Policyholder								
Name Of Registered Owner	NORLIATI BINTE ABDUL RAHMAN							
NRIC No	S8315916B							
Email Address	LIATI0306@HOTMAIL.SG							
Mobile Phone No	(LOCAL) +65-92384487							
Alternative Phone No	Home-92384487							
Vehicle Particulars								
Manufacturer	MITSUBISHI							
Model	ATTRAGE-1.2 CVT (A)							
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE							
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	1800070061-01							
Cover Note Number								
Driver								
Name of Driver	NORLIATI BINTE ABDUL RAHMAN							
NRIC No	S8315916B							
Date Of Birth	03/06/1983							

**INDOOR** 

15/01/2009

11 YEARS AND 6 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-92384487

Fax Number

Contact Number HOME-92384487

EMail Address LIATI0306@HOTMAIL.SG

Address BLK 122 YISHUN STREET 11

#10-473 SINGAPORE

Postcode 760122
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

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#### **General Information of the Accident**

Type Of Accident COLLIDED INTO PARKED VEHICLE

Weather Conditions DARK
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 2

Number of Passengers (Including Driver)

Passenger 1 Name: : ZHANG YUN

Gender: : Female

## **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 THE ATTACHMENT

#### 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 SLU5870U

Vehicle Make/Model/Colour TOYOTA SIENTA

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver NRIC/Passport Number

**Contact Number** 

82287403

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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 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 :
  - 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: 23-0740

IDHONES

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

Policyholder's Signature Date & Time: @-3-01-10

1040Hrs

GIARMC SketchPlanForm\_V8

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



# CERTIFICATE OF INSURANCE

# CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : NORLIATI BINTE ABDUL RAHMAN

 Period of Insurance
 : 02 Jul 2020 To 01 Jul 2021

 Engine No.
 : 3A92UGX8261

 Chassis No.
 : MMBSTA13AJH002149

Vehicle No.

: SMC4911A : 1800070061-01

Policy No.

Endorsement No. Issued Date

: 08 Jun 2020

## ABOUT THE COVER

Make/Model Driver Restriction

: MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage : 1,193.00 CC : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2018 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\* :

a) The Policyholdar b) Any other person who is driving on the Policyholdar's order or with his/her permission. This Policy will indiamally 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition

: 35 years old and above

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 this or reward, driving listing, fishing less, secing, paper-making, reliability trial or speed-lessing, the carriage of goods other than samples in connection with samy trade or business or use for any purpose in connection with Mater Trade.

Loss of Use 1500cc - 1600cc

\* Limitations randered inspecialize by Section 8 of the Motor Vahidas (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1967 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

#### **EXCESS**

Section 1 Fire - \$0 Own Damage - \$600 Thaft - \$0 Flood Cover - \$600

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

NORLIATI BINTE ABDUL RAHMAN - \$600 (Own Damage), \$600 (Flood Cover)

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

1. Cycle & Carriago Body & Paint Centre. Add: 209 Pandan Gardana Singapore 609339 55884501.
2. Cycle & Carriago Authorisod Sarvica Carrine (For accident reporting & windocreen oleim only). Add: 330 Ubi Rd 3 Singapore 409650 57461000.
3. Cycle & Carriago Authorisod Sarvica Carrine (For accident reporting & windocreen claim only). Add: 320 Lung Kee Rd Singapore 109094 54709588.
4. Cycle & Carriago Authorisod Sarvica Carrine (For accident reporting & windocreen claim only). Add: 800 Sin Ming Ave Singapore 575733 69320000.

For other Approved Reporting ContractAIG Authorised Repairers, please contact our 24-hour accident emergency holine at +65 6338 6200. Alternatively, you may refer to AIG website www.sig.ag or AIG SG Mothis App. Simply search and download "AIG SG" from ITunes or Google Play.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Metor Vehicles(Third Party Risks and Compensation) Act (Cap. 188), Part IV of the Road Transport Act, 1987 (Maleysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1999 (Maleysia).

0504620215

C&CMICP2 - VINCE

239 ALEXANDRA ROAD

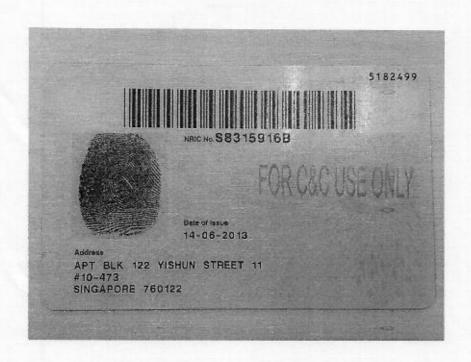
SINGAPORE 169930

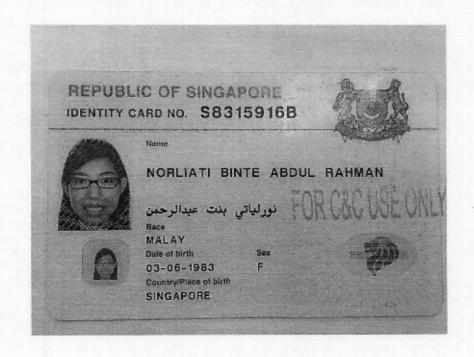
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

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