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#### 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 <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.
- 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	01/09/2020 09:47
Date Of Accident	29/08/2020 22:30
Exact Location Of Accident	JUNC OF CANBERRA WAY & CANBERRA ST
Country/State of Loss	SINGAPORE
and the second of the second of the second	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLM5984S
Insured/Policyholder	
Name Of Registered Owner	ZANZICARS
Co Reg No	5XXXX083L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81807111
Vehicle Particulars	
Manufacturer	CITROEN
Model	C4 PICASSO
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2070014558
Cover Note Number	
Driver	
Name of Driver	ANDY TAN TEE MENG
NRIC No	SXXXX650F
Date Of Birth	17/10/1968
Occupation	OUTDOOR
Date Of Driving Pass	19/03/1997
Driving Experience	23 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81807111
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 507A WELLINGTON CIRCLE #05-164

Postcode 751507

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

4

NO

YES

NO

2

General Information of the Accident

Type Of Accident CHAIN COLLISION

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

Was any body injured in the Accident? YES

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:

: MOHAMED NURFIEQRI

GENDER: : MALE

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name

CAIRNHILL NEIGHBOURHOOD POLICE POST

ROAD: BLK 9 GLOUCESTER ROAD, POSTCODE: 210009, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-2968999 - FAX NO: 63912398

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/20200831/2115

Attachment(s)

Are accident photos available for attachment?

YES

NO

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SLG8809C

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Page 2 of 25

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

SMG8774G

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

SMM7115J

Vehicle Make/Model/Colour

**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)

#### **DETAILS OF INJURED PERSON 1**

Name

ANDY TAN TEE MENG

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SLM5984S

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

# **DETAILS OF INJURED PERSON 2**

Name

MOHAMED NURFIEQRI

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SLM5984S

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

# SKETCH PLAN

#### IMPORTANT NOTICE

- 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. 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
- (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.

ZICA REG NO 533580834

> Driver's Signature (If driver is not the policyholder) Date & Time:

Policyholder's Signature Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SKETCH PLAN	
	A) SLM 59845.
	B) SLG 8809C
	C) SMG 87746
B	Delip mm2 (0

# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*	Refer	the	attached	Police	Report	1	T/20 200831	/2115	
	- 11-								
			3())						
7 - 1007									

DECLARATION

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

Policyholder's Signature \*
Date & Time:

Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:





Police Station Of Origin:

Caimhill NPP

9 Gloucester Road #01-03 SINGAPORE

210009

Tel No: 1800-2968999

REPORT OF A TRAFFIC ACCIDENT

T/20200831/2115

Report No. T/20200831/2115

1 of 5

31/08/2020 18:55			Vide Report No.:	Station Diary No.: 35	
Informa	nt's Partic	ulars	Mark Mark		
	Informant: AN TEE Mi		Address: APT BLK 507A WELLING 751507	STON CIRCLE #05-164 SINGAPORE	
ID Type / ID No.: NRIC NO / S6839650F			Contact No.: Home/Office: Mobile: 81807111		
Nationality: SINGAPORE CITIZEN		ΈΝ	Email:		
Sex: Age: Date of Birth: Male 51 17/10/1968			Type of Informant: Driver		
Race: Chinese Occupation: Real estate agent			Language:	Institution / School Name:	
			Driving Licence Informatio Class: 3	n: Date of Expiry:	

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/08/2020 22:30	Type of Location: X-Junction
CANBERRA V	WAY	Road Surface:		Road Speed Limit:
Clear		Dry		60 Km/h
man year years		Traffic Control:		Traffic Volume: Light
Traffic Flow: One Way		Not Controlled		Light

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLG8809C	Car	TOYOTA	COROLA		Slightly Damaged	0
SLM5984S	Car	CITROEN	C4 PICASSO		Slightly Damaged	1
SMG8774G	Car	MERCEDES BENZ	E250		Slightly Damaged	1
SMM7115J	Car	PORSCHE	BOXSTER		Slightly Damaged	0





Police Station Of Origin Cairnhill NPP 9 Gloucester Road #01-03 SINGAPORE 210009 Tel No: 1800-2968999

2 of 5 Report No. T/20200831/2115

CONTINUATION OF REPORT

Ally I Guestilati	nvolved No			
No of Pedestria	ns Injured NIL	Use of Pe	destrian Cros	sing: NA
Driver			destricti Ores	sing. NA
Name	YEO RUIZHEN		ID No.	S8720795A
Related Vehicle	SLG8809C (Car)		Contact No.	90499569
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc		
No. of Days gran	ted Medical Leave NIL	Degree of		
Passenger	的名词复数 医克里克氏 医克里克氏 医皮肤		THE THE	
Name	MOHAMED NURFIEQRI		ID No.	\$96240921
Related Vehicle	SLM5984S (Car)		Contact No.	82830831
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge   NIL	
	ed Medical Leave 05		Injury Slight	
Oriver		<b>以表现的</b>	And the second	
Name	ANDY TAN TEE MENG		ID No.	S6839650F
Related Vehicle	SLM5984S (Car)		Contact No.	81807111
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disch	The second secon	
No. of Days grant	ed Medical Leave 03	Degree of I	the same of the sa	





Police Station Of Origin: Caimhill NPP 9 Gloucester Road #01-03 SINGAPORE 210009

3 of 5 Report No. T/20200831/2115

Tel No: 1800-2968999

CONTINUATION OF REPORT

Name	TOH AIK POON		ID No.	S1131991B
Related Vehicle	SMG8774G (Car)		Contact No	83831792
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discha		I
	ted Medical Leave NIL	Degree of I		
Driver	<b>公里用的表现是一种的</b>	ENGARGH-BAT	-	
Name	DARREN WONG CHEN PEI		ID No.	S8743746I
Related Vehicle	SMM7115J (Car)		Contact No.	97676038
Hospital/Clinic	NIL	1	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discha	rge NIL	
No. of Days grant	ed Medical Leave NIL	Degree of Ir		The second second second second

#### Brief Details.

Correction to the date and timing of T/20200837/2052.

On the above mentioned date, time and place at the junction of Canberra Way and Canberra Street heading towards Sembawang, I had met with an accident.

As I was waiting to turn right into Canberra Street a silver Mercedes (SMG8774G) had hit the rear of the silver Toyota (SLG8809C) that was behind my vehicle (SLM5984S) causing it to hit the rear of my car and as a result my vehicle had moved forward hitting the exhaust pipe of a whit Porsche (SMM7115J) that was in front of me.

The rear and front bumpers of my vehicle was damaged.

Particulars were exchanged amongst all the drivers and police was called. However, prior to traffic Police arrival the other three vehicles had left as they did not want to hold up the traffic.

Traffic Police attended to us however no case card was given and we were advised to lodge a police report.

My passenger and I had sore back and had went to the clinic on 31/08/2020.

I am lodging this report for insurance claims purposes.





Police Station Of Origin: Cairnhill NPP 9 Gloucester Road #01-03 SINGAPORE 210009

4 of 5 Report No T/20200831/2115

Tel No: 1800-2968999

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Literature

**CONTINUATION OF REPORT** 





5 of 5

Report No. T/20200831/2115

Police Station Of Origin. Caimhill NPP 9 Gloucester Road #01-03 SINGAPORE 210009 Tel No: 1800-2968999

CONTINUATION OF REPORT

# Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: A / Sgt 2 MUHAMMAD ZAIISZ BIN ZAINI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/08/2020 18:55
Officer In Charge Of Case: TP / GIT / Staff Sgt TAN JUN YAN Contact No.: 65476311	Classification Of Case:
Authentication Stamp	



# CERTIFICATE OF INSURANCE

# RIDE SHARE PRIVATE VEHICLE

Name of Policyholder : ZANZICARS

Period of Insurance

: 03 Apr 2020 To 02 Apr 2021

Engine No.

: 10JBHD3065120

Chassis No. : VF73DBHZTGJ811377 Vehicle No. Policy No.

: SLM5984S : 2070014558

Endorsement No.

: 000000000338216

**Issued Date** 

: 03 Apr 2020

#### ABOUT THE COVER

Make/Model

: CITROEN C4 Picasso 1.6 BlueHDI

Engine Capacity/Tonnage : 1,560.00 CC

Sum Insured : Market Value

First Year of Registration : 2017

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

Any 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.

When the Vehicle is used for the carriage of passenger for hire or reward, such authorised driver must be named under the Policy and registered with an intermediary which facilitates the carriage of

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

Age Condition

: All Age Condition

Limitation as to use\* :

Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired. Use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired.

This Policy does not cover 1) use for driving test, racing, page-making, reliability trial or speed-testing;

1) use for driving tutton, driving test, racing, page-making, reliability trial or speed-testing;

2) use whist drawing a traiter except the towing (other than for reward) of anyone disabled using a mechanically propelled vehicle; and 3) use for any purpose in connection with Motor Trade.

\* 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 - \$1800 Theft - \$0 Flood Cover - \$1800

Property Damage - \$2000

Windscreen: \$100

Named Driver and Excess (where applicable)

Andy Tan Tee Meng - \$1800 (Own Damage) \$2000 (Property Damage), \$1800 (Flood Cover)

# APPROVED REPORTING CENTRES/AUTHORISED REPAIRES (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 contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website www.eig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from ITunes or Google Play.

#### IMPORTANT NOTES

If the vehicle is used for the carriage of passenger for hire or reward, such driver must be named under the Policy and registered with an intermediary which facilitates the carriage of passengers for hire or reward. Should you decide to include any other driver, please contact us. (Company reserves the right to acceptiveject the inclusion of any Named Drivers)

Hire Purchase Company/Employer's Loan: Goldbell Financial Services Pte Ltd

I/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).

0502847633

CYCLE & CARRIAGE - JESSIE

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPBEO

Copyright © 2019 AlG Asia Pacific

Date of Accident	: 19.08-1010 Accident Time: 12.30 (24-HR-Format)
Accident Place	: Junction of anberra way and Camberra street
Vehicle. No. (Car Plate No.)	: SLM 5984S Make/Model: Citioen (4 Picarso 1.6
Insurace Company	: A16 Policy No: 2070014558.
Owner or Company Name /IC No.	: Zanzicais (53358083 L).
Owner or Company Contact No.	:Owner's Hp Company Tel
DRIVER'S Name / IC No.	: Andy Tan Tee Meng (SG8 39650 F)
DRIVER'S Date Of Birth	: 17.10.1968 DRIVER'S License Pass Date 19.03.1997.
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: OWM(( .
DRIVER'S Address	FOZICE (2) 431-20# 91011) not prilled A FOZ 189:
DRIVER'S Contact No./ Alt No.	:1) 8180 7111 2) -
DRIVER'S Occupation	: INDOOR OUTDOOR (e.g. working inside or outside office)
Email Address	:
Weather & Road Surface	: CLEAR & DRY\RAINING & WET\AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including D	river):   Driver /   partenger.
Was there any video Captured by ca Exact purpose for which vehicle was Any Injury (If YES, Pls state):	ar camera: YES \ NO s being used at the time of accident: Private use \ Work purpose \( \ext{VOS} \).
Whide B Other F	Party Driver's Particular (if any)
Vehicle, No: SLG 880	9C Vehicle, No: SMG 87746.
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	
* NEW - Passenger's name &	gender: Vehicle D: SMM FILE J.
Mohamed Hur fjegri	- Male .