SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 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 conse 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	31/08/2020 16:22
Date Of Accident	30/08/2020 11:15
Exact Location Of Accident	JAVA ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLU9850B
Insured/Policyholder	
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE LTD
Co Reg No	199803778Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-68498379
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	GLA 180
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	999993863/100833629-00000
Cover Note Number	
Driver	
Name of Driver	KEFFI EP KHODR SOUHILA
NRIC No	G3414156N
Date Of Birth	11/03/1985

INDOOR

17/05/2018

2 YEARS AND 3 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-92728232

Fax Number

Contact Number

EMail Address NOEMAIL

Address 1 GATEWAY DRIVE #15-08 WESTGATE TOWER

2

NO

NO

1

NO

NO

NO

Postcode 608531

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - FLEET

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

Was any body injured in the Accident?

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.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SMA874K Vehicle Registration Number

Vehicle Make/Model/Colour **AUDI A3 WHITE**

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver **GAVIN CHONG WEI JUN**

SXXXX610B NRIC/Passport Number

Contact Number

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

SKETCH PLAN

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- 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.
- 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')
- 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.

Co Chee Han

Cycle & Carriage Industries Pie Lid

Finall : chechange Centre - Pandan Loop

Cycle & Carriage Industries Pie Lid

Cycle & Carriage Centre - Pandan Loop

Policyholder's Signature Date & Time

Driver's Signature (If driver is not the policyholder) Date & Time Reporting Certic Personnel 1817/17

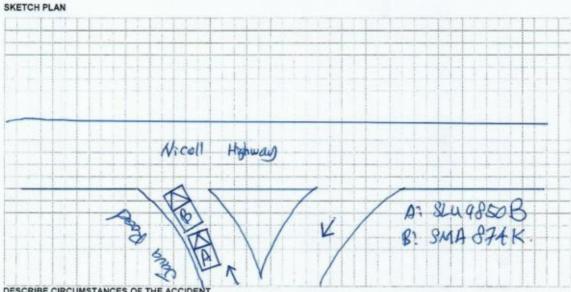
Namel D: 6771 agreement 1918 17/17

Email: chechan.go@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Cycle & Carriage Industries Pandan Loop

Customer Service Centre - Pandan Loop



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Acident hoppened on Gurday, August 30th, around 11.15on. At the justice between John road a Nicoll Highway. The coninfront of re dopped uson "Give way" sign and My carburged into the book of Niscan.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

> (Please contact your insurance company for any further details) Go Chee Han
>
> DID: 6771 4336 HP: 9181 7717
>
> Email: cheehan.go@eyclecarriage.com.sg
> Cycle & Carriage Industries Pte Ltd
> Customer Service Centre - Pandan Loop

Policyholder's Signature Date & Time

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

Reporting Centre Personnel's

Name:

HOTLINE TEL. (63) 6419-3000



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969 ROAD TRANSPORT ACT, 1987 [MALAYSIA] MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR

OWN DAMAGE EXCESS \$\$1,200.00 (1)

CERTIFICATE NO. 999993863/100833629-00000

SUM INSURED S\$1.00 INSURING WITH COE/PARF YES

1) VEHICLE REGISTRATION NO.

SLU9850B

2) NAME OF INSURED

DAIMLER FLEET MANAGEMENT SINGAPORE PTE LTD

3) EFFECTIVE DATE OF THE COMMENCEMENT
OF INSURANCE FOR THE PURPOSES OF THE ACT
4) DATE OF EXPIRY OF INSURANCE

1 Jan 2020

31 Dec 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any drivers who is driving on the Insured's order or with their permission.
 Excess \$2,500 applies to drivers age 21 to 26 years old unless otherwise specified.
 Additional Excess \$3,500 applies to drivers age below 21 or above 65 years old and or less than years driving experience unless otherwise specified.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE *

1) Use for social, domestic, pleasure purposes and business purposes of the Insured and or hirer whom

The Policy does not cover;

1) Use for the carriage of passengers for hire or reward.

2) Use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, 3) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

4) Use for any purpose in connection with the Motor Trade.

In the event of accident claim, the repairs to the Vehicle must be carried out by either one of our AIG Authorized Repairers or a particular Repairer approved by AIG

LOSS OF USE NOT INCLUDED

* NAMED DRIVER N/A

HIRE PURCHASE COMPANY NA

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1997 (Meleysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 9 Mar 2020

AIG ASIA PACIFIC INSURANCE PTE. LTD.

JARDINE LLOYD THOMPSON PTE LTD 138 MARKET STREET #07-01 CAPITAGREEN SINGAPORE 048946

Authorised Representative

ORIGINAL

SSCDSK





EMPLOYMENT PASS int of Foreign Manpiower Act (Chapter 91A) Republic of Singapore

DIRECTOR CAPITAL HOLDINGS PRIVATE LIMITED



Name KEFFI EP KHOOR SOUHLA







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DAYS



F66 G3414156N

Date of Birth 11-03-1985

MULTIPLE JOURNEY VISA ISSUED



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.







