## 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.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	24/10/2020 09:56
Date Of Accident	23/10/2020 19:30
Exact Location Of Accident	THOMSON EXIT (PIE TOWARDS CHANGI)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJA7334S
Insured/Policyholder	
Name Of Registered Owner	JUMARI BIN KASRAWI
NRIC No	S1539242H
Email Address	JUMARI.KASRAWI@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96227556
Alternative Phone No	Office-NOPHONE
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER 1.6 M
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	THIRD PARTY
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	2100054973-12
Cover Note Number	
Driver	
Name of Driver	JUMARI BIN KASRAWI
NRIC No	S1539242H
Date Of Birth	13/12/1962

**INDOOR** 

28/02/1991

29 YEARS AND 7 MONTHS

Gender **MALE** 

Mobile Number (LOCAL) +65-96227556

Fax Number

**Contact Number OFFICE-NOPHONE** 

**EMail Address** JUMARI.KASRAWI@YAHOO.COM.SG

APT BLK 307 JURONG EAST STREET 32 Address

#04-230

Postcode 600307 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 **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

3

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

NO

NO

Number of Passengers (Including Driver) 1

## **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**

### PLEASE REFER TO THE SKETCH PLAN

### 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 SKS140Z

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver ASHTON BOEY BO JYUN

S9439264J NRIC/Passport Number

Contact Number Address 92332112

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

SLT1165D

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver LOO CHOON YONG, ALLAN

NRIC/Passport Number S8136026Z

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

#### IMPORTANT NOTICE

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- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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 insurers) 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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stop in tim	e and hit my car.	The cay with xlade
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ECLARATION		
We declare the foregoing partic	culars are true in every respect.	(E(\)*)
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Micyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
ste & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.:



# CERTIFICATE OF INSURANCE

# CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Jumari Bin Kasrawi : 19 Dec 2019 To 18 Dec 2020

Period of Insurance : 4G18JM6615

Engine No. : JMYSNCS3A8U002370 Chassis No.

: SJA7334S Vehicle No. : 2100054973-12 Policy No.

Endorsement No.

: 10 Dec 2019 Issued Date

## ABOUT THE COVER

: MITSUBISHI LANCER 1.6 GLX S

First Year of Registration : 2007 Make/Model Sum Insured : Market Value Engine Capacity/Tonnage : 1,584.00 CC Insuring with COE/PARF : No Off Peak Car : No : NA

Driver Restriction 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 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.

: All Age Condition Age Condition

Use only for social, demestic 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 stall 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.

\* Lientations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 169), Section 95 of the Road Transport Act, 1997 (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 - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

Jumari Bin Kasrawi - \$600 (Own Damage), \$600 (Flood Cover), Rieska Amelia Bte Jumari - \$600 (Own Damage), \$600 (Flood Cover)

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

Cycle & Carriage Body & Paint Centre Add 209 Pandan Gardens Singapore 609339 85684501
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add 330 Ubi Rd 3 Singapore 408550 67481000
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add 20 Long Yee Rd Singapore 159094 64706688
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add 600 Sin Ming Ave Singapore 575733 69328000
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only)

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG website www.sig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from ITutes or Google Play.

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

IAMle hereby certify that the policy to which this Conflicate 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 Read Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500720709

CYCLE & CARRIAGE - COCO (MIT)

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.









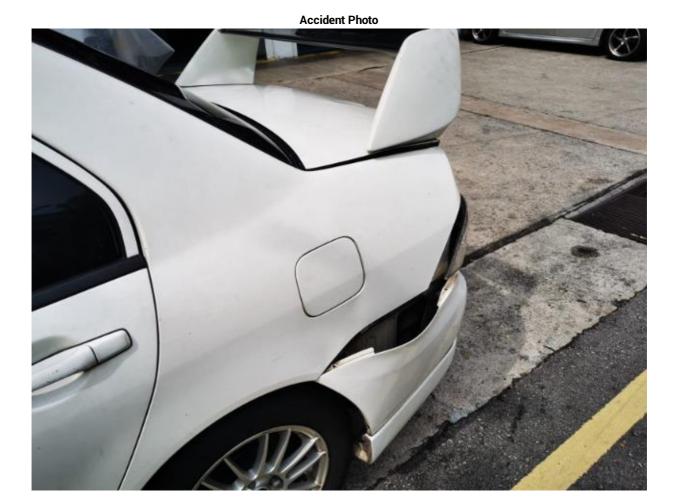




















**Accident Photo** 



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