SC1K211F0004 / ComfortDelGro Engineering Pte Ltd [579701] ENTRY DATE & TIME: 15/01/2021 14:10 (SGT) SUBMITTED BY: Brenda Ng VERSION: 1 (15/01/2021 14:10 (SGT))

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 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.

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 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 Submission 15/01/2021 14:10 (SGT) Date of Accident 13/01/2021 20:44 (SGT) Exact Location of Accident 7 Bishan Street 14, Singapore 579784 Additional Location Information BISHAN ACTIVESG SPORTS CENTRE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDH8113R

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner MRS RACHNA ANAND NRIC No. S2220383E Email Address witty.k.anand@gmail.com Mobile Phone No (Phone) +65-98299053 Alternative Phone No +65-98299053

VEHICLE PARTICULARS

Manufacturer Hyundai Model Santa fe Variant 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 - Reporting only Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy Policy Number 2070063908 Cover Note Number

DRIVER

Name of Driver KARAN ANAND NRIC No S8439856Z Date Of Birth 27/12/1984 Occupation Indoor

Date Of Driving Pass 19/01/2009 Driving experience 12 YEARS Gender Male Mobile Number (Phone) +65-98299053 Alt. Phone Number Email Address karan.c.anand@gmail.com Address 17 BUTTER FLY AVE Address complement Postcode 349782 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Head to Rear Weather Conditions Clear Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKW4107Z Vehicle Manufacturer Honda Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver CHEUNG WAI CHEUK NRIC No S7970802Z Contact Number (Phone) +65-93366774 Address Address complement Postcode

Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver) -

SKETCH PLAN

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.
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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:
 - 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:

15-1-2021

Driver's Signature

(If driver is not the policyholder) Date & Time: 15/1/21 Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SKETCH PLAN SPORTS CENTRE BISHAN ACTIVESA CARA : SKW 41072 CARB · SDH 8113R DESCRIBE CIRCUMSTANCES OF THE ACCIDENT I was driving inside BISHAW ACTIVES 4 driver (Mr CHEUNA Leaving left DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: 15-1-2021 (If driver is not the policyholder) Date & Time: 15/1/21 NRIC/FIN No.:

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CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Mrs Rachna Anand : 06 Apr 2020 To 05 Apr 2021 Period of Insurance Engine No. : G6EA8A289850 ; KMHSH81DR9U469566 Chassis No.

Vehicle No. : SDH8113R Policy No. : 2070063908 : 000000000338603 Endorsement No. Issued Date : 07 Apr 2020

ABOUT THE COVER

Make/Model : HYUNDAI SANTA FE 2.7

Engine Capacity/Tonnage : 2,656.00 CC Sum Insured : Market Value First Year of Registration : 2009 Off Peak Car : No Insuring with COE/PARF : No Driver Restriction · NA

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/sible meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young end/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 tellon, driving tells, racing, pace-making, reliability trial or speed-lesting, 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 Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Read Transport Act, 1997 (Malaysia) and Read 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 - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Rachna Anand - \$600 (Own Damage), \$600 (Flood Cover)

APPROVED REPORTING CENTRESIAUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Approved regions of uniform Annihilation and programs (not obtained reports). Within the first 3 years of the first registration of 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 repeirs carried out at the Sole Agent's workshop.

For other Approved Reporting Centres/Rich Authorised Repairers, please contact our 24-hour accident emergency hotine at +65-6338 6200. Alternatively, You may refer to AliG website www.alg.sg or AliG SG Motele App. Simply search and download "AliG SG" from illunes or Google Play.

Hire Purchase Company/Employer's Loan: NA

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 Act, 1987 (Malaysia), Road Transport Act, 1987 (Malaysia).

0128004000

CHENG KIM HONG SHIRLEY

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SINGAPORE 079120 SP-RICHARDCHIA-AGNESWOON

AIG BUILDING 78 SHENTON WAY #07-16

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

SSPBST

















