### **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.

- 4. The issue and acceptance of this is form by instrained 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.

### **ACCIDENT STATEMENT**

Date of Submission 25/08/2021 14:39 (SGT) Date of Accident 25/08/2021 09:57 (SGT) Exact Location of Accident Singapore Additional Location Information WHITLEY ROAD TO DUNEARN ROAD

Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMR5531C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner OMAR BIN ABDULLAH NRIC No. S0217246A Email Address AASHIQ22@HOTMAIL.COM Mobile Phone No (Phone) +65-96214518 Alternative Phone No +65-96214518

VEHICLE PARTICULARS

Manufacturer Mercedes Model Gla180 Variant 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? Yes Vehicle Category Private car Transmission Auto CC 1595

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2000001863-01 Cover Note Number

DRIVER

Name of Driver MOHAMMAD AASHIQ BIN OMAR NRIC No. S8927917H

Date Of Birth 22/08/1989 Occupation Indoor Date Of Driving Pass 21/10/2008 Driving experience 12 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-96214518 Alt. Phone Number Email Address AASHIQ22@HOTMAIL.COM Address 429 JURONG WEST AVE 1 #04-322 Address complement Postcode 640429 Is the driver the policyholder? Nο 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 \/\e\_t OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Rochor Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002949999 Alt. Police Station Phone No (Fax) +65-63918583 Police Station Address 11 Kampong Kapor Road Singapore 208678 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT AT A FILTER LANE, HIT THE CAR INFRONT, WAS MOVING WHILE CHECKING FOR VEHICLE ON THE RIGHT. REFER TO POLICE REPORT T/20210825/2063 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SMQ9890U Vehicle Manufacturer Honda

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	RIDUAN BIN CHUMADI
Contact Number	-
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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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
- 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
- 2. 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.
- Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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 :
  - (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
- all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to (b) 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.
- 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

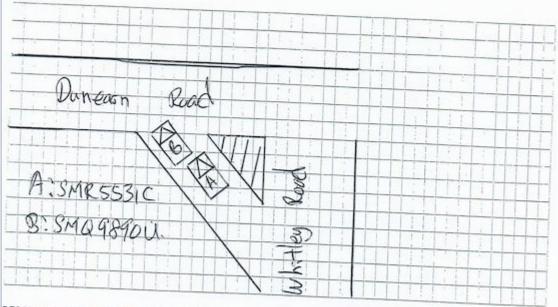
(If driver is not the policyholder)

Go Chee Han DID: 6771 4336 HP: 9181 7717 Email: cheehan.go@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd Service Centre - Pandan Loop

Customerorting Centre Personnel's

Name:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At a filter line, bit the car infront, the was muchy while thecking for vehicle on the right.

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,

(Please contact your insurance company for any further details)

Policyholder's Signature Date & Time

Driver's Signature

(If driver is not the policyholder)

Go Chee Han DID : 6771 4336 HP : 9181 7717 DID: 6771 4336 HP: 9181 171

Email: chechan.go@cyclecarriage.com.sg

CyclReportage Industries Pte Ltd

CyclReportage Industries Pte Ltd

Customer Seriage Industries Ptersonnel's



### CERTIFICATE OF INSURANCE

## MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : OMAR BIN ABDULLAH Period of Insurance : 14 Jan 2021 To 13 Jan 2022

Engine No. : 27091031897591 Chassis No. : WDC1569422J649112 Vehicle No. : SMR5531C Policy No. : 2000001863-01

Endorsement No.

Issued Date : 26 Dec 2020

### ABOUT THE COVER

Make/Model : MERCEDES Benz GLA180 (AMG)

Engine Capacity/Tonnage : 1,595.00 CC Sum Insured : Market Value First Year of Registration : 2020 Driver Restriction : NA Off Peak Car : Yes Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

Any person other than the Policyholder who is driving on the Policyholder's order or with his/her permission.

This Policy will indemnify any authorised driver other than the Policyholder only if he/she 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.

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

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 tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with Motor Trade.

Loss of Use 2000cc

\* 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 - \$800 Theft - \$0 Flood Cover - \$800

Property Damage - \$0

Named Driver and Excess (where applicable)

MOHAMMAD AASHIQ BIN OMAR - \$800 (Own Damage), \$800 (Flood Cover)

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

Cycle & Carriage Euros Service Center (For accident reporting only). Add: 330 Ubi Read 3 Singapore 408650 62061818
 Cycle & Carriage Pandan Loop Service Center - Body Care & Repair. Add: 188 Pandan Loop Singapore 128378 62061818

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

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Daimler Financial Services Africa & Asia Pacific 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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504612224

CYCLE & CARRIAGE - EVELIM

239 ALEXANDRA ROAD

SINGAPORE 159930 Underwritten by AIG Asia Pacific Insurance Pte. Ltd. AIG Asia Pacific Insurance Pte. Ltd.

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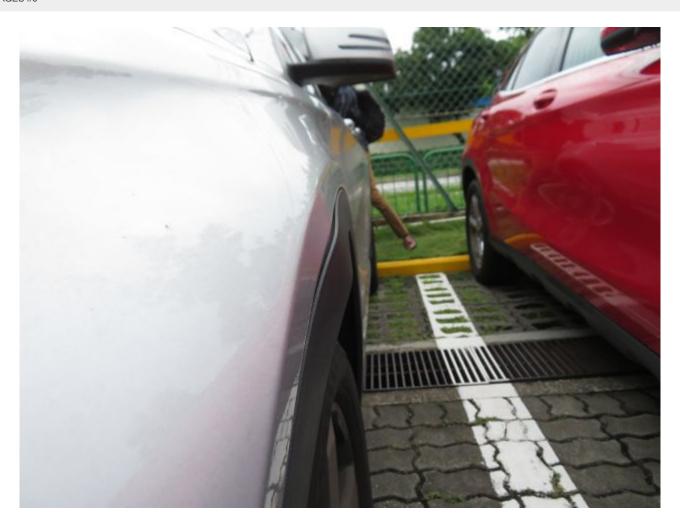


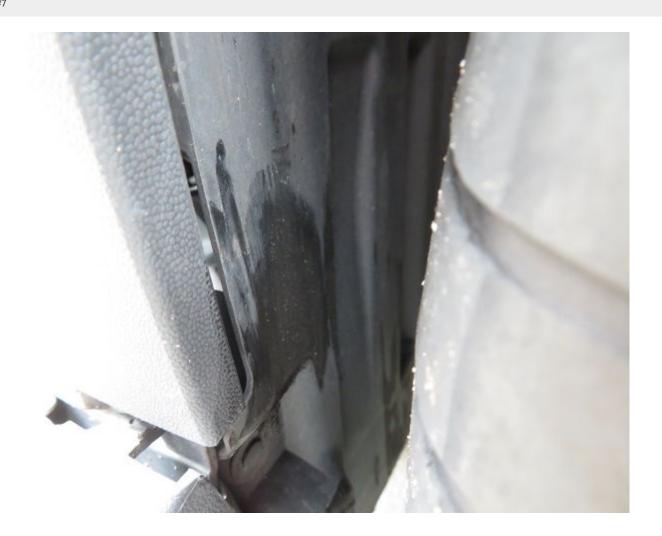
















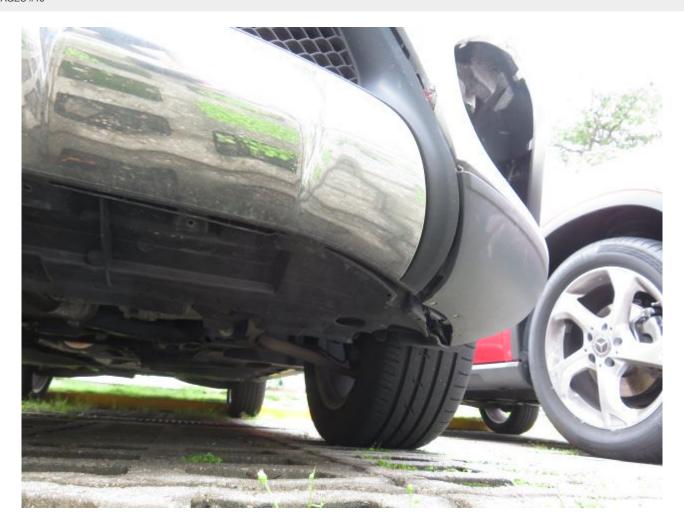


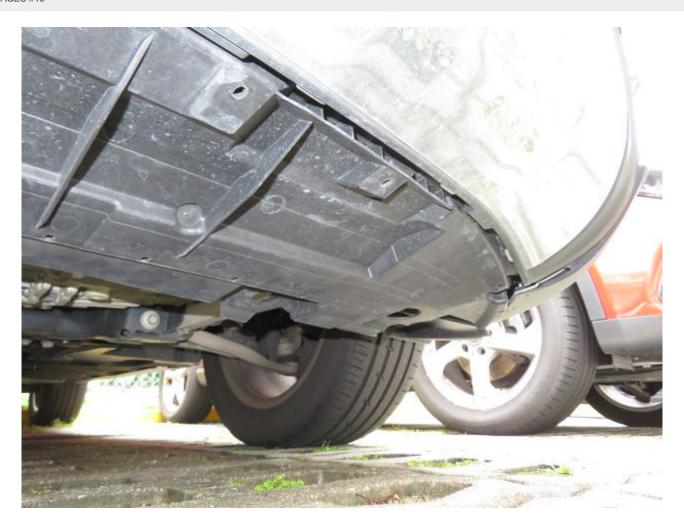


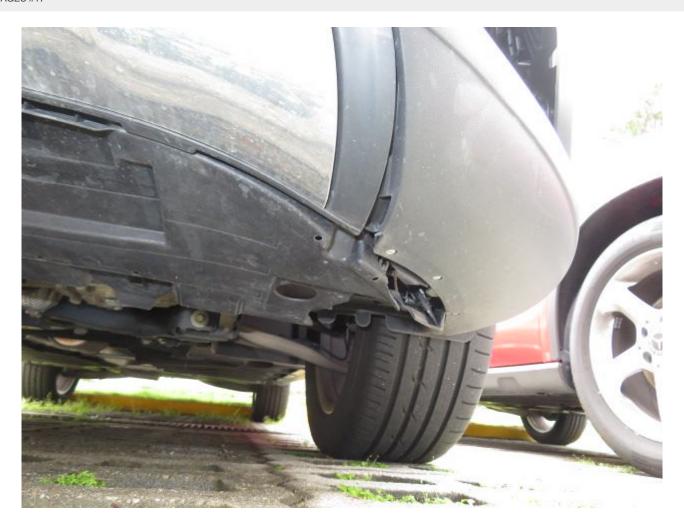














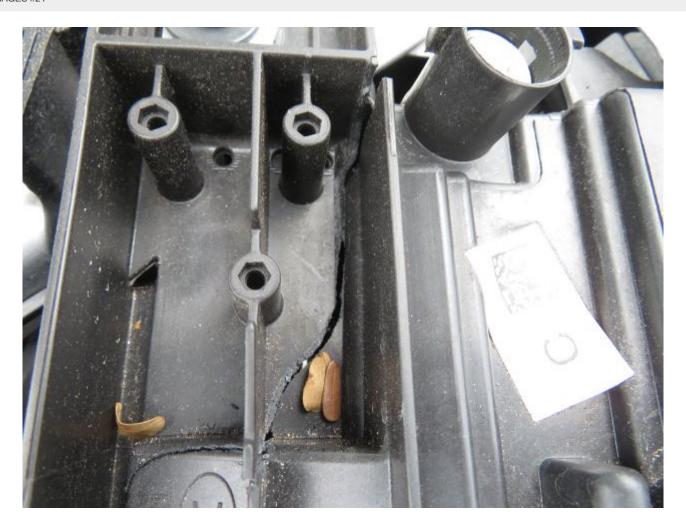


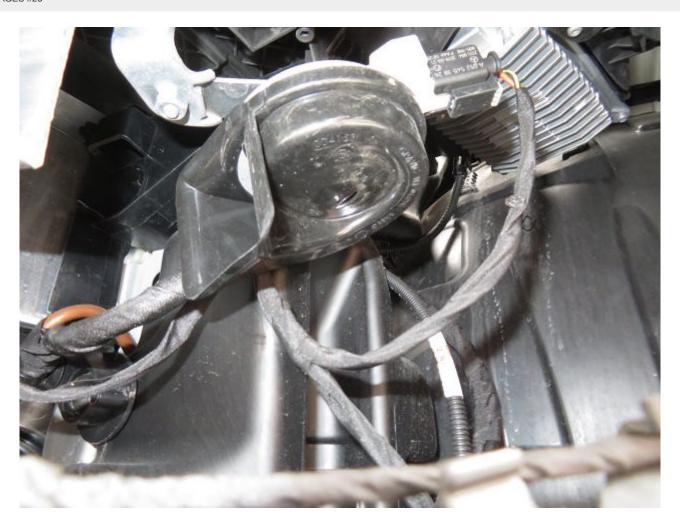








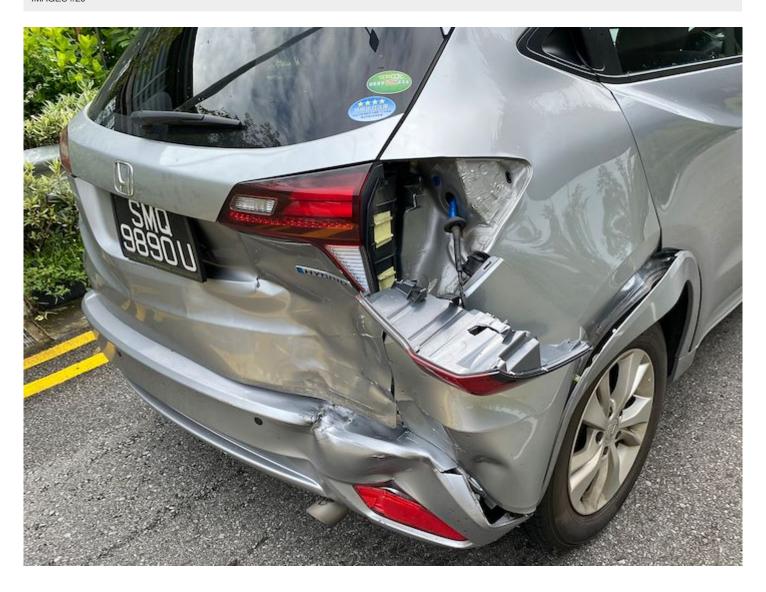


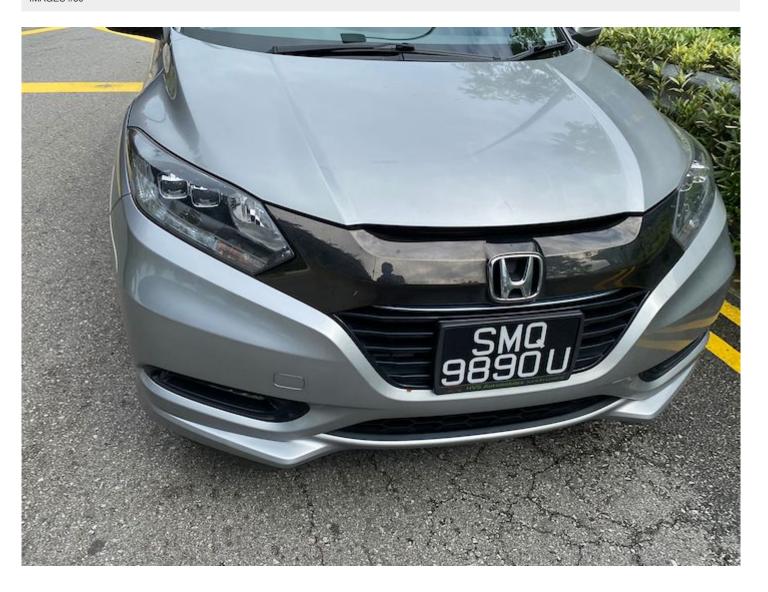




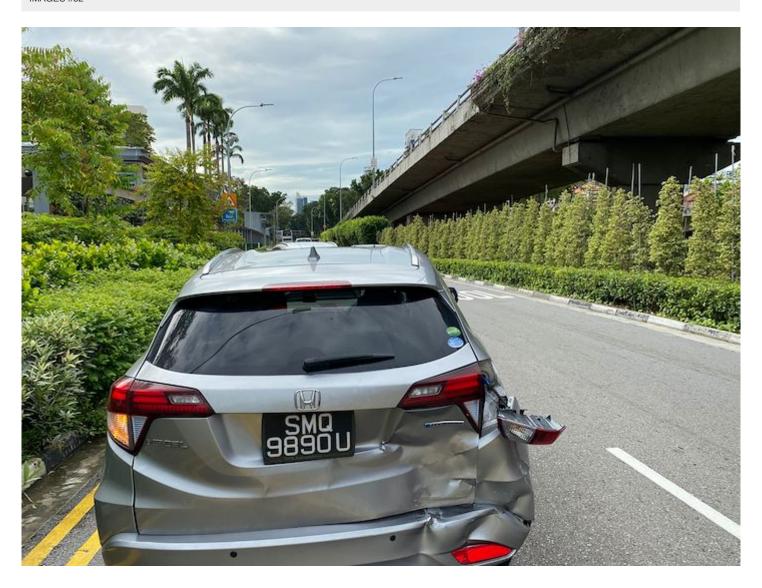


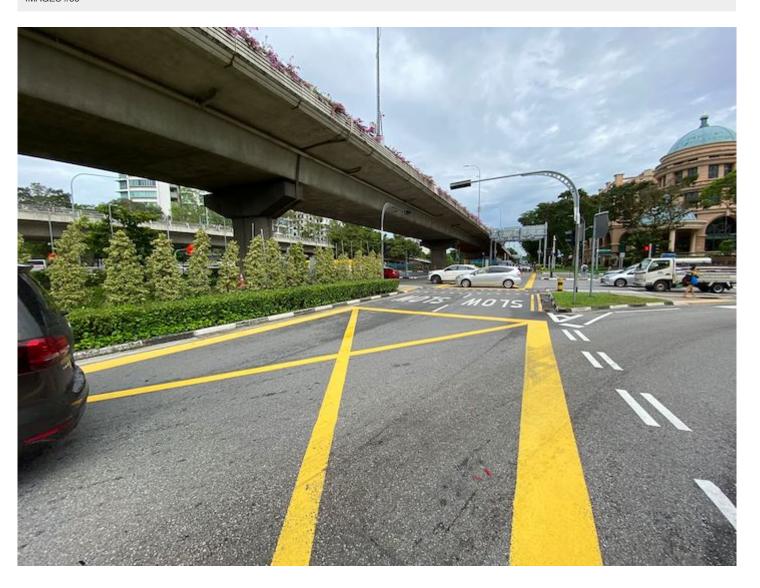


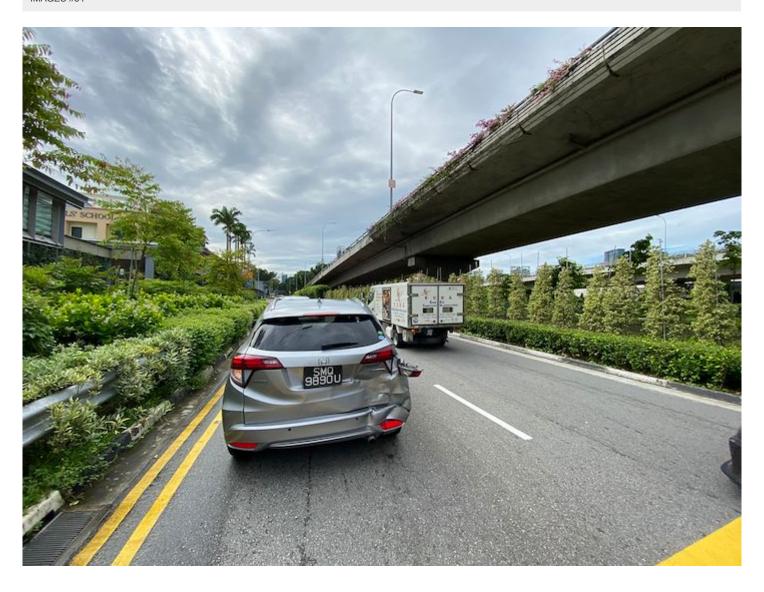














T/20210825/2063

2 of 3 Report No. T/20210825/2063

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE

208678 Tel No: 1800-2949999

### CONTINUATION OF REPORT

D	MANUFACTURE DE LA COMPANION DE	CONTRACT LABOR	SHEET MANUAL PROPERTY.	C BAS AND	BA BAL	TO THE STATE OF TH	
Driver Name	RIDUAN BIN CHUMADI		ID No.		S7735923J		
Related Vehicle	SMQ9890U (Car)			Contact No.		93583588	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disch	narge	NIL		
No. of Days granted Medical Leave NIL			Degree of Injury NIL				
Driver							
Name	MOHAMMAD AASHIQ BIN OMAR		3	ID No.		S8927917H	
Related Vehicle	SMR5531C (Car)		Contact No.		96214518		
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 3A Date of Expiry: NIL	
Date Treatment	NIL		Date Disch	ate Discharge NIL			
No. of Days granted Medical Leave NIL			Degree of Injury NIL				

### Brief Details.

On 25/08/21 at about 0957hrs, I was driving my car (SMR5531C, Silver Mercedes Benz GLA180) along Whitley Road. When my car was driving along the slip road towards Dunearn Road, I was looking out for the vehicles coming from the right as it was a filter lane towards Dunearn Road. However, I did not notice that the car (SMQ9890U, Silver Honda Vezel) that was infront of me have come to a stop. As such, my Mercedes Benz hit into the rear or the Honda Vezel.

There was no passenger with me however there was one passenger excluding the driver inside the Honda Vezel. No one was injured.

I then made a check on my car and realized that the left chrome fitting, left bumper, left headlight, left fog light was damaged.

The Honda Vezel's rear right was damaged.

I have a in car camera,

No police or ambulance came. However, I was informed by the Honda Vezel driver that traffic police and ambulance came after I left.



Police Station Of Origin: Rochor N.P.C

11 Kampong Kapor Road SINGAPORE 208678

Tel No: 1800-2949999

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Station Diary No.: Vide Report No.: 25/08/2021 13:57

	021 13:57			58		
Informa	nt's Partic	ulars				
MOHAMMAD AASHIQ BIN OMAR		HIQ BIN OMAR	Address: APT BLK 429 JURONG WEST AVENUE 1 #04-322 SINGAPORE 640429			
NRIC N	/ ID No.: D / S89279	17H	Contact No.: Home/Office:	Mobile: 96214518		
Nationality: SINGAPORE CITIZEN		EN	Email:			
Sex: Male	Age: 32	Date of Birth: 22/08/1989	Type of Informant:			
Race: Indian		E DED	Language: English	Institution / School Name:		
Occupation: MANAGER		PS UN DIEDECT	Driving Licence Information: Class: 3A	Date of Expiry:		

General Inform	nation of the Accide	ent		NO STREET WAS TAKEN	
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 25/08/2021 09:55	Type of Location: Y-Junction	
Location: WHITLEY RO	AD	Road Surface:		Road Speed Limit:	
Weather: Clear		Wet	THE PERSON NAMED IN		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collisi	on: ng Vehicles - Head 1	Го Rear		Anyone conveyed by ambulance:	

Details of V	ehicle Invo	Ived	Model	Color		7 -2000
		Make	Model	COIO	Condition	No of Passenge
Vehicle No. SMQ9890U		HONDA	Vezel	Silver	Slightly Damaged	1
SMR5531C		MERCEDES BENZ	GLA180	Silver	Slightly Damaged	0

Details of Person Involved: No	
Any Pedestrian Involved: No Any Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA
Any Pedestrian Injured: NIL	Crossing: NA

Report No. T/20210825/2063

