

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 10/09/2021 13:05 (SGT) Date of Accident 10/09/2021 09:07 (SGT) Exact Location of Accident Near 207 Clementi Ave 6, Singapore BLK 206 CLEMENTI AVENUE 6 TOWARDS COMMONWEALTH Additional Location Information AVE WEST (CARPARK) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJN5558H

Manufacturer

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SHANKAR GANESH S/O BALAKRISHNA NRIC No SXXXX703Z Email Address SILENCER2005@HOTMAIL.COM Mobile Phone No (Phone) +65-81118711 Alternative Phone No +65-81118711

VEHICLE PARTICULARS

Hyundai Model Avante 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 - Claiming third party Vehicle Category Private car Transmission Auto CC 1600

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number MT/00917581 Cover Note Number

DRIVER

Name of Driver SHANKAR GANESH S/O BALAKRISHNA NRIC No SXXXX703Z Date Of Birth 25/04/1990 Occupation Indoor Date Of Driving Pass 29/04/2019 Driving experience 2 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-81118711 Alt. Phone Number +65-81118711 Email Address SILENCER2005@HOTMAIL.COM Address APT BLK 202 CLEMENTI AVENUE 6 Address complement #06-59 Postcode 120202 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No 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 - Major/Minor Rd 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 vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? PASSENGER 1 Name **BHAVANI** Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE SKETCH PLAN FOR ACCIDENT DETAIL. 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 PC2871J Vehicle Manufacturer

Vehicle Variant
Vehicle Colour

Vehicle Model

Vehicle Category	Bus
Name of Driver	ABDUL RAHMAN BIN GANI
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

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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 <u>repudiate policy liability</u>.
- 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.
- 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.
- 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' law yers/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 "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

VEH A: SJN5658H VEH R: PC2871J

BLK 206 CLEMENTI AVE 6

TOWARDS COMMONWEALTH AVE WEST

(CARPARK)

Describe	Circumstances	of the	Accident

On 10 Sep 2021 at about 9.07am I was driving my vehicle A
3JN5558H along BIK 206 Clementi Carpark towards
Commonwealth Ave W.
I was proceeding straight when suddenly a Vehicle B PC2871J
collided onto my rear right side of my car. I alighted from
my car with my handbrake on. The driver immediately reversed
and proceed forward to parts his vehicle. I also parked my
vehicle in order to not cause inconvenience to other road users.
We then exchanged pictures of our NAIC and driving licence.
Driver of Vehicle B mentioned to proceed with an insurance claim
and he made his way off immediately.

Declaration

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

Med 10/9/21

Policyholder's Signature / Date &

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

DIORS OF THE PARTY OF THE PARTY

Witnessed by Reporting Centre





















Contact us at

Hotline: (65) 6532 2888 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. MT/00917581

Type of Coverage / Driver Plan Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. SJN5558H

KMHDU41BR9U648915 Chassis No.

2) Name of Policy Holder SHANKAR GANESH SO BALAKRISHNA

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act 22/04/2021 00:00

4) Date/Time of Expiry of Insurance : 21/04/2022 23:59

- 5) Persons or Classes of Persons Entitled to Drive
 - (a) Any named person under the policy who is driving on the Policyholder's permission.
 - (b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.

'Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Market Value Sum Insured Own Damage Excess \$\$ 800.00 Windscreen Excess S\$ 100.00

Choice of workshop DirectAsia approved workshops

Finance company / Hire Purchase

Main driver SHANKAR GANESH SO BALAKRISHNA

Ref	Named Driver
Named driver (1)	THEVAGI D/O SILVARAJOO

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

Company Registration, 200822611G

Direct Asia Insurance (Singapore) Pte Ltd 20 Anson Road #08-01 Twenty Anson Singapore 079912 www.DirectAsia.com



Contact us at Hotline: (65) 6532 2888 E-mail: CustomerService@DirectAsia.com

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on:

22/06/2021

Direct Asia Insurance (Singapore) Pte. Ltd.

Underwriting Manager

Direct Asia Insurance (Singapore) Pte Ltd 20 Anson Road #08-01 Twenty Anson Singapore 079912 www.DirectAsia.com