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 29/12/2021 10:58 (SGT) Date of Accident 28/12/2021 13:50 (SGT) Exact Location of Accident Yishun Central, Singapore Additional Location Information ALONG YISHUN CENTRAL Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

1496

Vehicle Registration Number SI R5696Y

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner POPULAR RENT A CAR PTE LTD Passport No/FIN 199608195Z Email Address info@popularcar.com Mobile Phone No (Phone) +65-84381094 Alternative Phone No (Office) +65-67428888

VEHICLE PARTICULARS

Manufacturer Honda Model Shuttle Variant **HYBRID 1.5 AUTO** 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 Transmission Auto

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Yes Policy Number 999994047 Cover Note Number

DRIVER

CC

Name of Driver KRUSZYNSKI MICHAEL MAREK Passport No/FIN G4548645T

Data Of Pints	
Date Of Birth	09/11/1985
Occupation	Indoor
Date Of Driving Pass	21/09/2021
Driving experience	3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84381094
Alt. Phone Number	- -
Email Address	info@popularcar.com
Address	260 CANADA ROAD
Address complement	-
Postcode	759792
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	NO
Tomolo Regionation Humber of Other Politice Office by Enver	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Callinian Majar/Minar Dd
Weather Conditions	Collision - Major/Minor Rd
	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any favoir washing involved in the applicant?	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	4
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
PASSENGER 1	
Name	SON
Gender	Male
	maio
PASSENGER 2	
Name	WIFE
Gender	Female
	Tonidio
PASSENGER 3	
Name	DAUGHTER
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-
n 700, againet mioni.	-

ON 28/12/21 AT ABT 1350HRS I WAS TRAVELLING ALONG YISHUN CENTRAL.

I WAS MAKING A TURN FROM "YISHUN CENTRAL SERVICE RD" INTO YISHUN CENTRAL & HEAVY TRAFFIC. I WAS AMONGST A NUMBER OF CARS MAKING THE LEFT TURN INTO THE ROAD. THE TRAFFIC WAS MOVING SLOWLY AND I WAS LOOKING FOR A GAP IN THE TRAFFIC. I FOUND ONE AND WAS SLOWLY MAKING THE TURN, WAITING FOR TRAFFIC TO START MOVING SO THAT I COULD COMPLETE THE TURN. THE DRIVER WITH WHOM I HAD THE ACCIDENT DID NOT SEE ME AND MOVED FORWARD WHEN THE LIGHT TURNED GREEN. HE HIT ME AT THIS POINT.

ATTACHMENT(S)

CIRCUMSTANCES OF ACCIDENT

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLK460E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
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

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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.
- 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 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)
 - 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:
 - 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.:

GIARMC SketchPlanForm_V3

KETCH PLAN	T.	
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ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
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DECLARATION		
/We declare the foregoing parti	iculars are true in every respect.	
	iculars are true in every respect.	Λ
DECLARATION /We declare the foregoing parti	iculars are true in every respect.	<u>)</u> .
/We declare the foregoing parti	iculars are true in every respect. Aund April Driver's Signature	Reporting Centre Bersonnel's Signature
/We declare the foregoing parti	Sully 2	Reporting Centre Bersonnel's Signature Name: NRIC/FIN No.:



HOTLINE TEL: (65) 6419-3000 FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE.

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA), Road Transport (Amendment) Act 2019

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR CERTIFICATE NO. SLR5696Y

CERTIFICATE NO. POLICY NO.

2) NAME OF INSURED

999994047

POLICY EXCESS
POLICY EXCESS

WINDSCREEN EXCESS SUM INSURED S\$3000.00 (II) S\$100.00 Market Value

S\$3000.00 (I)

INSURING WITH COE/PARF Yes

(The below excess is subject to GST)

SLR5696Y

Popular Rent A Car Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE

FOR THE PURPOSES OF THE ACT 4) DATE OF EXPIRY OF INSURANCE

1) VEHICLE REGISTRATION NO.

01 August 2020 31 July 2021

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any Person who is driving on the Insured's Order or with their permission

Authorised Drivers must be age within 23 to 65 years old with at least 2 years relevant driving experience.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

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 insured
- Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Applicable

HIRE PURCHASE COMPANY

N.A.

*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, 1987 (Malaysia), 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), Road Transport (Amendment) Act 2019

Issued in Singapore 03 Aug 2020

000064-000 Direct Clients 78 Shenton Way #07-16 SINGAPORE 079120 AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPIUS

ORIGINAL

















