### 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 <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.
- $\label{eq:continuous} 5. \ \underline{\text{Any false reporting may be referred to the Police for investigation.}}$
- 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.

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	ACCIDENT STATEMENT
Date Of Report	14/08/2020 14:52
Date Of Accident	13/08/2020 21:45
Exact Location Of Accident	HOUGANG ST 21 OSCP
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLM8130U
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD FIRDAUZ BIN MOHAMED SALLEH
NRIC No	
Email Address	
Mobile Phone No	(LOCAL) +
Alternative Phone No	OTHERS
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO K3-1.6 SUNROOF (A)
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00754205
Cover Note Number	11/1/2020 - 10/01/2021
Driver	
Name of Driver	MUHAMMAD FIRDAUZ BIN MOHAMED SALLEH
NRIC No	
Date Of Birth	
Occupation	INDOOR
Date Of Driving Pass	
Gender	MALE
Mobile Number	(LOCAL)
Fax Number	
Contact Number	OTHERS-

.COM

Address

′

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

2

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

PUNGGOL N.P.C

TEL NO: - FAX NO:

Police Station Address

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

**SINGAPORE** 

Was notice of intended Prosecution given?

NO

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If Yes, against whom?

Police Station Contact

Circumstances of Accident

REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO

NO

D. .. .

Name

**Details of Witness 1** 

UNKNOWN

Phone Number

**Email Address** 

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SLT6410M

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Page 2 of 22

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **SKETCH PLAN**

### **IMPORTANT NOTICE**

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- 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.
- 7. 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:
  - (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' 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:

CHRPGET) Date of accident: 13 · 8 · 2020 Time: 2145 Location: HOUGANG ST 21 ( HGHG25)

My Vehicle A: SLM 8130 U Vehicle B: SLT 6410 M Vehicle C: SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT REFER TO POLICE REPORT ☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only Remarks: Please forward a copy of my efile accident report to: My workshop: Email address : & myself Email address : Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information. **DECLARATION** I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Driver's Signature

Date & Time:

(If driver is not the policyholder)

/ ersonnel's Signature

AH LIM MOTOR COMPANY

Name:

NRIC/FIN No.:





Police Station Of Origin: Punggol N.P.C 21A Tehing Lane SINGAPO

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

**HOUGANG STREET 21** 

Weather:

One Way

Traffic Flow:

Type of Collision:

Clear

1 of 3 Report No. T/20200813/2137

Road Speed Limit:

Anyone conveyed by

Traffic Volume:

Light

REPORT OF A TR	RAFFIC	ACCIDENT						
Date/Time Report Made: 13/08/2020 23:33			Vide Report No.:				Station Diary No.: 88	
Informant's P	articul	ars						
Name of Inform			Addres	ss:				
MUHAMMAD I MOHAMED SA								
ID Type / ID No	0.:		Contac					
NRIC NO /			Home/	Office:		Mobile		
Nationality: SINGAPORE CITIZEN		Email:	Email:					
Sex: Ac Male	ie:	Date of Birth:	Type of Driver	of Informant	•			
Race: Boyanese			Language: Institution English			Institution /	School Name:	
Occupation:			Driving	g Licence Ir	formation:			
MANUFACTURING SUPERVISOR			Class: 2B,3 Date			Date of Ex	te of Expiry:	
General Inform	ation	of the Accident						
Type of Accident:		on-Injury and Run		Drink Drive: No	Date/Tir Acciden 13/08/20		Type of Location: Car Park	
Location:							***************************************	

Moving Vehicle Against - Parked Vehicle						ambulance:		
Details of V	ehicle Invo	lved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
SLM8130U	Car	KIA	CERATO K3 1.6A SUNROOF	Grey	Slightly Damaged	3		
SLT6410M		,				0		

Road Surface:

Traffic Control:

Not Controlled

Dry

Details of Vehicle Insurance
Details of vehicle insurance
MALE ALL ALL ALL ALL ALL ALL ALL ALL ALL
Vehicle No.         Insurance Company         Insurance No         Effective         Expiry Date
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Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 3 Report No. T/20200813/2137

### CONTINUATION OF REPORT

Details of Ve	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLM8130U	DIRECT ASIA INSURANCE	MT/00754205	13/01/2020	10/01/2021
	(SINGAPORE) PTE. LTD.			

Details of Perso	n Involved							
Any Pedestrian I	nvolved: No					WA .		
No. of Pedestriar	ns Injured: NIL		Use of Pe	of Pedestrian Crossing: NA				
Driver								
Name	MUHAMMAD FIRDA SALLEH	UZ BIN MOH	HAMED	ID No	•			
Related Vehicle	SLM8130U (Car)			Conta	ict No.			
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 2B,3 Date of Expiry: NIL		
Date Treatment	NIL Date Dis			charge	NIL			
No. of Days granted Medical Leave NIL			Degree o		NIL			

### Brief Details.

On 13/08/2020 at about 2115hrs, I parked my car, SLM8130U at the open carpark, HGHG25 beside Heartland Mall. Everything was intact and nothing amiss.

On the same day at about 2145hrs, while I came back to retrieve my car, a male Chinese in his 30s, hp: 91831938 approached me and informed me that he witness a car, SLT6410M have collided into my front driver side bumper when the car was reversing out of it lots. However, the driver did not assess the damaged and just drove off. The said male Chinese then passed me a piece of paper containing the said car plate number and his contact number.

I wish to state that I do not have an in - car camera installed in my car.





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 3 of 3 Report No. T/20200813/2137

CONTINUATION OF REPORT

# Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Repor	t:   Signature Of Informant:
F / Sr Staff Sgt MUHAMMAD FARID BIN KAN	nis 7
Signature Of Interpreter: Not applicable	Date/Time: 13/08/2020 23:33
Officer In Charge Of Case:	Classification Of Case:
TP / HRT / Insp GOH GEOK LYE	SN 085
Contact No.: 65476148	
Authentication Stamp	nature:
Singapore F	'olice Force

SLT 6410\_

Honda CRV (New model)

I saw 7 Hit your car (on your front)

SGY3731P camera must have capture

my numbers



Contact us at

Hotline: (65) 6532 2888

CustomerService@DirectAsia.com E-mail:

## 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/00754205

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

1) Vehicle Registration No. SLM8130U

Chassis No. KNAFZ411MH5708126

2) Name of Policy Holder MOHAMED SALLEH, MUHAMMAD FIRDAUZ BIN

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act 11/01/2020 17:10

4) Date/Time of Expiry of Insurance 10/01/2021 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

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.

Sum Insured Market Value

Own Damage Excess S\$ 800.00 (before any applicable GST) Windscreen Excess S\$ 100.00 (before any applicable GST)

Choice of workshop DirectAsia approved workshops

Finance company / Hire Purchase STANDARD CHARTERED Main driver

MOHAMED SALLEH, MUHAMMAD FIRDAUZ BIN Named driver

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.

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: 11/01/2020 Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur (Chief Underwriting Officer)

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





















