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MMOV16148775 / Mova Automotive Pte Ltd - Bukit Merah ENTRY DATE & TIME: 25/11/2016 13:32

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 25/11/2016 13:48

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 ability.
- 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. This report will be forwarded by the insurers of 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 Report 25/11/2016 13:32 Date Of Accident 22/11/2016 14:00

GRANGE RD TWDS ORCHARD LINK RD **Exact Location Of Accident**

Country/State of Loss **SINGAPORE**

DETAILS OF OWN VEHICLE

SKG5974P Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner ASIA CAR RENTAL

Co Reg No 52882390J

Email Address KRISTINE@ASIACARRENTAL.COM.SG

Mobile Phone No

Alternative Phone No Office-62828585

Vehicle Particulars

Manufacturer SUBARU

Model LEGACY-2.5 GT WAGON (A)

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?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

Type Of Coverage **COMPREHENSIVE**

Fleet Policy YES

Policy Number 999995242/100759956

Cover Note Number

Driver

Name of Driver **KOSUGI TAKUYA** NRIC No G3147691M Date Of Birth 28/01/1979

Occupation **INDOOR** 06/07/2015 **Date Of Driving Pass**

1 YEAR AND 4 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-91189854 E-FILE Page 2 of 14

Fax Number

Contact Number

EMail Address KOSUGI@TAMURA.COM.SG

Address

Postcode

Was driver an employee of the Insured's

Company

NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

-

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident UNKNOWN - REFER TO SKETCH

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? NO

Was any other material or property damaged? YES

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

NO

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT.

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHF375S

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

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Phone Number Email Address E-FILE Page 4 of 14

Sketch Plan

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 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, acknow ledge, 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;
- (ii) 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

J-71, 760 25/NOV/2016

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

Witnessed by Reporting Centre 25 NOV 2013

Sketch Plan

B . TAX1-54F3755 Gronge Road

Describe Circumstances of the Accident	LICENSE PLATE NUMBER:
ACCIDENT DATE: 22/HOV /20/6	CONTACT NUMBER: 9118 9854
ACCIDENT TIME: 14:00	, EMAIL: KOSUGI & Tomura. cam.59
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1. The second se	
	SURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT
	IAGE CLAIM UNDER YOUR OWN POLICY.
PLEASE CHECK	YOUR POLICY FOR MORE INFORMATION.
Please state:	
() Claim Own Policy () Claim Third	Party /) Claim OD/TP at other workshop () Reporting Only

Declaration

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre Personnel

2 5 NOV 2013

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

M Z 400

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COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999995242/100759956-00000

INSURING WITH COE/PARF YES

1) VEHICLE REGISTRATION NO.

SKG5974P

2) NAME OF INSURED

ASIA CAR RENTAL

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 18 Oct 2016

4) DATE OF EXPIRY OF INSURANCE

17 Oct 2017

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the Insured's order or with their permission.

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 *

Use for the carriage of passengers or goods in connection with the Insured's business. Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. The Policy does not cover

1) Use for racing, pace-making, reliability trial or speed-testing.

Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

NAMED DRIVER N/A

HIRE PURCHASE COMPANY UNITED OVERSEAS BANK LTD

*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).

Issued At Singapore 1 Nov 2016

AIG ASIA PACIFIC INSURANCE PTE. LTD.

502806-000 LIEW OOI LIN MAY AIG BUILDING 78 SHENTON WAY #07-16 SINGAPORE 079120

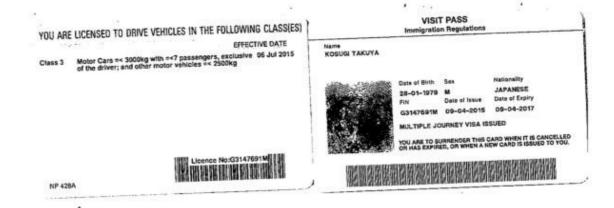
Authorised Representative

ORIGINAL

SSPESW

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