

ASS. REC BY: Marcus

REF:

CC6/A1G22003996/4903

ASSIGNMENT

From:

Date:

Veh No:

F3Q45144 Yr Regn: 08/10/19

Estimated Cost:

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

Truck / Trailer or

ADR

To Inspect Vehicle No:

Make:

Yamaha Aerox c.c 155

at Workshop m/s

Colour:

31ecl

A/C: Insured / Std / NI / NA

of

Sp. Reading

20391

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

Modi: Nil / S/Rim / STD A/Rim or

(Policy Condition)

Tyre Size:

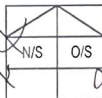
F:

110 / 60 - 14

R:

140 / 70 - 14

Remark: The veh had commenced its repair at the time of inspection.



BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Pirelli

Front

Rear

Bal. or Market Value:

\$9000

IDAC Accident Report:

Consistent? : Yes or No

R/Bal.

7 mm

R/Bal.

7 mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

mm

L/Bal.

mm

Est. Repairs:

days

Res.: Yes or No

D.O.A.

24/04/22

D.O.I.

28/04/22

Lum Sum:

%

3 Val.: Yes or No

Survey held at

CA / REV / REP. / 24 HRS

1976

Vehicle: IN / OUT

Date:

Person Contacted:

LYA 3042

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S Rear & N/S Body

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction Rep 1400

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

) \$ + RS \$

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

☐

: Weekend (\$

)

Report Format :

Lump Sum / I.B.I: (\$

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 197G

Vehicle Details

Vehicle No.: FBQ4514U

Vehicle to be Exported: No

Intended Deregistration Date: 28 Apr 2022

Vehicle Make: YAMAHA

Vehicle Model: AEROX GDR155A CVT ABS

Primary Colour: Black

Manufacturing Year: 2019

Engine No.: G3J8E0104998

Chassis No.: MH3SG4640KJ055985

Maximum Power Output: -

Open Market Value: \$2,688.00

Original Registration Date: 08 Oct 2019

First Registration Date: 08 Oct 2019

Transfer Count: 1

Actual ARF Paid: \$404.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 07 Oct 2029

COE Category: D - Motorcycle

COE Period(Years): 10

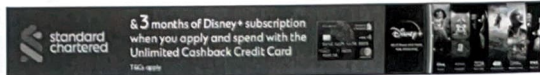
QP Paid: \$4,089.00

COE Rebate Amount: \$3,042.00

Total Rebate Amount: \$3,042.00

The information contained herein is correct as at 28 Apr 2022

OK



Bike model	Type Of Vehicle	Price From	Price To	Class
yamaha aerox	Any <input checked="" type="checkbox"/>	Any <input checked="" type="checkbox"/>	Any <input checked="" type="checkbox"/>	Any <input checked="" type="checkbox"/>



Sort By

Sort By

Recommended ☒

Yamaha Aerox 155

Reg Date 29/11/2019 Capacity 155cc
Vehicle Type Scooters Mileage -

Posted on: 18/04/2022

SGD \$9300

★ Paid Ad

★ Dealer Ad

[Details >](#)

Yamaha Aerox 155

Reg Date 09/03/2020 Capacity 155cc
Vehicle Type Scooters Mileage 55300km

Posted on: 18/04/2022

SGD \$10388

★ Paid Ad

★ Dealer Ad

[Details >](#)

Yamaha Aerox 155

Reg Date 17/01/2019 Capacity 155cc
Vehicle Type Scooters Mileage 30093km

Posted on: 20/04/2022

SGD \$12500

★ Paid Ad

★ Dealer Ad

[Details >](#)

Yamaha Aerox 155

Reg Date 05/09/2019 Capacity 155cc
Vehicle Type Scooters Mileage 13146km

Posted on: 23/04/2022

SGD \$10388

★ Paid Ad

★ Dealer Ad

[Details >](#)

Yamaha Aerox 155

Reg Date 21/02/2020 Capacity 155cc
Vehicle Type Scooters Mileage 22500km

Posted on: 21/04/2022

SGD \$11388

★ Paid Ad

★ Dealer Ad

[Details >](#)

Yamaha Aerox 155

Reg Date 13/01/2021 Capacity 155cc
Vehicle Type Scooters Mileage 20000km

Posted on: 21/04/2022

SGD \$10800

★ Paid Ad

★ Dealer Ad

[Details >](#)

Yamaha Aerox 155

Bike Gadgets

- Number Plates for Sale
- Installment Calculator
- Instant Insurance Quote

COE Results

Rd 2, 20 Apr 2022 **CAT D**
COE Bidding of Motorcycles **\$9801**



www.sgbikemart.com.sg
17 hours ago

Owner's Low Mileage Ducati Diavel With Side Panniers!
<https://sgbikemart.com.sg/> /use/
/ducati-ducatti-diavel/18496/

BIKE RECOVERY SERVICE

HP: 8298 6622

Business Reg. No: 201216510M

CASH SALE

NO: 02394

Date: 26/4/22

Particular: _____

Vehicle No: FBA A14 U Model No: AEROK

From: T.P. Round To NTUC IROME To: EROFIA

Time: (Day/Night): _____

Others: _____

CASH \$: 501

NOTE: Vehicle is towed at owner's risk. The Company accepts no responsibility for damages or others misdemeanour to your vehicle while being towed.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 197G

Vehicle Details

Vehicle No.: FBQ4514U

Vehicle to be Exported: No

Intended Deregistration Date: 26 Apr 2022

Vehicle Make: YAMAHA

Vehicle Model: AEROX GDR155A CVT ABS

Primary Colour: Black

Manufacturing Year: 2019

Engine No.: G3J8E0104998

Chassis No.: MH35G4640KJ055985

Maximum Power Output: -

Open Market Value: \$2,688.00

Original Registration Date: 08 Oct 2019

First Registration Date: 08 Oct 2019

Transfer Count: 1

Actual ARF Paid: \$404.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 07 Oct 2029

COE Category: D - Motorcycle

COE Period(Years): 10

QP Paid: \$4,089.00

COE Rebate Amount: \$3,044.00

Total Rebate Amount: \$3,044.00

The information contained herein is correct as at 26 Apr 2022

OK



SINGAPORE POLICE FORCE



T/20220424/2086

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

1 of 3

Report No. T/20220424/2086

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/04/2022 22:32		Vide Report No.: G/20220424/0093		Station Diary No.: 53	
Informant's Particulars					
Name of Informant: AKIF BIN SAMSODIN			Address: APT BLK 10 CHAI CHEE ROAD #03-09 SINGAPORE 467010		
ID Type / ID No.: NRIC NO / S9810197G			Contact No.: Home/Office: Mobile: 93397475		
Nationality: SINGAPORE CITIZEN			Email: Akifsam24@hotmail.com		
Sex: Male	Age: 24	Date of Birth: 24/03/1998	Type of Informant: Rider		
Race: Javanese			Language: English		Institution / School Name:
Occupation: DELIVERY RIDER			Driving Licence Information: Class: 2B,2A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 24/04/2022 08:30	Type of Location: Straight Road
Location: UPPER EAST COAST ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBQ4514U	Motorcycle	YAMAHA	AEROX GDR155A CVT ABS	Black	Seriously Damaged	0
SJZ378E	Car	TOYOTA	HARRIER G GRADE	Silver	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBQ4514U	NTUC Income Insurance Co-Operative Limited	5119368343-01	08/10/2021	07/10/2022



**SINGAPORE
POLICE FORCE**



T/20220424/2086

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

2 of 3

Report No. T/20220424/2086

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	AKIF BIN SAMSODIN	ID No.	S9810197G
Related Vehicle	FBQ4514U (Motorcycle)	Contact No.	93397475
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A Date of Expiry: NIL
Date Treatment	24/04/2022	Date Discharge	24/04/2022
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

On 24/4/2022 at about 8.30am, I was riding my motorcycle bearing registration number FBQ4514U along Upper East Coast Road towards Bedok road, turning right into Rich East Condominium. I check my both my left and right and it was clear hence I was turning right into the condominium when I felt an impact on my right side. A car bearing registration number SJZ378E exiting from the condominium collided into my vehicle. The front of the car hit the right rear portion of my motorcycle. I fell with the motorcycle and the car was mounted onto my motorcycle. I managed to get away from my motorcycle. The driver and his passenger exited from the car and checked whether i require medical assistance. Someone called for the ambulance and subsequently ambulance and traffic police arrived.

There was a witness whom was driving came across the accident and sent me a video from her in-car camera via WhatsApp which I sent over to the traffic police. I was conveyed by ambulance conscious to Changi General Hospital and later discharged with 2 days MC. I sustained abrasion on my left leg from the accident.



**SINGAPORE
POLICE FORCE**



T/20220424/2086

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

3 of 3

Report No. T/20220424/2086

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 Report:

G /

SGT 3 AW JING YING CHLOE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/04/2022 22:32

Officer In Charge Of Case:

TP / GIT /

SI VILTON HIA WEE SIANG

Contact No.: 65476232

Classification Of Case:

NP168

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 (MALAYSIA)

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

Certificate Number : 5115368343 01 Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : FBQ4514U
Chassis Number : MH35G4640KJ055985
2. Name of Policyholder : AKIF BIN SAMSDIN
3. Effective Date of Insurance : 08 Oct 2021
4. Expiry Date of Insurance : 07 Oct 2022
5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

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. Limitations as to Use#
 - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.
 - (b) Use for food/parcel/other delivery services.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: AKIF BIN SAMSDIN
NAMED DRIVER (2)	: ALIF BIN SAMSDIN
HIRE PURCHASE COMPANY	: A.S. PHOON PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : A S PHOON PTE LTD (00000571911)
Date of Issue : 04 Oct 2021 13:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9810197G



Name

AKIF BIN SAMSODIN

Race

JAVANESE

Date of birth

24-03-1998

Country/Place of birth

SINGAPORE

Sex

M

S9810197G

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9810197G

Name

AKIF BIN SAMSODIN

Birth Date: 24 Mar 1998

Issue Date: 07 Dec 2015



002636484E

5203632



NRIC No S9810197G



Date of issue

05-08-2013

APT BLK 10 CHAI CHEE ROAD #03-09
SINGAPORE 467010

S9810197G

Date: 16/11/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 1B

Motorcycles — 200 CC

Class 1A

Motorcycles between 201 CC and 400 CC

07 Dec 2016

05 Feb 2018

5

S9810197G

S / No. 9000305232

NP 428A



Licence No: S9810197G



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 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 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	26/04/2022 12:22 (SGT)
Date of Accident	24/04/2022 08:30 (SGT)
Exact Location of Accident	Upper E Coast Rd, Singapore
Additional Location Information	UPPER EAST COAST RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBQ4514U
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AKIF BIN SAMSODIN
NRIC No	S9810197G
Email Address	AKIFSAM24@HOTMAIL.COM
Mobile Phone No	(Phone) +65-93397475
Alternative Phone No	+65-93397475

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	Aerox
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	Motorcycle
Transmission	Manual
CC	155

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Third Party
Fleet Policy	No
Policy Number	5119368343-01
Cover Note Number	-

DRIVER

Name of Driver	AKIF BIN SAMSODIN
NRIC No	S9810197G



Date Of Birth	24/03/1998
Occupation	Outdoor
Date Of Driving Pass	07/12/2016
Driving experience	5 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93397475
Alt. Phone Number	+65-93397475
Email Address	AKIFSAM24@HOTMAIL.COM
Address	10 CHAI CHEE RD
Address complement	#03-09
Postcode	467010
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002448999
Alt. Police Station Phone No	(Fax) +65-62446558
Police Station Address	20 Chai Chee Drive Singapore 469045
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	NOT AVAILABLE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJZ378E
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)	3

PASSENGER 1

Name	UNKNOWN
Gender	Female

PASSENGER 2

Name	UNKNOWN
Gender	Female

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	AKIF BIN SAMSODIN
Gender	Male
Phone No	(Phone) +65-93397475
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBQ4514U
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

IMP ORTANT NOTICE

1. This document is to be completed by the Policyholder and, if the Authorized Driver is not the Policyholder, by the Authorized Driver.
2. The information provided in this document should be truthful and accurate as possible.
3. The information provided in this document is for the purpose of policy liability.
4. The information provided in this document is for the purpose of policy liability.

Any false reporting may be referred to the Police for investigation.

5. By signing this document, the Policyholder and, if the Authorized Driver is not the Policyholder, the Authorized Driver, hereby agree to the following:
 - (a) To provide the information requested in this document to the Insurers and their 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
 - (b) To provide the information requested in this document to the Insurers and their 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

Consent under the Personal Data Protection Act (PDPA) (understand and acknowledge, agree and consent)

- (a) My 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
- (b) My 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 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
- (d) My 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
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- (m) My 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
- (n) My 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
- (o) My 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
- (p) My 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
- (q) My 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
- (r) My 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
- (s) My 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
- (t) My 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
- (u) My 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
- (v) My 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
- (w) My 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
- (x) My 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
- (y) My 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
- (z) My 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

Policyholder's Signature Date
& Time

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

Reporting Centre Personnel's Signature
Name
NOC/PPN No

SKETCH PLAN

A - FRIGERIGU

B - SJ2878E

Loss Rich

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report

* Kindly take note that you have 14 days to revert to Own Insurance Claim (own damage).

Claim OD / TP At Falcon-Air

Claim OD / TP Own W/shop

Reporting Only

DECLARATION

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

Policyholder's Signature Date & Time

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

Reporting Centre Personnel's Signature Name & Mobile No