

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	27/06/2022 17:55 (SGT)
Reported by	Both
Date of Accident	27/06/2022 09:00 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TWDS TUAS BEFORE EUNOS EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNF1838X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ISMA BINTE ABDUL KADIR
NRIC No	S8537995Z
Email Address	isma.akj@gmail.com
Mobile Phone No	(Phone) +65-88177998
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Cla180
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01006871

DRIVER

Name of Driver	ISMA BINTE ABDUL KADIR
NRIC No	S8537995Z
Date Of Birth	26/09/1985
Occupation	Indoor

Date Of Driving Pass	01/04/2010
Driving experience	12 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-88177998
Alt. Phone Number	-
Email Address	isma.akj@gmail.com
Address	BLK 2 JALAN TIGA RATUS #01-07
Address complement	-
Postcode	488067
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 - Head to Rear
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?	No
Was any injured conveyed to hospital by ambulance?	-
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

FRONT VEHICLE SUDDENLY STOP. I CANNOT STOP IN TIME AND HIT VEHICLE B REAR PORTION.

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	SJL6752S
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	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

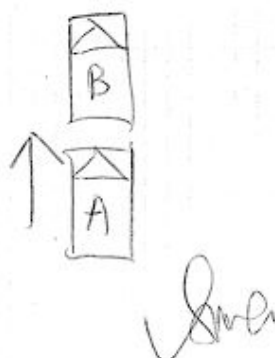
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or 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.

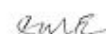

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan





Describe Circumstances of the Accident

front veh suddenly stop, & cannot stop intenal
A hit veh B rear portion.

[Signature]

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]
Policyholder's Signature / Date &
Time

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

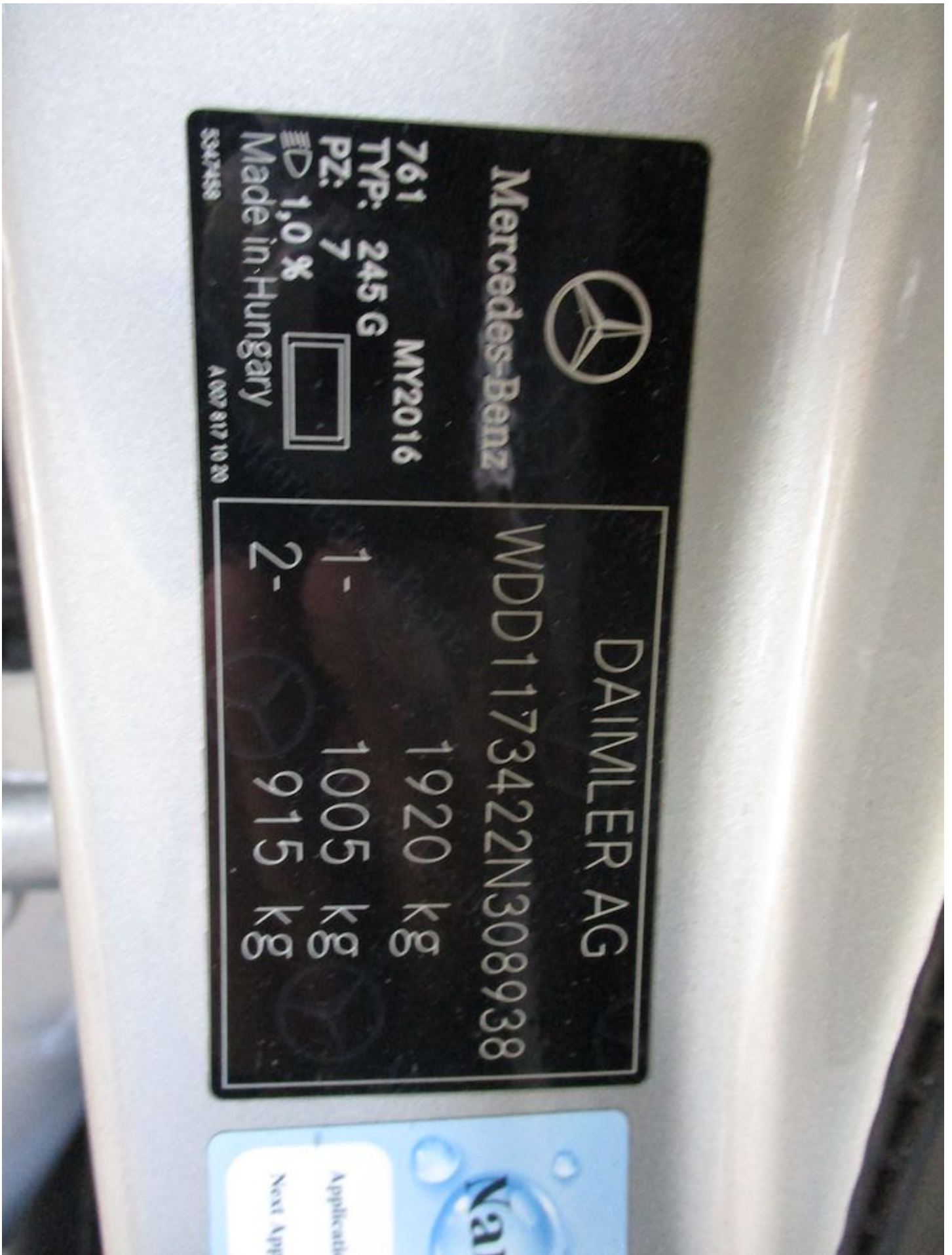
Witnessed by Reporting Centre
Personnel









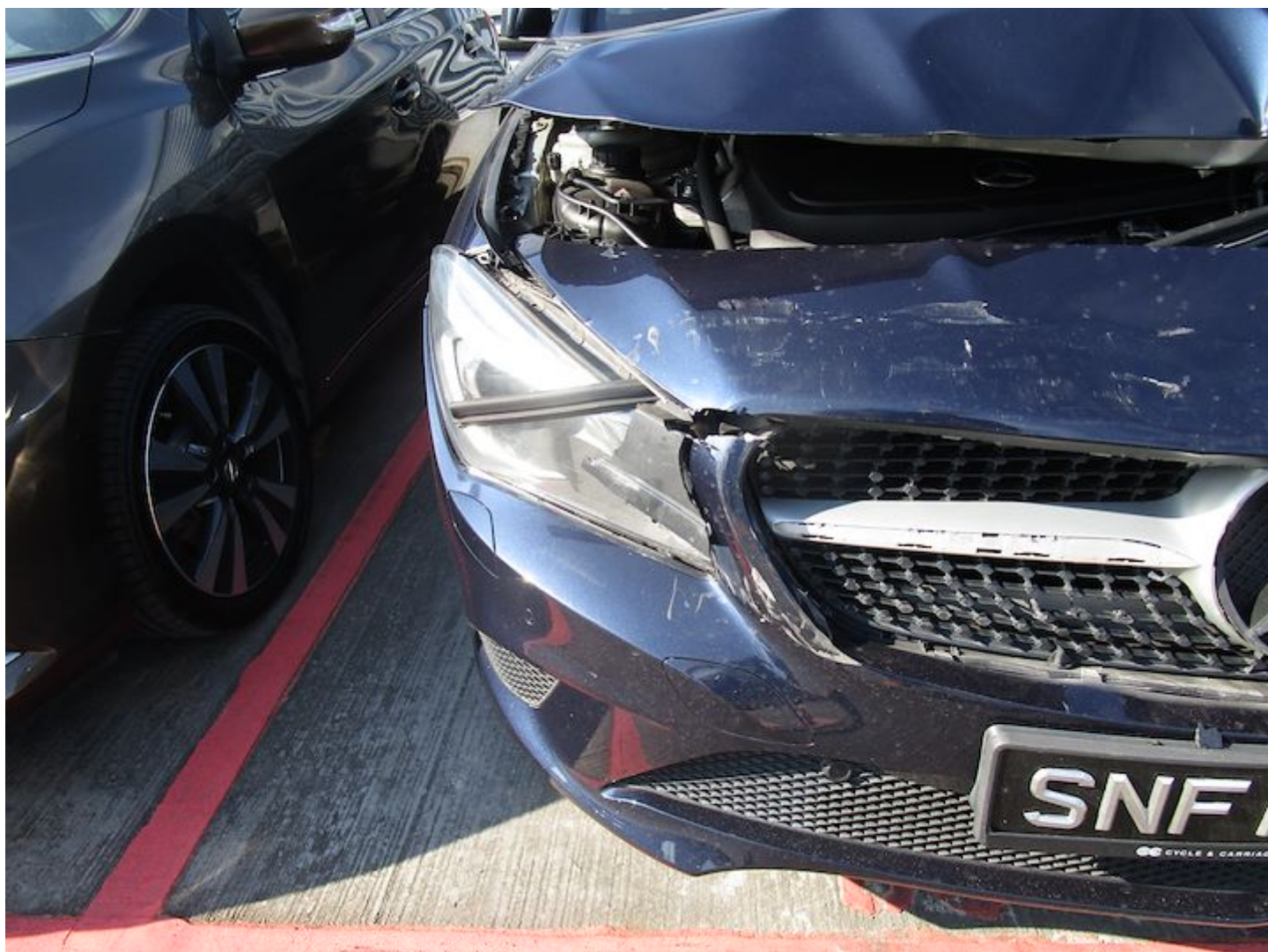














Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #03-03
Singapore Land Tower, Singapore 048623
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Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

PRIVATE CAR POLICY SCHEDULE

Intermediary Code : 11104805

Policy No. : D22MTPV01006871

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the PRIVATE CAR Policy wordings, ref. MTP.30

Insured : ISMA BINTE ABDUL KADIR MRS SEENEVASEN VISWANADEN
Address : 2 JALAN TIGA RATUS
#01-07
SINGAPORE 488067
Business/Profession : INDOOR

INSURED DETAILS

Date of Birth & Age : 26 SEP 1985 & 36 years old
Driving Experience in Singapore : 12 years
Identification Type : NRIC(Singaporean)
Marital Status : MARRIED
Gender : Female
Identification No. : S8537995Z

Period of Insurance : 20 APRIL 2022 13:47 TO 19 APRIL 2023 23:59

Persons or Classes of Persons entitled to drive : Refer to Certificate of Insurance

Limitations as to use : Refer to Certificate of Insurance

VEHICLE DETAILS

Vehicle Registration No. : SNF1838X
Chassis No. : WDD1173422N308938
Engine No. : 27091030848207
Vehicle Make & Model : MERCEDES BENZ CLA180 1.6
Engine Capacity : 1600
NCD Entitlement : 30%
Year of Registration : 2016
NCD Protection : Yes
Estimated value of Vehicle : Market value at time of loss
Hire Purchase Owner : HL BANK

PREMIUM DETAILS

Premium after applicable discount(s) : S\$ 926.15
GST : S\$ 64.83
Premium (incl. GST) : S\$ 990.98

Coverage : Comprehensive - ExcelDrive GOLD
Excess : \$ 500 - Section I

Voluntary Excess : N.A

Additional Excess :
Named Young and/or Inexperienced Drivers : S\$1,500
Un-named Young and/or Inexperienced Drivers : S\$3,000
Un-named All Other Drivers : S\$500

"Young Drivers" shall be defined as drivers (including the Insured) who are below 27 years old.
"Inexperienced Drivers" shall be defined as drivers (including the Insured) who have less than 1 year of driving experience in Singapore roads.

Windscreen Excess : S\$100.00 for each and every applicable claim.

Endorsements Applicable :
Endorsement AA2 - ExcelDrive Gold Plan
Endorsement D1 - Young and/or Inexperienced Drivers
Endorsement E - Excess Clause
Endorsement H - Total Loss
Endorsement L - Hire Purchase
Endorsement M - Inclusion Of Special Perils
Endorsement P6 - Riot And Strike Endorsement
Endorsement V - No Claim Discount Protection
Endorsement Z - Loss of Use Benefit

Special Clauses/ Conditions/Memo : SPECIAL RENEWAL ARRANGEMENT

It is hereby noted and agreed that this Policy is issued under Scheme arrangement and change of servicing