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 22/07/2022 17:08 (SGT) Reported by Driver Date of Accident 21/07/2022 18:25 (SGT) Exact Location of Accident Upper Bukit Timah Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Vehicle Registration Number **SLA9626M**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner POPULAR RENT A CAR PTE LTD Company Reg No 199608195Z Email Address REPORTING@AUTOINSURE.COM.SG Mobile Phone No (Phone) +65-90704826 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Hyundai Model Accent Variant (RB) 1.4 CVT ABS D/AIRBAG 2WD

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

No - Reporting only your vehicle? Vehicle Category Private car Transmission Auto CC 1368

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1210000162

DRIVER

Name of Driver **CHUA HONGYAO** NRIC No S8506479G Date Of Birth 14/03/1985 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	22/09/2006 15 YEARS AND 10 MONTHS Male (Phone) +65-90704826 - REPORTING@AUTOINSURE.COM.SG 35 HUME AVE #09-01 - 598735 No Hirer No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface OTHER INFORMATION	Collision - Head to Rear Clear Dry
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	- -
Name Gender	PASSENGER Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
ON 21 JULY 22 AT 1825PM, I WAS TRAVELLING ALONG UPPE VEHICLE B SUDDENLY BRAKE WHICH CAUSED MY VEHICLE JAM BRAKING.	ER BUKIT TIMAH ROAD, I WANTED TO FILTER LANE BUT TO BUMP INTO VEHICLE B AS I COULDN'T STOP IN TIME AFTER
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number 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)	-



CERTIFICATE OF INSURANCE

COMMERCIAL AUTO COMPREHENSIVE

Name of Individual Policyholder : POPULAR RENT A CAR PTE LTD

Master Policy No./Policy No. : 7990000001 / 1210000162

Period of Insurance : 01 Aug 2021 To 31 Jul 2022 Vehicle No. : SLA9626M

Engine No. : G4LCGU571699 Endorsement No.

Chassis No. : KMHCT41BTGU102426 Issued Date : 17 Sep 2021

ABOUT THE COVER

: HYUNDAI ACCENT 1.4 A Make/Model

Engine Capacity/Tonnage: 1368 CC Sum Insured : Market Value First Year of Registration Insuring with COE/PARF : Yes Driver Restriction : NA Off Peak Car 1 No

Person or Classes of Persons Entitled to Drive* :

Any person who is driving on the Policyholder's order or with their permission.
This Policy will indemnify the Policyholder or any authorised driver only if he'she meets the specified age condition.

: Driver Restriction applies-Refer to T&C Mileage Condition

Limitation as to use*

List middlOTLdts. IO USE: 1
Use for social, domestic, pleasure purposes and business purposes of the Policyholders.
Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired.
Use for the carriage of passengers or goods (other than for reward) by any person to whom the Vehicle is hired.
This Policy does not cover.
1) use for driving tastion, driving test, racing, pace-making, reliability that or speed-testing.
2) use whist drawing a trailer.
3) use for the towing of any one disabilid mechanically propelled vehicle.
4) use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired, and 5) use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189). Section 95 of the Road Transport Act. 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$3000 Theft - \$0 Food Cover - \$3000

Section 2 Property Damage - \$3000

Windscreen: \$100

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRES (FOR CLAIMS RELATED REPAIRS)

Arry accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).
For Approved Reporting Centres/MG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Attematively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

1) Authorised Drivers must be age within 21 to 70 years old with at least 1 year driving experience 2) Additional Excess \$500.00 applies to drivers age within 21 to 22 years old & or age within 68 to 70 years old 3) The age & driving experience does not apply to Drivers under AliG Auto Insurance Loss of Use (LOU) benefit activation. Additional Excess applies

Hire Purchase Company/Employer's Loan: MayBank

I/We hereby certify that the policy to which this Certificate of insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 15) Part IV of the Read Transport Act. 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0000064000

DIRECT CLIENTS 01.4.95

AIG Asia Pacific Insurance Pte, Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

SKETCH PLAN

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.
- 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.
- 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) 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:
 - 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

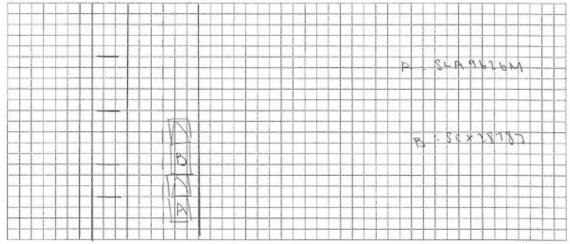
Name:

NRIC/FIN No.:

GIARMC SketchPlanForm_V3

1

SKETCH PLAN



DN 21 July	12 at 1825 pm	, I Was H	aveiling a	and upper	
Julit Timan	Load, I W	cinted to	tilter lar	e but yen	CIER
	is I conjunt			*	
				-	100 00
				(40)	
11.75	1				
				-803	
		0000-10			

DECLARATION

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

Policyholder's Signature Date & Time:

GIARMC SketchPlanForm_V3

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

2

















