SB0K22950003 / Borneo Motors Pte Ltd ENTRY DATE & TIME: 05/09/2022 09:03 (SGT) SUBMITTED BY: Ashlyn Chng VERSION: 1 (05/09/2022 09:03 (SGT))

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 Actual 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 05/09/2022 09:03 (SGT) Reported by Date of Accident 02/09/2022 10:55 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS CHANGI BEFORE TOA PAYOH EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Auto

1600

Vehicle Registration Number **SLH4087P**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner S SELVARAJU NRIC No SXXXX316D Email Address S.ARJUNKUMAR@GMAIL.COM Mobile Phone No (Phone) +65-96363178 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Toyota Model Corolla Variant 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? No - Claiming third party Vehicle Category Private car Transmission

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 2100488799-01

DRIVER

CC

Name of Driver S ARJUN KUMAR NRIC No SXXXX849I Date Of Birth 23/11/1999 Occupation Indoor



Date Of Driving Pass 20/08/2019 Driving experience 3 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-81124655 Alt. Phone Number Email Address S.ARJUNKUMAR@GMAIL.COM Address BLK 150 MEI LING ST #13-45 Address complement Postcode 141150 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο 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 Chain Collision Weather Conditions Clear Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement

PASSENGER 1

Name JEREMY TAN Gender Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Clementi Neighbourhood Police Post

(Phone) +65-18007759999

Alt. Police Station Phone No

(Fax) +65-67764246

Police Station Address

Blk 427 Clementi Avenue 3 #01-456 Singapore 120427

Was notice of intended Prosecution given?

No

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

WITH TP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM3518T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ONG CHEE HAO
NRIC No	SXXXX461I
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	QX2104T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SMN2887S
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)	-

SKETCH PLAN

IMPORTANT NOTICE

1 10 20

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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 maiting 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.

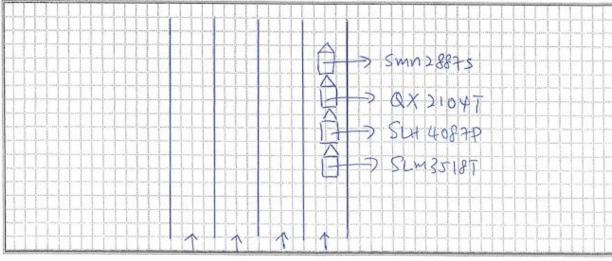
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Pany Wer Tot

Sketch Plan



PIE (chegi).

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Describe Circumstance of the Accident	Police	Report

Declaration

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

Policyholder's Signature / Date & Time

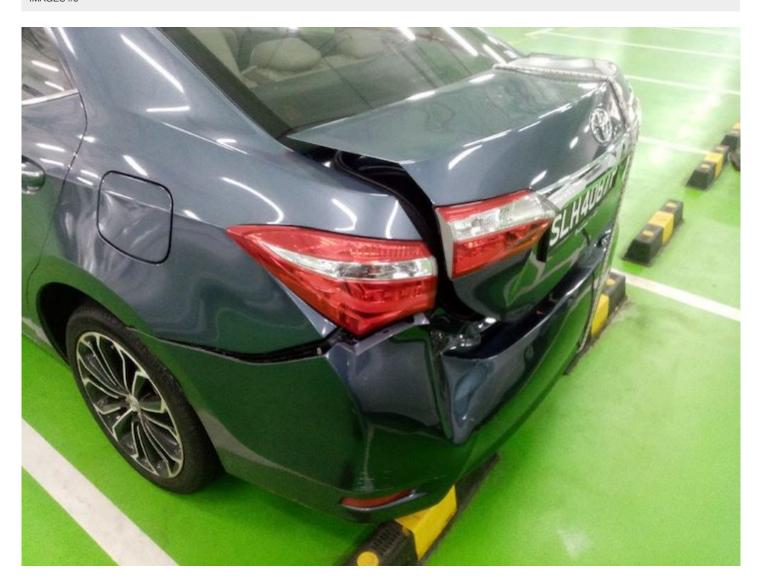
Driver's Signature (if driver is not the policyholder) / Date & Time

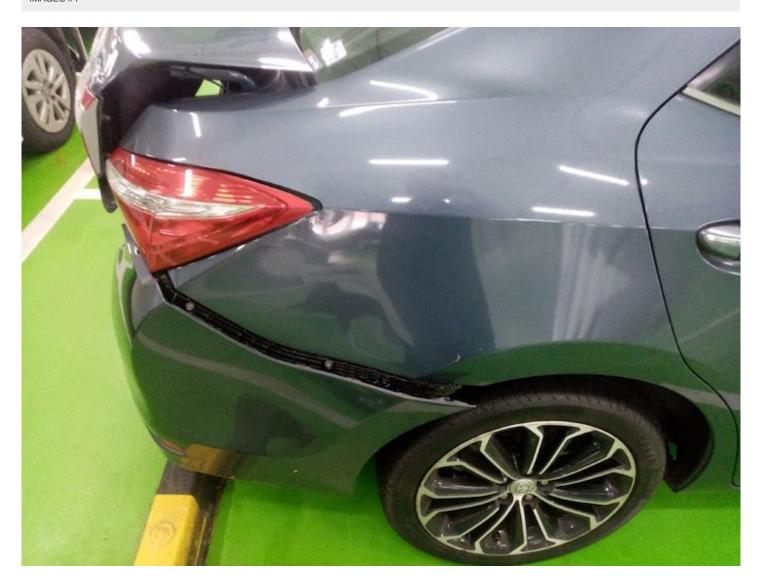
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Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

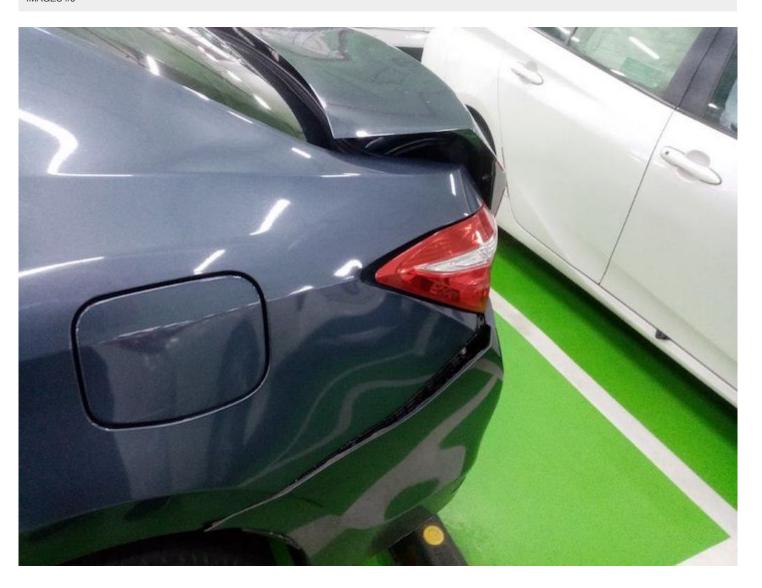
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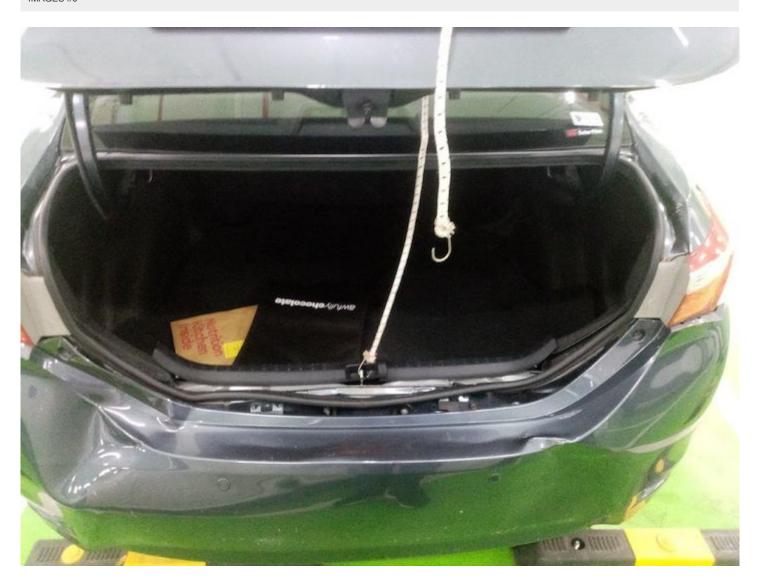


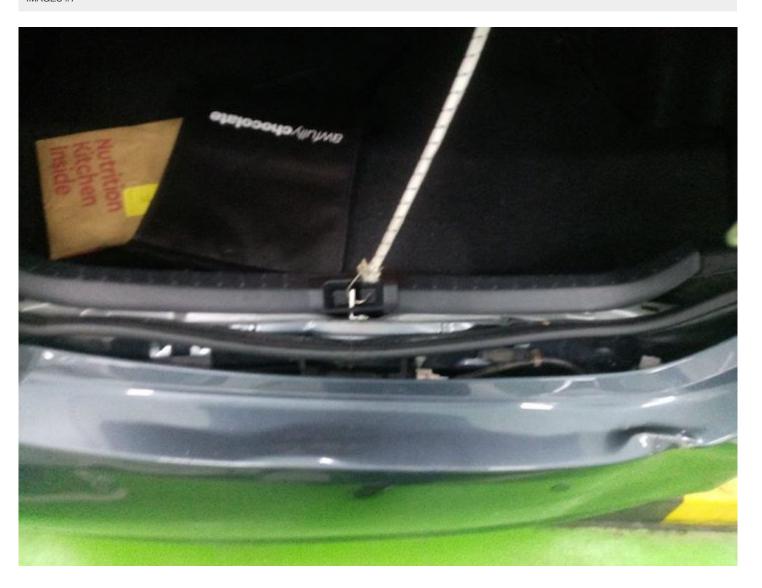


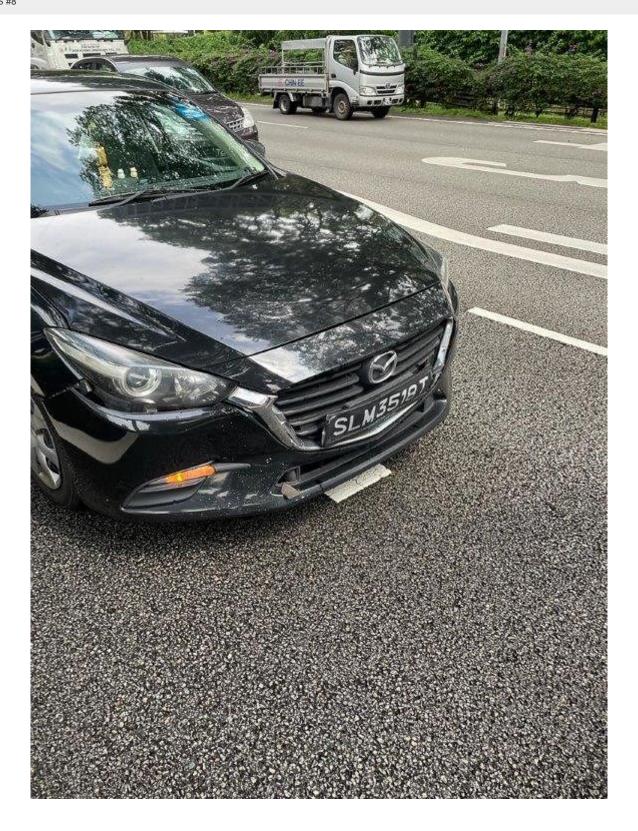


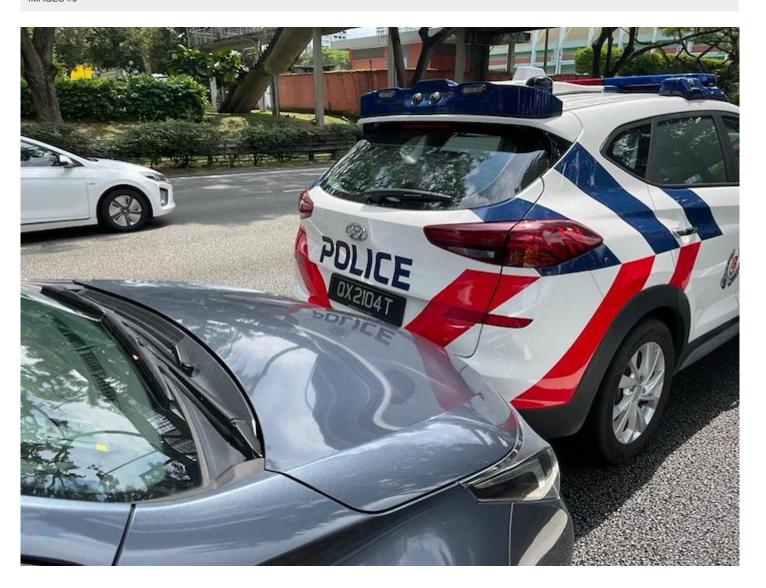


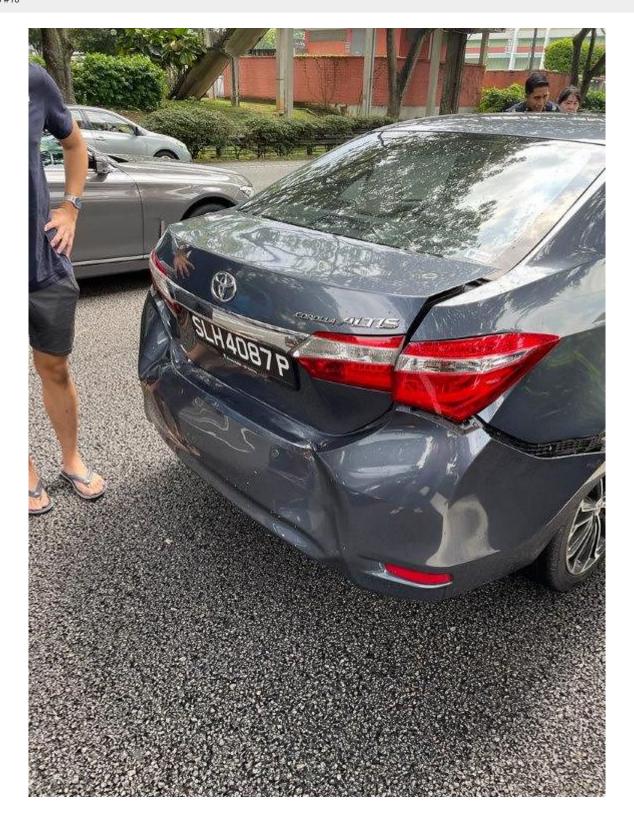
















SKETCH PLAN

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- (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.

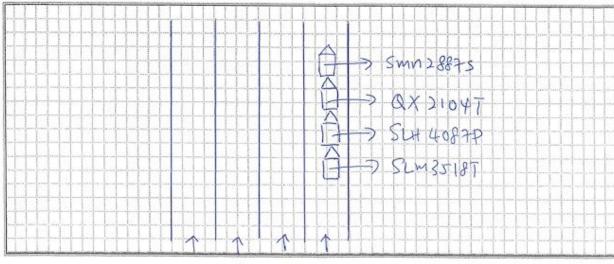
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Pany Wer Tot

Sketch Plan



PIE (chegi).

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Describe Circumstance of the Accident	Police	Report

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

Pry UL 14
Winessed by Reporting Centre Personnel (Name as in NRIC/ID card)

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AUTHORIZATION LETTER

Date:	4th Sept 2022			
To:				
Cc:	Borneo Motor	s (S) Pte Ltd		
Attn:	To Whom It M	lay Concern		
Dear Si	ir / Madam,			
RE:	Authorizatio	on to Act on Behalf fo	r Insurance Claims Docu	mentation
I/ we ,	(full name)	S Selvaraju	NRIC N	No. S1695316D
hereby	/ authorized	my/ eu r (relationship)	Son	(full name)
S Arjur	n Kumar		_ NRIC No \$99408491	to drive my
vehicle	e at time of ac	cident.		
He / 1	Stre is also a	uthorize to exercise and	I execute to sign all / any	y necessary fransaction
docun	nentation per	taining to my registratio	n vehicle number SLH4087	re as I am
curren	tly having tigh	t official business schedule	es / away from Singapore on	duty oversea travel.
Please	do not hesita	le to contact me should y	ou require any further clarific	ation on the above.
Thank	You			
Yours to	ruly.	Day		
Signati	ure :			
Name		S Selvaraju		
Conto	ct No.	+41 70 727 41 38		



CERTIFICATE OF INSURANCE

: Unlimited Mileage

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : S Selvaraju

Vehicle No. : SLH4087P Period of Insurance : 02 Nov 2021 To 01 Nov 2022 Engine No. : 1ZRX581847 Policy No. : 2100488799-04

Endorsement No.

Chassis No. : MR053REH104553141 Issued Date : 20 Oct 2021

ABOUT THE COVER

TOYOTA COROLLA ALTIS 1.6 DUAL Make/Model

Engine Capacity/Tonnage : 1,598.00 CC Sum Insured : Market Value First Year of Registration : 2016 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : No

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition Mileage Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuttion, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for airy purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of 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 - \$0 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

S Selvaraju

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related recu

Approved Reporting Centres/ALG Authorised Repaires (For claims related repairs)
Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
For other Approved Reporting Centres/ALG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6336 6200. Alternatively, You may refer to ALG website www.aig.sg or ALG SG Mobile App. Simply search and download "ALG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

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. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

0030210000

AIG ASIA PACIFIC INSURANCE PL

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.



MOTOR ACCIDENT INTERVIEW FORM

DATE/TIME OF ACCIDENT : PIE towards Groups, he have teappyon exit PLACE OF ACCIDENT : PIE towards Chargi, he have toappyon exit	NAME (DRIVER)	:_ S Arjun Kumar
PLACE OF ACCIDENT PLACE OF ACCIDENT PLACE OF ACCIDENT PLE TOWNS Chorge Legisla Cot to page and the place of accident THIRD PARTY VEHICLE (IF ANY): SLM 2518 T ***********************************	VEHICLE NUMBER	The state of the s
THIRD PARTY VEHICLE (IF ANY): SLM 35 8 T ***********************************	DATE/TIME OF ACCIDENT	: PTE towards Groups, he fore topposite ent
WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT? And how home of the way to them? I wanth landaryan. DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT? NO WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED? (Noin Collision WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? NO impact	PLACE OF ACCIDENT	: PIE towards Changi, helice toapayon exit
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