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# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.

This Form must be completed by the Policyholder and/or the Actual Driver
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

Information provided flust by de authorities to de authorities of the insurance companies.
 The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 The this insurance 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

Reported by Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

19/09/2022 12:52 (SGT)

Both

18/09/2022 21:30 (SGT)

Tampines Ave 7, Singapore

Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMQ4041L

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

MUHAMMAD ASRAF BIN ISHAK

SXXXX236Z

asraf.marvelio@gmail.com (Phone) +65-81579432

VEHICLE PARTICULARS

Manufacturer

Model

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? Vehicle Category

Transmission

CC

Nissan Note

Private hire

No - Claiming third party

Private car

Auto

1198

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

MUHAMMAD ASRAF BIN ISHAK

1900233067-02

DRIVER

Name of Driver

NRIC No

Date Of Birth Occupation

SXXXX236Z 09/02/1994 Indoor



Date Of Driving Pass 03/03/2016 Driving experience 6 YEARS AND 6 MONTHS Gender Male Mobile Number (Phone) +65-81579432 Alt. Phone Number Email Address asraf,marvelio@gmail.com Address BLK 463 TAMPINES STREET 44 #10-80 Address complement Postcode 520463 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 Collision - Change/cross lane Type of Accident 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) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? 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 PLEASE REFER TO SKETCH PLAN ATTACHMENT(S)

# DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Yes

WITH OWNER

Vehicle Registration Number FBG4900R

Vehicle Manufacturer 
Vehicle Model 
Vehicle Variant 
Vehicle Colour 
Vehicle Category Motorcycle

Name of Driver -



Are accident photos available for attachment?

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

Contact Number	
Address	
Address complement	
Postcode	
Insurance Company Name	MSIG Insurance (Singapore) Pte. Ltd.
Nature Of Damage	more insurance (origapore) Fite, Eta.
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

#### SKETCH PLAN

## IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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
- 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, 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' 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
- (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' 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 & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre & Time Time Personnel Sketch Plan VENUL A

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# Declaration

Time

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

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel



Who reported the accident?  Cowner / Driver / Both  Accident Place  SMQ 4041L Make/Model: Nissan Note 1.2  Insurance Company  Policy No: 1906 23306 3-02  Policy No: 1906 2306 3-02  Policy No: 1906 2		
Accident Place    Tampines   Ave 7	Date of Accident	: 18 09. 2022 Accident Time : 21 30 (24-HR-Format)
Vehicle No (Car Plate No)  SMQ 4041L Make/Model: Nissan Note 1.2  Insurance Company  Policy No: 1406 23306 7-02  Prope of Coverage  Comprehensive / Third Party / Third Party Fire & Theft  Name of Owner / IC No  SMS 7 9432 Owner's Hp  Company Tel  Driver Name / IC No  Driver's Date of Birth  Relationship of Driver  Spouse / Parents / Children / Sibling / Employee / Other:  Driver's Address  Driver's Contact No  Driver's Reporting Type  Reporting Type  Reporting Type  Reporting Type  Reporting Only / Claim Third Party / Claim Own Insurance  Name & Contact No  Other Party Driver's Particular (if any)  VEH B: FMA 490R (Ms16) Name & Contact No:  Other Party Driver's Particular (if any)  VEH B: FMA 490R (Ms16) Name & Contact No:	Who reported the accident?	: Owner / Driver / Both
Fleet Policy : YES (NO  Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft  Name of Owner / IC No : Muhammad As rad bin Ishak (\$940  Downer Contact No : \$157 9432 Owner's Hp Company Tel  Driver Name / IC No : As &bood    Driver's Date of Birth : 09.02.1994 Driver's License Pass Date: 03 Mar 2016  Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: Owner's Address : Blk 463 Tampines Street 44 # /0.30 :  Driver's Contact No : I) 2)  Driver's Coccupation : NDOOR / OUTDOOR (e.g. working inside or outside office)  Email Address : a srad mar velio a gmail. com  Weather & Road Surface : CEAR & DRY / RAINING & WET / AFTER RAIN & WET  Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  Number of Passenger (include Driver) :	Accident Place	: Tampines Ave 7
Fleet Policy  Fl	Vehicle No (Car Plate No)	: SMQ 4041L Make/Model: Nissan Note 1.2
Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft  Name of Owner / IC No : Muhammad As raf bin Ishak (\$946)  Owner Contact No : 8157 9432 Owner's Hp — Company Tel  Oriver Name / IC No : As about — Company Tel  Oriver's Date of Birth : 09.02.1994 Driver's License Pass Date: 03 Mar 2016  Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: Owner  Oriver's Address : Blk 463 Tampines Street 44 # 10-30 :  Oriver's Contact No : 1) — 2) —  Oriver's Occupation : NDOOR / OUTDOOR (e.g. working inside or outside office)  Email Address : asraf marvelio a gmil. com  Weather & Road Surface : CEAR & DRY / RAINING & WET / AFTER RAIN & WET  Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  Number of Passenger (include Driver) : Person ( driver )  Was ther any video footage? : YES / NO  Exact purpose used at time of accident Any injury (If Yes, Pls State) : Private Use / Private Hire / Work Purpose  Other Party Driver's Particular (if any)  VEH B : FEG 4900 R (MSIG) Name & Contact No:	Insurance Company	A16 Policy No: 1906 233067-02
Name of Owner / IC No  Super Contact No  Super C	Fleet Policy	: YES NO
Deriver Name / IC No  If the property of the company Tell of the c	Type of Coverage	: Comprehensive / Third Party / Third Party Fire & Theft
Driver's Date of Birth    09.02.1994 Driver's License Pass Date: 03 Mar 2016   Relationship of Driver   Spouse / Parents / Children / Sibling / Employee / Other: Owner   Driver's Address   Blk 463 Tampines   Street 44 # 10.30     Driver's Contact No   1)	Name of Owner / IC No	: Muhammad Asraf bin Ishak (59405.
Priver's Date of Birth    19402.   1944 Driver's License Pass Date: 03 Mar 2016   Spouse / Parents / Children / Sibling / Employee / Other: Owner   Driver's Address	Owner Contact No	: 8157 9432 Owner's Hp Company Tel
Relationship of Driver  Spouse / Parents / Children / Sibling / Employee / Other:  Our Parents / Child	Driver Name / IC No	: As about
Driver's Address    Blk 463 Tampines   Street 44 # 10.30     Driver's Contact No   1)	Driver's Date of Birth	: 09.02.1994 Driver's License Pass Date: 03 Mar 2016
Driver's Contact No :1)	Relationship of Driver	: Spouse / Parents / Children / Sibling / Employee / Other:Owner
Driver's Occupation : RNDOOR / OUTDOOR (e.g. working inside or outside office)  Email Address : asraf . marvelio @ gmail. com  Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET  Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  Number of Passenger(include Driver) : person (driver)  Was ther any video footage? : YES / NO  Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose  Any injury (If Yes, Pls State) : No  Other Party Driver's Particular (if any)  VEH B: FBG 4900 R (MS 16) Name & Contact No:	Driver's Address	: Blk 463 Tampines Street 44 # 10-80 s
Email Address : asraf.marvelio@gmail.com  Weather & Road Surface : CEAR & DRY / RAINING & WET / AFTER RAIN & WET  Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  Number of Passenger(include Driver) : person (driver)  Was ther any video footage? : YES / NO  Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose  Any injury (If Yes, Pls State) : No  Other Party Driver's Particular (if any)  VEH B: FBG 4900R (MSIG) Name & Contact No:	Driver's Contact No	:1)2)
Weather & Road Surface : CEEAR & DRY / RAINING & WET / AFTER RAIN & WET  Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  Number of Passenger(include Driver) : Person (Jriver)  Was ther any video footage? : YES / NO  Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose  Any injury (If Yes, Pls State) : No  Other Party Driver's Particular (if any)  VEH B: FBG 4900 R (MS/G) Name & Contact No:	Driver's Occupation	: NDOOR / OUTDOOR (e.g. working inside or outside office)
Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  Number of Passenger(include Driver) :	Email Address	: asraf.marvelio@ gmail.com
Number of Passenger(include Driver) :	Weather & Road Surface	: CEEAR & DRY / RAINING & WET / AFTER RAIN & WET
Was ther any video footage?  Exact purpose used at time of accident: Private Use / Private Hire / Work Purpose Any injury (If Yes, Pls State): No  Other Party Driver's Particular (if any)  VEH B: FBG 4900R (MS/G) Name & Contact No:	Reporting Type	: Reporting Only / Claim Third Party / Claim Own Insurance
Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose Any injury (If Yes, Pls State) : No  Other Party Driver's Particular (if any)  VEH B: FBG 4900R (MS/G) Name & Contact No:	Number of Passenger(include Driver)	: person (driver)
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Other Party Driver's Particular (if any)  VEH B: FBG 4900R (MS/G) Name & Contact No:	Exact purpose used at time of accident	: Private Use / Private Hire / Work Purpose
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VEHB: FBG 4900R (MSIG) Name & Contact No:	O(beau fi	outs Deisonle Bostionles (if ann)
VEH D: Name & Contact No:	VEH C:	Name & Contact No.
VEH D: Name & Contact No:  VEH E: Name & Contact No:	VEILD.	Ivame of Contact No.

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# CERTIFICATE OF INSURANCE

# NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Muhammad Asraf Bin Ishak

Period of Insurance

Engine No.

: HR12035435K

Chassis No.

: 31 Oct 2021 To 30 Oct 2022

: JN1TAAE12Z0983201

Vahicle No.

: SMQ4041L

Policy No.

Issued Date

: 1900233067-02

Endorsement No.

: 28 Sep 2021

# ABOUT THE COVER

Make/Model

: NISSAN NOTE 1.2 (SUPERCHARGED/NON-SUPERCHARGED)

Engine Capacity/Tonnage : 1,198.00 CC

Sum Insured : Market Value

First Year of Registration : 2019

Driver Restriction

Insuring with COE/PARF : Yes

: NA

Off Peak Car : No

Person or Classes of Persons Entitled to Drive\*:

a) The Policy will indemnify 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 Authorisad Driver (named or unnamed) is under the age of 23 and/or has less

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

Limitation as to use\*

Use only for social, demestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving fusion, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

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

#### EXCESS

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Muhammad Asraf Bin Ishak - \$600 (Own Damage), \$600 (Flood Cover)

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

1.TC AutoClinic Add: 25 Leng Kee Road Singepore 159097 67038511 67038512 67038513

2.TC AutoClinic Add: No.1, Sixth Lot Yang Road Singapore 526099 52622212

3. Autolution Industrial Add: 19 Ubi Road 4 Singapore 406623 64909666 4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64894093

5.Tan Chong Motor Sales Add: 17 Loreng 8 Top Payoh Singapore 319254 53570753 63570754

For other Approved Reporting Centres/AlG Authorised Repairers, please confact our 24-hour accident emergency hotline at +85 6338 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

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

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TAN CHONG CREDIT PTE LTD-NAC

AIG Asia Pacific Insurance Pte. Ltd.

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SINGAPORE 589823 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

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