

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 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 27/12/2022 14:45 (SGT)
Reported by Both
Date of Accident 25/12/2022 17:50 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information PIE /EUNOS EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKF6060A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SUFFIAN BIN AMIN
NRIC No S8238511H
Email Address SUFFIANAMIN82@GMAIL.COM
Mobile Phone No (Phone) +65-98311069
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Subaru
Model Forester
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 Private car
Transmission Auto
CC 2000

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number AIS/2022/0000393/000058

DRIVER

Name of Driver SUFFIAN BIN AMIN
NRIC No S8238511H
Date Of Birth 05/11/1982
Occupation Indoor

Date Of Driving Pass	29/04/2019
Driving experience	3 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98311069
Alt. Phone Number	-
Email Address	SUFFIANAMIN82@GMAIL.COM
Address	256 TAMPINES ST 21
Address complement	02-170
Postcode	522256
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

AS PER SKETCH PLAN ATTACHED

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	SLK8363A
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

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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.
 - (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:
 - (i) 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: 22/12/22

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



Reporting Centre Personnel's Signature
Name: 27/12/22
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I, 58298511 H. SUFFIAN BIN AMIN, is writing this statement to state the facts of a vehicle incident involving my personal vehicle, SKF6060A, a Subaru Forester, blue in colour and another private vehicle, a Renault, SLK 8363A. This event happened on Sunday, 25 December 2022 at around 1750 hrs. I was exiting PIE/Tuas via Eunus Exit, as I was filtering into Jln Eunus, SLK 8363A bumped the rear of my vehicle. I subsequently proceeded to drive forward so as to not obstruct traffic, activate my hazard lights then proceeded to alight and assess the damage.

DECLARATION

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


 Policyholder's Signature
 Date & Time: 27/12/22

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


 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:







\$1,188.90



Allianz Insurance Singapore Pte. Ltd.

COVER NOTE

In consideration of the Insured having agreed to pay the agreed Premium in respect of the Motor Vehicle described in the Schedule below, the Insurance is hereby HELD COVERED in the terms of the Company's usual form of Comprehensive / Third Party Fire & Theft / Third Party (whichever is applicable) Policy applicable thereto for and shall be valid for a period of THIRTY (30) days from date of issue. The Cover Note will be replaced with a Motor Certificate of Insurance / Policy.

Cover Note Number	AIS/2022/0000393/000058
Insured	SUFFIAN BIN AMIN
Usage	Social, Domestic & Pleasure Purposes excluding Hire & Reward
Make & Model	SUBARU FORESTER 2.0XT CVT AWD SR
Attachment	0-Jan-00
Engine Capacity/Tonnage	1998cc
Engine Number	FA20A893620
Chassis Number	JF1SJGK85GG069573
Registration Number	SKF6060A
Estimated Value	Market Value at time of Loss
Coverage	Comprehensive - Authorised Workshop
Deductible	\$500 (SECT I), \$100 (WINDSCREEN)
Period of Insurance	15-Aug-22 to 14-Aug-23
Hire Purchase	Teck Wei Credit Pte Ltd
Issued By	Agency Distribution on 15-Aug-22

We hereby certify that this Cover Note is issued in accordance with the provisions of
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (Chapter 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Signed for and On Behalf of
 Allianz Insurance Singapore Pte Ltd

Authorised Signatory

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