

SMO2329000

Preferred Wksp / INC Assign Wksp / QW: ()		Tel: ()		Fax: ()	
TP Particulars: ()	Ych No: SLV 20814	INC () / Non-INC ()			
Owner / Driver: ()		Tel: ()			
Policy No: ()	Period: ()	Cover Type: ()			
Confirmed by: ()		Date: ()		Time: ()	
Insured/Driver Liability: ()		95) (Note-List Status (WO): 10-0-20%, P: 21-70%, P: 30-100%)			
Year of Registration: ()		Warranty: YES () / NO ()			
Excess: (\$)		Loading: \$1,000 () / \$2,000 ()			

General Remarks:

() Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of reporter.

() Total Loss Cost : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Rem: 4/15/2011 11:41 AM Job: 6788-06161 Date Time Completed: 4/15/2011 11:41 AM Done by:

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection	()	
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3) Upload Resurvey Photo [Repair Cost > \$3000]	()			
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Injury:

Date	Turn	Actions

...

1. The first part of the document is a title page. It contains the title of the document, the author's name, and the date of the document. The title is "The first part of the document is a title page. It contains the title of the document, the author's name, and the date of the document." The author's name is "The author's name is the name of the person who wrote the document." The date of the document is "The date of the document is the date when the document was written." The title page is the first page of the document and it is usually the most important page. It is the page that the reader sees first and it is the page that the reader will remember. The title page is the page that the reader will see first and it is the page that the reader will remember. The title page is the page that the reader will see first and it is the page that the reader will remember.

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1. The first part of the document is a list of names and addresses, which appears to be a directory or a list of contacts. The names are written in a cursive script, and the addresses are listed below them. The list includes names such as "John A. Smith", "Mary E. Jones", and "Robert L. Brown".

X/A2300496 Invoice Preparation Checklist

1) AR: Accident Papering	(1300)	1300 (1300)
2) AR: Papering	(1100)	1100 (1100)

3) TFI Towing Fee 500/500

4) FT: Follow-Through Survey
5) FT: Follow-Through Survey (Baseline)

[illegible]

Amended Portion: 7) N1: Hsu DA + SIFT QUINCY

[illegible]

C. Checked by (Engr-In-Charge):	*No. Courtesy Car/Tel Allowance	\$5
	*Life Insurance Deduction	\$10

• DT: Post Report Inspection

• No. BY / Collect Excess Coordination
T2(11): TP(N) INC) galway INC

P. N. Holdings Memo

12/3

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	16/02/2023 17:57 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	15/02/2023 23:00 (SGT)
Exact Location of Accident	541A Bukit Panjang Ring Rd, Singapore 671541
Additional Location Information	MULTI STOREY CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT472L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SARAVAN S/O PANNIR SELVAM
NRIC No	SXXXX598D
Email Address	pannirsaravanan@gmail.com
Mobile Phone No	(Phone) +65-87201519
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Maserati
Model	GRANTURISMO
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	4244

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220117823

DRIVER

Name of Driver	SARAVAN S/O PANNIR SELVAM
NRIC No	SXXXX598D
Date Of Birth	19/08/1989
Occupation	Indoor

Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	SARAVAN S/O PANNIR SELVAM
Gender	Male
Phone No	(Phone) +65-87201519
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMT472L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No


Describe Circumstance of the Accident

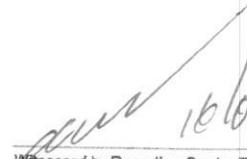
On the above mentioned date and time
as I was travelling straight suddenly there's
a car driving. SLV 20B14 which was coming
up from slope hit onto my right side part
of my vehicle.

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

 16/01/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 15/02/23 (dd/mm/yy) Time of Accident: 23:00 (24-HR-FORMAT)
Vehicle No.: SMT472L Vehicle Make & Model: Meserati GranTurismo
*Transmission: ☐ Manual ☐ Auto *C.c.: 4244
Exact location of Accident: BLK 541A Bukit Panjang Ring Rd (Multi Storey carpark level 1)
Policyholder's Name: Saravanan s/o Pannir NRIC/FIN/REG No.: S89285980
*Policyholder's email address: pannirsaravanan@gmail.com
Driver's Name: as above NRIC/FIN/REG No.: -
*Driver's email address: -
Driver's Contact No.: 87201519 Company Contact No (if any): -
Date of birth: 19/8/89 Driving Pass Date: 23/7/10
Driver's Address: BLK 545 Bukit Panjang Ring Rd #20-885 (670545)
Insurance Company: ALG
Policy No.: 7220117823 Type of Coverage: Comprehensive / Third Party / Third Party, Fire & Theft
Relationship between Owner & Driver: (Please **CIRCLE** one only)
Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify:
What do you wish to claim? (Please **TICK** one only)
☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)
Type of Accident
☐ Chain Collision ☐ Head To Rear ☒ Side Swipe ☐ Other
Occupation (nature job) ☒ Indoor / ☐ Outdoor *No. of Passengers / Including Driver: 01
*Passenger Name: - Gender: Male / Female
*Passenger Name: - Gender: Male / Female
Weather condition & Road conditions? (On the day of accident)
☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others:
Was there any video captured by your car Car camera? ☐ Yes / ☒ No
Any Injuries: ☒ Yes / ☐ No (If YES) Injured Person's Name: Saravanan s/o Pannir Selvam
Injuries Sustain: Body Injured Person in Which Vehicle: SMT472L
Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station:

The Other Party (S) Details:

1. Driver's Name / IC No: - Vehicle No: SLP 20814
Driver's Contact No: - Insurance Company: -
2. Driver's Name / IC No (If Any): - Vehicle No: -
Driver's Contact No: - Insurance Company: -
*Independent Witness (If Any): - Contact No: -
Preferred Workshop Name: - Contact No: -



CERTIFICATE OF INSURANCE

LUXURY PRIME AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : Saravanan S/O Pannir Selvam
Period of Insurance : 12 Oct 2022 To 11 Oct 2023
Engine No. : M139P147259
Chassis No. : ZAMGH45C000047336

Vehicle No. : SMT472L
Policy No. : 7220117823
Endorsement No. :
Issued Date : 12 Oct 2022 14:41

ABOUT THE COVER

Make/Model : MASERATI GRANTURISMO 4.2
Engine Capacity/Tonnage : 4,244.00 CC Sum Insured : 130000 First Year of Registration : 2009
Driver Restriction : Named Driver Basis Off Peak Car : No Insuring with COE/PAF : Yes
Person or Classes of Persons Entitled to Drive* :

a) The Policyholder
b) Any person who is named as a "named driver" under this Policy.

Age Condition : Not Applicable

Mileage Condition : Unlimited Mileage

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 tuition, 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 any purpose in connection with Motor Trade.

Loss of Use 1800cc - 2000cc

* 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 - \$15000 Theft - \$0 Theft Outside Singapore Cover - \$30000 Flood Cover - \$15000

Section 2

Property Damage - \$0

Windscreen : \$500

Named Driver and Excess (where applicable)

Saravanan S/O Pannir Selvam - \$15000 (Own Damage) \$30000 (Theft Outside Singapore Cover), \$15000 (Flood Cover)

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

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, 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

Hire Purchase Company/Employer's Loan: Maybank Singapore Limited

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).

0030305222

G&M PTE LTD - LUXP

20 ANSON ROAD #07-01 TWENTY ANSON

SINGAPORE 079912

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Wan Loo Ho