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 06/03/2023 09:25 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 03/03/2023 15:25 (SGT) Exact Location of Accident 651 Jurong West Street 61, Singapore 641651 Additional Location Information SERVICE ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKF8906Y

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner AMRAN BIN ATAN NRIC No S6905357B Email Address TWIN2@SINGNET.COM.SG Mobile Phone No (Phone) +65-91762926 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Estima 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? Yes Vehicle Category Private car Transmission Auto CC 2362

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2001808782-01

DRIVER

Name of Driver **AMRAN BIN ATAN** NRIC No S6905357B Date Of Birth 15/01/1969 Occupation Indoor

Date Of Driving Pass 26/10/2018 Driving experience 4 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-91762926 Alt. Phone Number Email Address TWIN2@SINGNET.COM.SG Address 650A JURONG WEST ST 61 #06-274 Address complement Postcode 641650 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions **DRIZLLING** Road Surface Wet 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? 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? Police Station Name Jurong West Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002689999 Alt. Police Station Phone No (Fax) +65-62672438 Police Station Address 700 Corporation Road Singapore 649818 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT AS PER POLICE REPORT NO: T/20230303/2090 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number YJ888G Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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 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' 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")

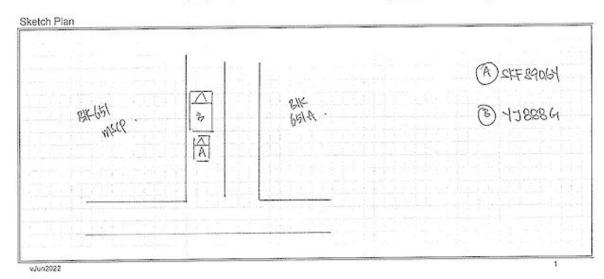
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

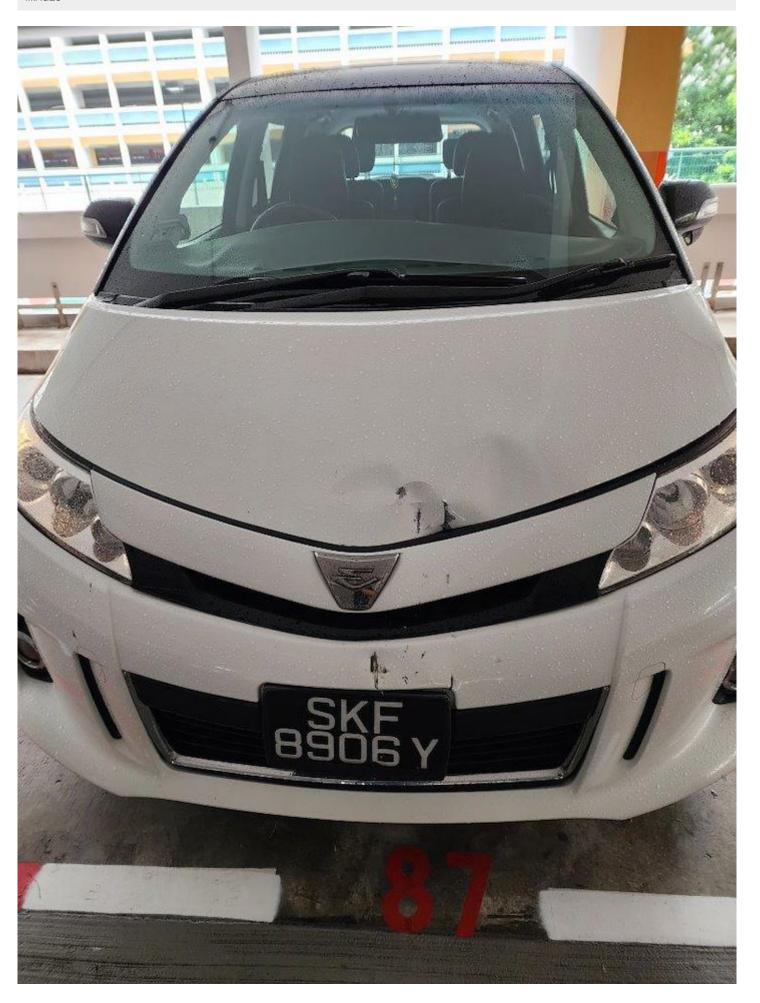
Policyholder's Signature / Date & Time

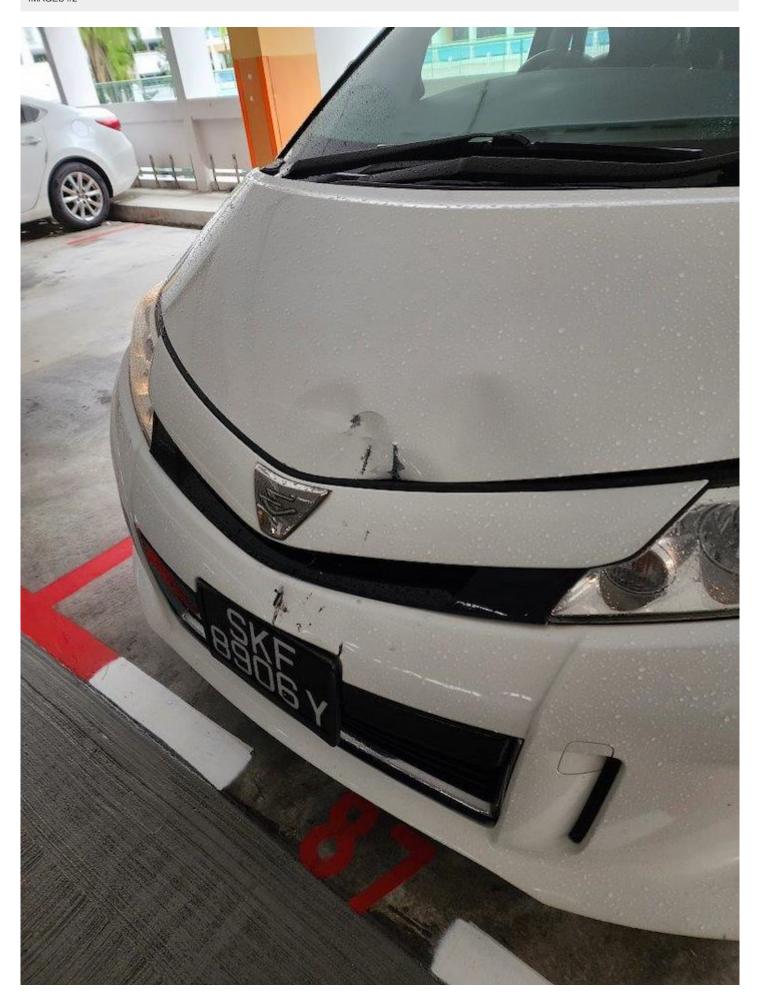
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

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



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of lon lour robort b	10: 7 20230303 2190.	
		Claim own policy
		☐ Claim third party ☐ Claim OD / TP at other weekshop
		Policy No. SP >> 0 (808=18) >-0 (
		Polley No. ST SONO OF 906
AWARE THAT MY INSURER M ICY, I WILL CHECK MY POLIC	MAY HAVE A 14 DAYS TIMEFRAME FOR Y FOR MORE DETAILS.	R ME TO SUBMIT MY OWN DAMAGE CLAIM UNDER MY
claration to declare the foregoing particula	rs are true in every respect.	
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An-		SNGAN TEE MOTOR & PANEL SVC PTE LT

















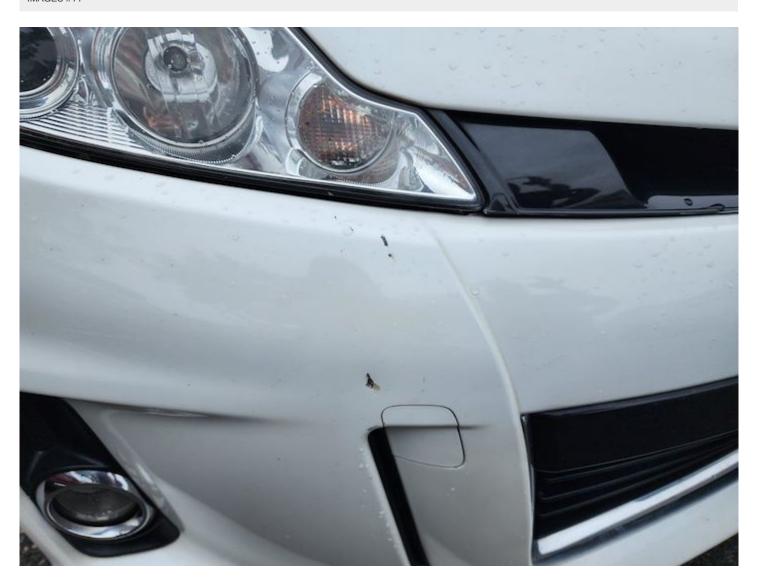














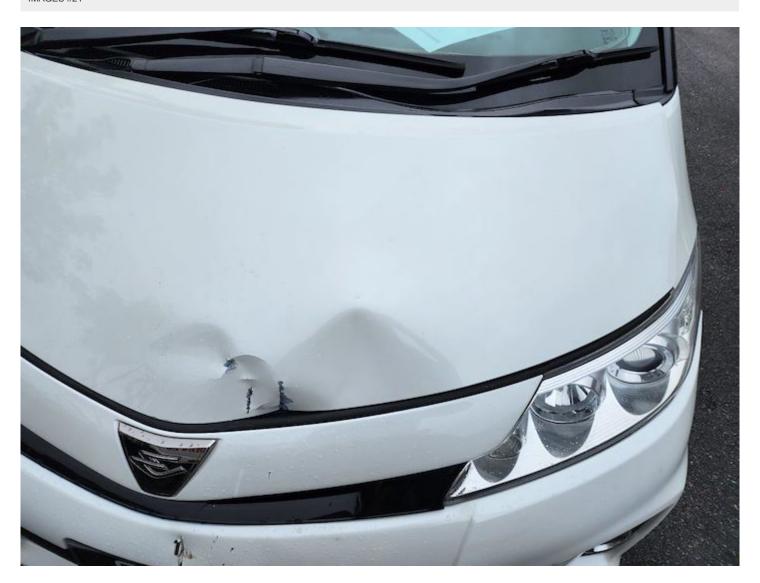


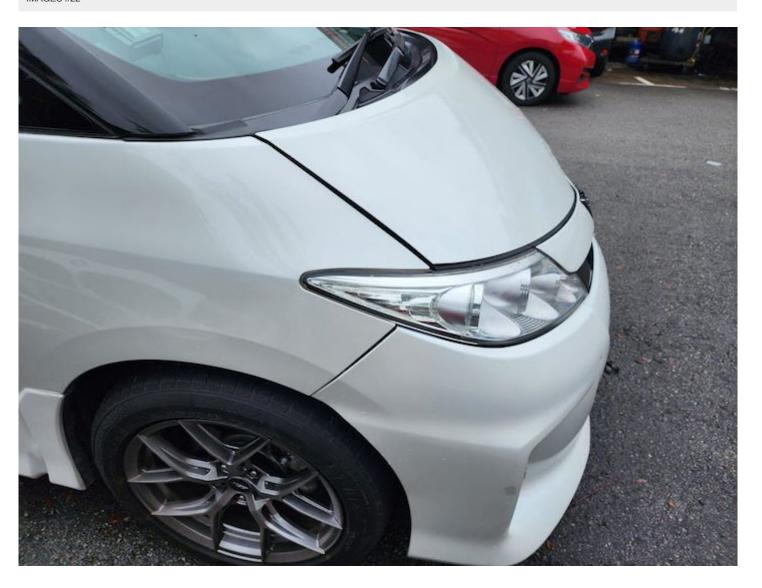






















Police Station Of Origin: Jurong West N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

1 of 3 Report No. T/20230303/2090

Date/Time Report Made: 1 03/03/2023 16:35			Vide Report No.:	Station Diary No. 117	
Informa	nt's Partic	ulars			
Name of Informant: AMRAN BIN ATAN			Address: APT BLK 650A JURONG WEST STREET 61 #06-274 SINGAPORE 641650		
ID Type / ID No.; NRIC NO / S6905357B		57B	Contact No.: Home/Office:	Mobile: 91762926	
	lationality: En		Email:		
Sex: Male	Age: 54	Date of Birth: 15/01/1969	Type of Informant: Driver		
Race: Javanese-English			Language:	Institution / School Name:	
Occupation: MAINTENANCE SUPERVISOR			Driving Licence Information: Class: 3A	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/03/2023 15:25	Type of Location: Loading/Unloadir g Bay	
Weather:	EST STREET 61	Road Surface:		Road Speed Limit:	
Traffic Flow: Tra		Traffic Control: Not Controlled		Traffic Volume: Light	
Type of Collision: Car Stationary, Lorry Moving				Anyone conveyed by ambulance:	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKF8906Y	Car	тоуота	ESTIMA AERAS 2.4 A	Silver	Slightly Damaged	0
YJ888G	Lorry					0

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

Report No. T/20230303/2090

-2689999	CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKF8906Y	ALLIANZ INSURANCE SINGAPORE PTE. LTD.	SP2001808782	19/07/2022	18/07/2023

Details of Perso	n Involved			Was and			
Any Pedestrian In	nvolved: No					2	
No. of Pedestrians Injured: NIL Use			Use of Pe	Jse of Pedestrian Crossing: NA			
Driver							
Name	AMRAN BIN ATAN		ID No		S6905357B		
Related Vehicle	SKF8906Y (Car)			Conta	ct No.	91762926	
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: 3A Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL		
No. of Days gran	ted Medical Leave	The state of the s			NIL		

Brief Details.

On 3 March 2023 at around 1525hrs at Blk 651A Jurong west street 61. I park my car (SKF8906Y) at the side of the road and behind a lorry (c). I on my hazard light and step out of my car to get a coffee. When I came back discovered that my front bonnet has dents and scratches, and front bomber has multiple scratches. I have a recording of me parking behind a lorry, but I do not have a recording of the lorry hitting my car, but I believed that it is the lorry as I was away for roughly 5 minutes.

I am writing this report for record purpose.





3 of 3 Report No. T/20230303/2090

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 CONTINUATION OF REPORT Tel No: 1800-2689999

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report: J / SC MOHAMMAD NUH AKID BIN DZULKIFLIE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 03/03/2023 16:35
Officer In Charge Of Case: TP / HRT / SR STAFF SGT IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
NP168	



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1958 (FEDERATION OF MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1990
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

: SP2001808782-01 Certificate Number Date of Issue : 2022-06-01 : Comprehensive Coverage : AMRAN BIN ATAN Policyholder

: 19 July 2022 to 18 July 2023(both dates inclusive) Period of Insurance

: SKF8906Y Registration No. Chassis number of Vehicle : ACR507063792

Persons 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

*Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Mator Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

Limitation as to Use *:

Used only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purposes in connection with the Motor Trade

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

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or Amendment, Act or Acts passed in substitution thereof.

01 June 2022

Issued Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

: Own Damage

: Windscreen Damage

SGD

100.00

Allianz Insurance Singapore Pte, Ltd. | UEN 201903913C

79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

Excess