

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 14/03/2023 17:36 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 14/03/2023 08:43 (SGT)
Exact Location of Accident Singapore
Additional Location Information ECP TO CITY OPP. PARKWAY PARADE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMF3562P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner UNAIZA ABUSAAD SHEIKH
NRIC No S7165135E
Email Address UNAIZA@SHEIKHGROUP.COM
Mobile Phone No (Phone) +65-90619678
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer	Peugeot
Model	3008
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number SP2000616982

DRIVER

Name of Driver UNAIZA ABUSAAD SHEIKH
NRIC No S7165135E
Date Of Birth 05/11/1971
Occupation Indoor

Date Of Driving Pass 21/07/2006
Driving experience 16 YEARS AND 8 MONTHS
Gender Female
Mobile Number (Phone) +65-90619678
Alt. Phone Number -
Email Address UNAIZA@SHEIKHGROUP.COM
Address 1 SIGLAP ROAD
Address complement #06-10
Postcode 448906
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 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 4
Was anybody injured in the Accident? Yes
Was any injured conveyed to hospital by ambulance? Yes
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 2
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 -

PASSENGER 1

Name NAW KAY KHAING OO
Gender Female

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 THE BELOW SKETCH PLAN & ACCIDENT STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? Yes
Reasons for not uploading a video of the accident THE SD CARD OF DASH CAM HAS TOOK BY THE TRAFFIC POLICE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLZ5444R
Vehicle Manufacturer Mazda

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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKH606E
Vehicle Manufacturer Mercedes
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) -

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SNB3643Z
Vehicle Manufacturer Volkswagen
Vehicle Model Golf
Vehicle Variant -
Vehicle Colour White
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person NAW KAY KHAING OO
Gender Female
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SMF3562P
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? Yes

SKETCH PLAN

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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. The report will be forwarded by the Insurers of the GA 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 submission of this report to the Insurer, you hereby consent to the archiving of this report at the centre and to copies of the report being made available of request.
8. **Consent under the Personal Data Protection Act (POPA)**
I understand, acknowledge, agree and consent that:
 - (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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 vehicles) involved in the accident shall be collectively referred to as the "Insurer(s)", the Insurer's lawyers/law firm, 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 under my claim;
 - (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 details 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 Insurer's lawyers/law firm, may be 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 be disclosed by any of the Insurer(s) and/or GIA to their third party service providers or agents (including their lawyers/law firm), which may be situated outside of Singapore, for one or more of the above Purposes.

Umar Shekh

Policyholder's Signature / Date & Time

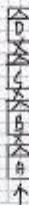
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

14/3/23 01900

Sketch Plan



A - SPM3562P

B - SNB 36492

C - SKH 606E

D - SLZ 5444R

Describe Circumstances of the Accident

Driving on 65P to city, when I saw car stop down road
because brake suddenly. I was the last car

Declaration

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

Unayy, Sheikh

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

4/7/21 @ 1700





SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref. Report No. #6/20230314/0064

812 7064

(Borrower's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP 11N

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 One ID card, BLACKME, 16GB

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

from ABUQAAD SHEIKH, S2743087B

(Name, NRIC or Passport No. / Rank and No.)

at 1 RUGAIP ROAD #06-10 3(448906)

(Address / Police Station / NPC / NPP)

on 14/03/23

(Date)

at 0940 hrs

(Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

S2743087B

(Name, NRIC or Passport No. / Rank and No.)

Received by:

812 7064

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: Investigator Firdaus, 65497 6224.

NP 323 (2/16)



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (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 1990 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES,1980
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2000616982-01
 Date of Issue : 14 October 2022
 Coverage : Comprehensive
 Policyholder : UNAIZA ABUSAAD SHEIKH
 Period of Insurance : 05 November 2022 to 04 November 2023 (both dates inclusive)
 Registration No. : SMF3562P
 Chassis number of Vehicle : VF3M45GZWJS312364

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 Motor 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.

14 October 2022

Issued Date

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

Intermediary Code	:	0000227 Sea & Land Insurance Brokers Pte Ltd
Excess	:	Own Damage SGD 600,00
	:	Windscreen Damage SGD 100,00

