

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	01/04/2023 12:21 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	31/03/2023 14:45 (SGT)
Exact Location of Accident	1 Admiralty Ln, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML8547U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	mitsubishi hc capital asia pacific pte ltd
Company Reg No	199400399N
Email Address	MUHD_NUH_90@HOTMAIL.SG
Mobile Phone No	(Phone) +65-88218992
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1496

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01019384

DRIVER

Name of Driver	MUHAMMAD NUH BIN ABDUL MALEK
NRIC No	S9001611C
Date Of Birth	16/01/1990
Occupation	Indoor

Date Of Driving Pass	26/03/2009
Driving experience	14 YEARS
Gender	Male
Mobile Number	(Phone) +65-88218992
Alt. Phone Number	-
Email Address	MUHD_NUH_90@HOTMAIL.SG
Address	BLK 433C BUKIT BATOK WEST AVE 8 #07-1525
Address complement	-
Postcode	653433
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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

I PARKED MY VEHICLE BESIDE THE MOSQUE 1 ADMIRALTY LANE FOR MY FRIDAY PRAYERS. AFTER MY PRAYERS, I WENT TO MY VEHICLE AND SAW VEHICLE B GBA6236T HAD HIT ONTO MY VEHICLE.

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	GBA6236T
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	VEHICLE B
No. Of Passenger (Including Driver)	2

SKETCH PLAN

IMPORTANT NOTICE



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5. Any false reporting may be referred to the Police for investigation.
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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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

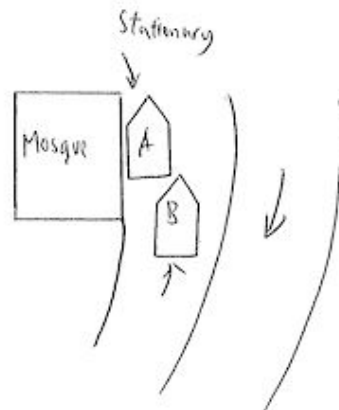
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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	 Driver's Signature (If driver is not the policyholder) / Date & Time	_____ Witnessed by Reporting Centre Personnel
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Sketch Plan

1 ADMIRALTY LANE



SML8547U
GBA6236T


Describe Circumstances of the Accident

I PARKED MY VEHICLE BESIDE THE MOSQUE 1 ADMIRALTY LANE FOR MY FRIDAY PRAYERS. AFTER MY PRAYERS I WENT TO MY VEHICLE AND SAW VEHICLE B (GBA6236T) HAD HIT ONTO MY VEHICLE.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policyholder's Signature / Date & Time


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

Witnessed by Reporting Centre Personnel
















Sompo Insurance Singapore Pte. Ltd.

 50 Raffles Place, #03-03
 Singapore Land Tower, Singapore 048623
 Tel: 6461 6555 | www.sompo.com.sg
 Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

PRIVATE CAR POLICY SCHEDULE

Intermediary Code : 11H13200

Policy No. : D22MTPV01019384

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the PRIVATE CAR Policy wordings, ref. MTP.30

Insured : MITSUBISHI HC CAPITAL ASIA PACIFIC PTE. LTD.
Address : 111 SOMERSET ROAD
 #14-05
 SINGAPORE 238164
Business/Profession : IMPORTERS & EXPORTERS OF MOTORCAR (NEW & USED),
 AUTOMOTIVE PARTS, SALES AND SERVICE OF AUTOMOTIVE
 EQUIPMENT; MOTORCAR DEALERS - NEW & USED; MOTORCAR
 REPAIRING & SERVICE, RENTAL CAR
Period of Insurance : 07 DECEMBER 2022 00:00 TO 06 DECEMBER 2023 23:59
Persons or Classes of Persons entitled to drive : Refer to Certificate of Insurance
Limitations as to use : Refer to Certificate of Insurance

VEHICLE DETAILS		PREMIUM DETAILS	
Vehicle Registration No.	: SML8547U	Premium after applicable discount(s)	S\$ 1,087.46
Chassis No.	: RU11314046	GST	S\$ 76.12
Engine No.	: L15B5564057	Premium (incl. GST)	S\$ 1,163.58
Vehicle Make & Model	: HONDA VEZEL 1.5		
Engine Capacity	: 1500		
NCD Entitlement	: 20%		
Year of Registration	: 2019		
NCD Protection	: No		
Estimated value of Vehicle	: Market value at time of loss		
Hire Purchase Owner	: NIL		

Coverage : Comprehensive - ExcelDrive GOLD

Excess : \$ 1000 - Section I

Voluntary Excess : N.A

Additional Excess : Named Young and/or Inexperienced Drivers S\$1,500
 Un-named Young and/or Inexperienced Drivers S\$3,000

The terms shall be defined as follows:

'Young Drivers' shall be defined as drivers (including the Insured) who are below 27 years old.

'Inexperienced Drivers' shall be defined as drivers (including the Insured) who have less than 1 year of driving experience in Singapore roads.

Windscreen Excess : S\$100.00 for each and every applicable claim.

Endorsements Applicable : Endorsement AA2 - ExcelDrive Gold Plan
 Endorsement D1 - Young and/or Inexperienced Drivers
 Endorsement E1 - Excess Clause
 Endorsement H - Total Loss
 Endorsement M - Inclusion Of Special Perils
 Endorsement P6 - Riot And Strike Endorsement
 Endorsement Z - Loss of Use Benefit

Special Clauses/ Conditions/Memo : MEMO 1
 It is hereby declared and agreed that SECTION IV - PERSONAL ACCIDENT BENEFITS is deemed to be deleted and replaced by MEMO 2.

Insured Copy