

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	31/03/2023 17:16 (SGT)
Reported by	Actual Driver
Date of Accident	31/03/2023 12:52 (SGT)
Exact Location of Accident	11 Laguna Golf Green, Singapore 488047
Additional Location Information	LAGUNA GOLF CLUB
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML9787L
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ACE DRIVE PTE LTD
Company Reg No	2XXXXX348K
Email Address	accidentreport@acedrive.sg
Mobile Phone No	(Phone) +65-64444400
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D22MFL0009933

DRIVER

Name of Driver	FIELD SIMON
Passport No/FIN	GXXXX445L
Date Of Birth	08/04/1984
Occupation	Indoor

Date Of Driving Pass	28/06/2006
Driving experience	16 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86795098
Alt. Phone Number	-
Email Address	accidentreport@acedrive.sg
Address	27 GREENWOOD AVENUE #01-43 GREENWOOD MEWS
Address complement	-
Postcode	286623
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 - Major/Minor Rd
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

VEHICLE B (SLW 2258 Y) WAS STATIONARY AT PARKING BAY. I MOVE FORWARD INFRONT TO THE PARKING BAY, SUDDENLY VEHICLE B(SLW 2258 Y) MOVED FORWARD AND COLLIDED ONTO MY LH SIDE OF 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	SLW2258Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ALI

Contact Number	(Phone) +65-87928395
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT NOTICE

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7. By the lodgment 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.
- (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.

ACE
DRIVE
 Ace Drive Pte. Ltd.

Policyholder's Signature
 Date & Time:



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

31-3-23
 4:35pm



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle B (SLW 2258 Y) was stationary at parking bay. I move forward in front to the parking bay, suddenly vehicle B (SLW 2258 Y) moved forward and collided onto my LH side of my vehicle.

DECLARATION

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

ACE
DRIVE
 Ace Drive Pte. Ltd.
 Policyholder's Signature
 Date & Time:


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 31-3-23
 4:35 pm



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





























IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SS31233V0002 Vehicle Registration No: SML9787L
 Name (as shown in NRIC): ACE Drive Pte Ltd NRIC/FIN/Passport No: _____
 (*Vehicle Driver/Policyholder) (*) Please delete as appropriate
 Address: 50 Ubi Avenue 3 #01-01/02 Frontier Singapore (408866)
 Contact (Tel): 6444 6400 Mobile No.: _____
 Email Address: accidentreport@acedrive.sg
 Date of Accident: 31/03/2023 Time of Accident: 12:52
 Place of Accident: Laguna Golf Club
 Insurance Company: India International Insurance Pte Ltd

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Third Party Claim change to Own Damage Claim



Policyholder / Actual Driver's Signature
 Date: 13/04/2023



Reporting Centre Personnel's Signature
 Name (as in NRIC/ID card): Tham Hui On
 Date: 13/04/23



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. M2-0678806-X
 94 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
 Office (65) 63476180 Email insured@iia.com.sg
 Fax (65) 62244174 Website www.iia.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1966 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D22MFL0009933		COVER: Comprehensive
1. Index Mark and Registration Number of Vehicle	: SML9787L	
Chassis No	: RU11314877	
2. Name of Policyholder	: ACE DRIVE PTE. LTD.	
3. Effective date of Insurance	: 14 Nov 2022	
4. Expiry date of Insurance	: 13 Nov 2023	
5. Persons or Classes of Persons entitled to drive*	Any person who is driving on the Policyholder's order or with their permission. The Hirer. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle	
6. Limitations as to use*	Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired. The Policy does not cover (1) Use for hire or reward (other than when the vehicle is hired for the carriage of passengers under Z10/Z11 for hire and reward). (2) Use for racing, pace-making, reliability trial or speed-testing. (3) Use for the carriage of goods (other than samples) in connection with any trade or business. (4) Use for any purposes in connection with the Motor Trade. *Limitations rendered inoperative by Section 8 of the 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.	
Windscreen Excess	: SGD	100.00
Hire Purchase Company	: DBS Bank Ltd	
EXCESS ALL CLAIMS:- S\$800.00 WITHIN SINGAPORE & S\$1,600.00 WITHIN WEST MALAYSIA.		
SUNROOF EXCESS: S\$200.00 (if applicable)		
PRIVATE HIRE SERVICE (USE FOR HIRE & REWARD) - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE ONLY.		
FOR SOCIAL, DOMESTIC & LEISURE PURPOSES ONLY - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE AND WEST MALAYSIA.		
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).		
Agent/Broker : A000091/PAN PAC CREDIT PTE LTD		For India International Insurance Pte Ltd
Date of Issue : 16/11/2022 17:21:17		
MZ406 - Hire Car (G/R)		
		 Authorized Signatory

letchmy/16/11/2022 17:21:17

16/11/2022 17:39:25