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Owner / Driver: (Tel:)
Policy No: () Period	: (Cover Type: ()
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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.

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 Reported by Date of Accident

Exact Location of Accident Additional Location Information

Country/State of Loss

25/05/2023 16:15 (SGT)

Both Policyholder and Actual Driver

25/05/2023 07:50 (SGT)

PIE, Singapore

TOWARDS TUAS

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNK579Z

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

KEN MIZUSAWA

SXXXX574E

kenmizusawa@gmail.com (Phone) +65-91391992

VEHICLE PARTICULARS

Manufacturer

Model

Variant accident

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to vour vehicle?

Vehicle Category

Transmission

CC

Toyota Vios

Private use

No - Claiming third party

Private car

Auto

1496

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

7230022857

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Accident report SN08235P0004

KEN MIZUSAWA SXXXX574E 30/12/1974 Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	26/08/2003 19 YEARS AND 9 MONTHS Male (Phone) +65-91391992 - kenmizusawa@gmail.com 7 FLORA DRIVE @07-33 DAHLIA PARK CONDOMINIUM 507012 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 Yes No Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Contact Number	- Included the
Address	
Address complement	
Postcode	
I	
Nature Of Damage	
Details of property damaged in accident No. Of Passenger (Including Driver)	
No. Of Passenger (including Driver)	

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KEN MIZUSAWA
Gender	Male
Phone No	(Phone) +65-91391992
Address	- The second of
Address Complement	-
Post Code	:-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SNK579Z
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow
- 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.
- Any false reporting may be referred to the Traffic Police Department for investigation.
- 6. 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.
- 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
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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 *
- (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
- (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

Sketch Plan

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

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

83

on 25 of 3033 (2) 0750 hrs. I was driving my car (5NK 5792) along PIE in the 4th lang from the right, and of sudden, a truck (XD 3307R) which was travelling on my right side was filtering into my lane without checking the traffic status from his left side and then grazed & brushed ever the right portion of my car. I felt uncomfortable after the accident so I had visited my dortor and was given a days MC. Hence, I hereto lodge this report to claim against the truck (XD 3307R)5 insurance for my accident damages. My car has installal car cam recorder, and I willing to provide the accident scene video footage for investigation purpose.	escribe Circumstance of the Accident	
(xD 3307k) which was travelling on my right side was filtering into my lane without checking the traffic status from his left side and then grazed & brushed over the right portion of my car. I felt uncomfortable offer the accident, so I had visited my dortor and was given a days MC. Hence, I hereto lodge this report to claim against the truck (xD 3307R)s insurance for my accident damages. My car has installed car cam recorder, and I willing to provide		SNK 5792) along
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	the accident scene video footage for investigation	n purpose.
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Declaration

I/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 occurence. 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 (Name as in NRIC/ID card)

VEHICLENO: SNK 5792 MAKE & MODEL: 7.44. (AUTO) MANUAL Date of Accident 25 /05 2003 *C.C: 1496 Time of Accident 7:50 (AM) PM Location of Accident PIE towards Tuas Exact Purpose Usage Employment / Private Use / Private Hire NAME OF OWNER: Ken Mizusawa Email: Kenmizusawa @ gmail.com HP: 9139 1992 Office: Nric / Co. Reg. No. 57482574E Fax: Claim Type Third Party / Own Damage Reporting only Fleet Policy Yes (No? Insurance Co. Alf Insurance Type of Coverage Comprehensive / Third Party / Third Party Fire & Theft Policy No. 7230002857 NAME OF DRIVER: As above / If No: Nric No 57482574E Date Of Birth 30 / 12 / 1974 **Any Passenger** Yes / No? Name of Passenger Gender of Passenger Male / Female Occupation Outdoor (Indoor) Date Of Driving Pass 26 / 08 / 2003 Gender of Driver Male / Female Contact 9139 1992 Home: Email Kenmizusawa @ gmail.com Address 7 Flora Drive #07-33 Dahlia Park Condominium S(507012) Does Driver Own Other Vehicles No/ If Yes (Reg. no.): Insurer: Relationship Employee / If No: Owner Weather Condition Clear Raining / Other: Road Surface Dry / Wet / Other: Any Injuries No / If Yes: Who? Ken Mizusawa Conveyed by Ambulance No / If Yes: Who? Police Report (No) If Yes: Where? Notice Of Intended Prosecution Given? No If Yes: Who? Vehicle B No: XD 3307 R Any Passenger: Unknown Name Of Driver Unknown Contact Vehicle C No: Any Passenger: Vehicle D No: Any Passenger: Vehicle E No: Any Passenger: Vehicle F No: Any Passenger: Any Witness: Witness Contact No. : Was There Any Video Capture? (Yes / No Was There Any Audio Recorded? Yes /(No) Scene Accident Photos Taken? Yes / No Person Reporting Driver / Owner / Both Original Language Used English / Mandarin Others: Have you been approach by unknow person soliciting (s) / offering accident claims assistance? Yes / (No



CERTIFICATE OF INSURANCE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: KEN MIZUSAWA

Period of Insurance

: 17 Mar 2023 To 16 Mar 2024

Engine No.

: 2NR5593622

Chassis No.

: MR2B23F3301251538

Vehicle No.

: SNK05797

Policy No.

: 7230022857

Endorsement No.

Issued Date

: 02 Mar 2023 11:43

ABOUT THE COVER

Make/Model

: TOYOTA VIOS 1.5

Engine Capacity/Tonnage : 1,496.00 CC

Sum Insured : Market Value

First Year of Registration : 2023

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person 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.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of S\$\$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less

Age Condition

: All Age Condition

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 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, 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 - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

KEN MIZUSAWA - \$600 (Own Damage), \$600 (Flood Cover)

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

1.Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188 2. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

For other 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 Apple App Store or Google Play Store.

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 1960, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504667271

INCHCAPE AUTO TOYOTA - BSTU060

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Latonio Mae Joy Sioco Latonio