

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 Authorised 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 ability.
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 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 Report	17/09/2014 21:38
Date Of Accident	14/09/2014 18:00
Exact Location Of Accident	JOHOR IMMIGRATION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ8642Z
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Insured/Policyholder

Name Of Registered Owner	ABDUL MUTHALIB BIN MOHD HASHIM
NRIC No	S0147479J

Vehicle Particulars

Manufacturer	TOYOTA
Model	RUSH
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?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Private Car

Insurance Company

Name of Insurance Company	AXA Insurance Singapore Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P1104636
Cover Note Number	

Driver

Name of Driver	ABDUL MUTHALIB BIN MOHD HASHIM
NRIC No	S0147479J
Date Of Birth	14/05/1950
Occupation	Indoor
Date Of Driving Pass	26/02/2000
Driving Experience	14 Years And 6 Months
Gender	Male
Mobile Number	(Local) +65-85980432
Fax Number	
Contact Number	Home-85980432
EEmail Address	NOEMAIL
Address	BLK 10 JOO SENG ROAD #12-104
Postcode	1336
Was driver an employee of the Insured's Company	No

If No, Relationship of the Driver with the Insured	Owner
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Unknown - REFER TO THE SKETCH AND STATEMENT
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No

Details of Police Action

Was the accident reported to the police?	Yes
If Yes, Please state which Police Station	
Police Station Name	Aljunied Neighbourhood Police Post
Police Station Address	ROAD: Blk 13 Joo Seng Road , POSTCODE: 360013 , COUNTRY: Singapore
Police Station Contact	TEL NO: 1800-2809999 - FAX NO: 62815960
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGA416X
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Name of Driver	JERINAL SINGH
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

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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.

[Handwritten Signature]

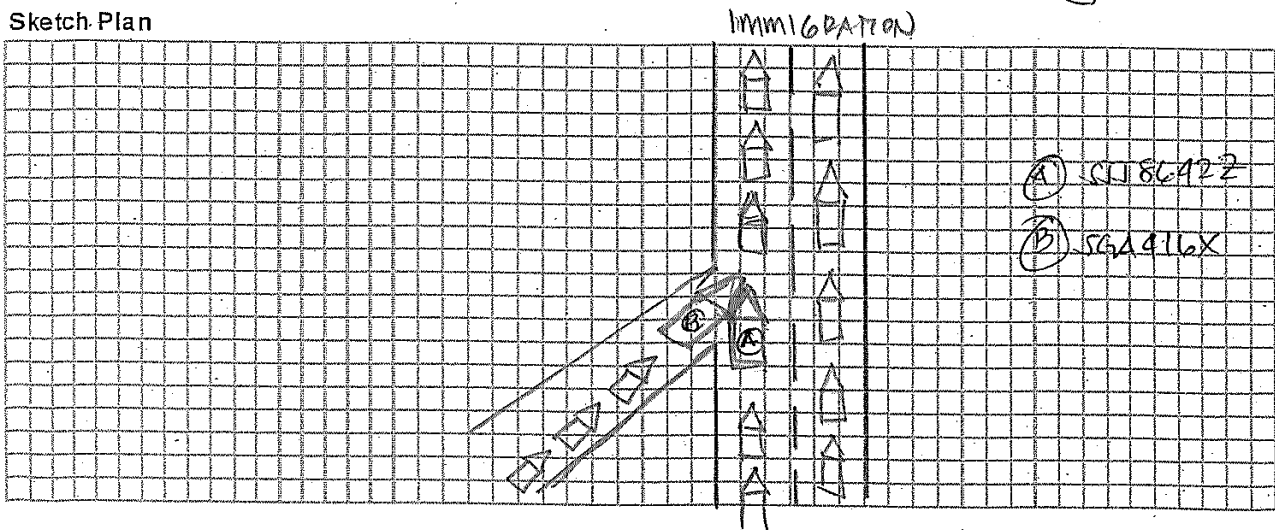
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

[Handwritten Signature]

Sketch Plan



On 14/9/14 at about 6PM, I was at JB immigration travel towards Singapore. My car was in the CAR LANE. It was a traffic jam at the point. We were travelling in the car with my wife. We were inching in very slowly toward the junction.

On my left is the Crossover Underpass Lane, then my CAR Lane and on my right is the CAR/BUS Lane. I was in the centre CAR LINE and heavy traffic jam.

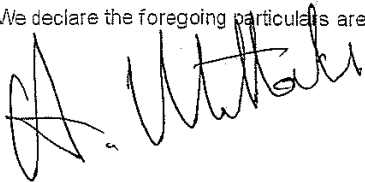
Suddenly a car on my left brush past me and rubbed my car on the Bottom CAR left fender. There was RUB MARKS on my left fender. There was no ~~set~~ big knock damage as the car brush past me.

I did not knock the car. I was in the jam. If I knock the car then there will be a knocking mark. There was no Dent or knock mark on his car. I do not agree to pay damages to his car as I do not cause the accident. He rubbed

Declaration

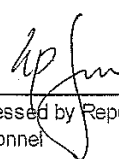
my car.

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel

Sketch Plan Pg.3

POLICE REPORT (NP299)

Police Station Of Origin
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999



E/20140914/2072

1 of 2

Report No. E/20140914/2072

Date/Time Report Made 14/09/2014 21:41		Vide Report No.		Station Diary No. 21	
Name Of Informant ABDUL MUTHALIB BIN MOHD HASHIM		Address APT BLK 10 JOO SENG ROAD #12-104 SINGAPORE 360010			
ID Type / ID No. NRIC NO / S0147479J		Contact No. Home/Office		Mobile 85980432	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation Manager		Sex Male	Age 64	Date of Birth 14/06/1950	Race Malay
Institution/School Name		Language			
Date/Time Of Incident 14/09/2014 18:00 - 14/09/2014 18:05		Location Of Incident Occured towards Johor Bahru Immigration towards Singapore			

Brief details.

On 14/09/2014 at about 6pm, I was at Johor Bahru Immigration travelling towards Singapore when my car was being rub by another vehicle on my left side of my car.

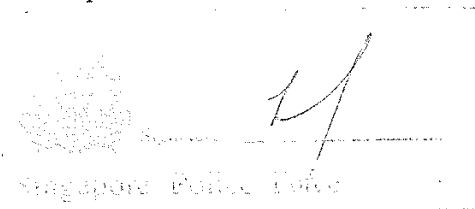
There was no injuries on both parties. However, my car sustained no damages. But the other party's car suffered black marks on the right side of the car.

I wish to inform that there is no in built camera. I only had one passenger which is my wife. No police attended the scene. I am driving a toyota rush with license plate SJJ8642Z.

I acknowledged that no police investigation will take place. I am lodging this report so as to indemnify myself

Signature Of Officer Recording The Report: E / Muhamad Nabil Bin Rosli	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/09/2014 21:41
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / TEO SHAO YI FIONA Contact No.: 63914742	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)



E/20140914/2072

2 of 2

CONTINUATION OF REPORT

Report No. E/20140914/2072

from any future claims.

The particulars of the other party as follows:

Jerinal Singh

SGA416X, Toyota

B/131 Serangoon Ave 3, Chiltern Park

+6598475995

Signature Of Officer Recording The Report:

E / Muhamad Nabil Bin Rosli

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

E / Tanglin Police Divisional Investigation Branch /

TEO SHAO YI FIONA

Contact No.: 63914742

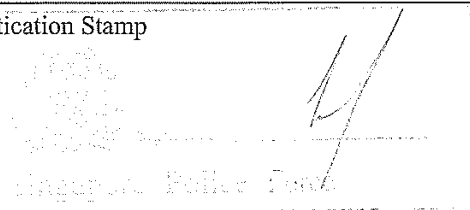
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Date/Time:

14/09/2014 21:41

Classification Of Case:

Authentication Stamp



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg.1

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MCD51410965419 Vehicle Registration No : SJ8642Z
Name(as shown in NRIC): Abdul Muthalib Bin Mohd Hashim
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : 50147479J
Address : Block 10 Joo Seng Road.
Contact (Tel) : - (H/P) : 85980432
(Email) : -
Date of Accident : 14 Sept 2014 Time of Accident : 10:00hrs.
Place of Accident : Johor Immigration.
Insurance Company : Alfa Asia Pacific 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:

I amend the following insurance certificate policy number and the following
insurance certificate.

Signature of Vehicle Owner / Driver

Date:

10 Anson Road #06-16 International Plaza Singapore 079903 Phone : + 65 6224 0010 Fax : +65 6224 0030
Operating Hours : Monday to Friday 9am to 5pm

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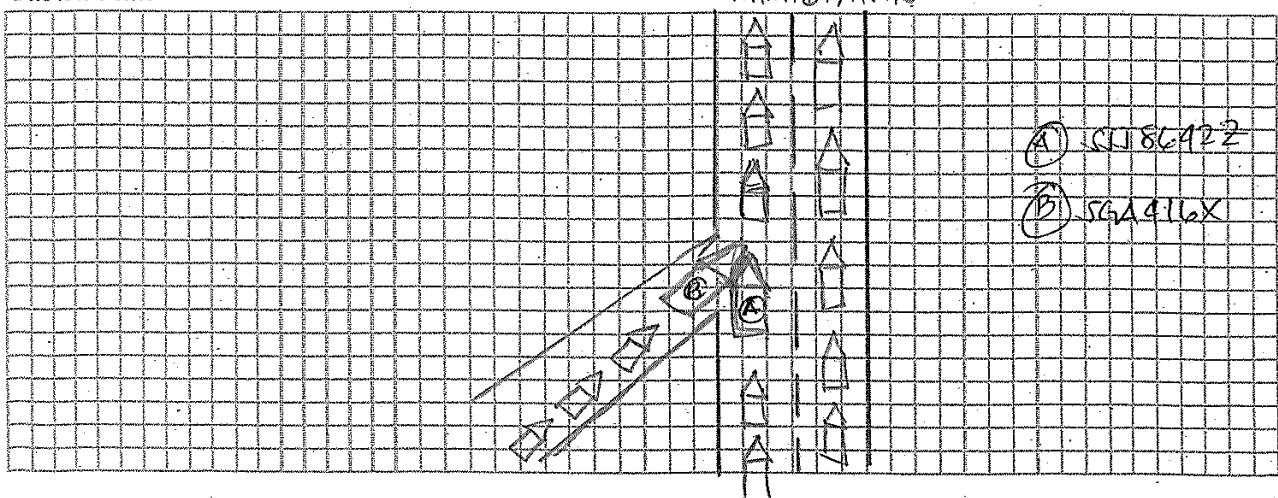
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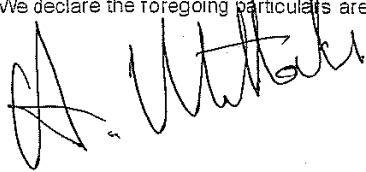
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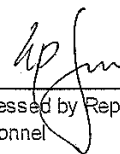
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Occupation Manager	Sex Male	Age 64
	Date of Birth 14/06/1950	Race Malay
Institution/School Name	Language	
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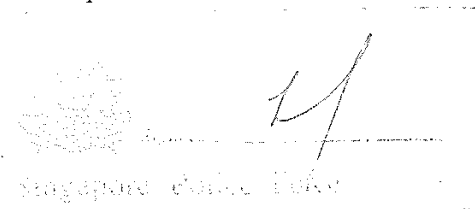
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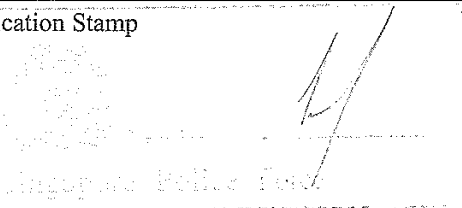
SGA416X, Toyota

B/131 Serangoon Ave 3, Chiltern Park

+6598475995

Signature Of Officer Recording The Report: E / Muhamad Nabil Bin Rosli	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/09/2014 21:41
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / TEO SHAO YI FIONA Contact No.: 63914742	Classification Of Case:

Authentication Stamp



AXA INSURANCE SINGAPORE PTE LTD
 8 Shenton Way, #27-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel:(65)63387288 Fax:(65)63382522
 Website:www.axa.com.sg
 GST Registration Number: M2-0009922-2
 customer.service@axa.com.sg



PRIVATE MOTOR
 POLICY SCHEDULE
 RENEWAL
 Original

POLICY INFORMATION		Policy No. : VPA/P1104636	
Source	: (01) 04254 E-THICS MANAGEMENT		
Insured	: ABDUL MUTHALIB BIN MOHD HASHIM		
Address	: BLK 10 JOO SENG ROAD #12-104 SINGAPORE 360010		
Business/Profession	: - Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.		
Period of Insurance : From 26/09/2014 To 25/09/2015 (Both Dates Inclusive)			
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			
PREMIUM			
Premium After 50.00% : SGD 800.18			
NCD			
Prem	W/Shop	Disc	: SGD 120.03
15.00%			
GST	7.00%	: SGD 45.23	
Annual Premium		: SGD 691.37	
Total Payable		: SGD 691.37	
RISK DETAILS THE MOTOR VEHICLE			
Type Of Cover	: Comprehensive		
Regn No.	: SJJ8642Z		
Type Of Use	: Private Car		
Make/Model	: TOYOTA RUSH 1.5X A		
Year of Manufacture	: 2008	Seating Capacity (excl. Driver)	: 04
Body Type	: SPORTS UTILITY VEHICLE	Engine C.C.	: 1495
Engine No.	: 3SZ2075211	Chassis No.	: J200E0020754
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)		
Limitations as to Use : As specified in Certificate of Insurance			
Hire Purchase	: UNITED OVERSEAS BANK LIMITED		
Basic Own Damage Excess	: SGD 300.00		
Named Drivers			
1 ABDUL MUTHALIB BIN MOHD HASHIM			
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS			
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:			
MEMORANDUM A			

This Policy is protected under the Policy Owners'			