

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	21/07/2016 17:53
Date Of Accident	21/07/2016 09:00
Exact Location Of Accident	ANG MO KIO AVE 6 TWDS LENTOR
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGM5062L
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Insured/Policyholder

Name Of Registered Owner	SITI AISHAH BINTE MOHD NAZARUDIN
NRIC No	S8608660C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94249936
Alternative Phone No	Office-94249936

Vehicle Particulars

Manufacturer	TOYOTA
Model	BELTA-1.3 (A)
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	Third Party
Vehicle Category	Private Car

Insurance Company

Name of Insurance Company	AXA Insurance Singapore Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA030838/1
Cover Note Number	

Driver

Name of Driver	MUHAMMAD SYAHID BIN ABDUL LATIF
NRIC No	S8616122B
Date Of Birth	11/06/1986
Occupation	Indoor
Date Of Driving Pass	18/07/2006
Driving Experience	10 Years And 0 Months
Gender	Male
Mobile Number	(Local) +65-81338141
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 825 WOODLANDS ST 81 #03-36
Postcode	730825
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Spouse
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Side Swipe- Same Direction
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
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

THE ACCIDENT HAPPENED ON 21/07/2016 AT 9AM ALONG ANG MO KIO AVE 6 TOWARDS LENTOR. I WAS TRAVELLING STRAIGHT AT LANE 3 WHEN SUDDENLY, VEHICLE B SCRATCHED AND BUMPED MY LH REAR BUMPER UP TO LH REAR FENDER. MY VEHICLE A WAS PUSHED FORWARD AND VEHICLE B HIT THE VEHICLE C IN LANE 2 AND CAUSED VEHICLE C TO SCRATCHED MY RH REAR SIDE.

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

Vehicle Registration Number	SJD1656L
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Name of Driver	
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	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJG7931L
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE C
Name of Driver	

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

Sketch Plan Pg.1

SKETCH PLAN

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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.

Subu 21/7/16

Policyholder's Signature / Date &
Time 2:28 PM

[Signature]

21/7/16

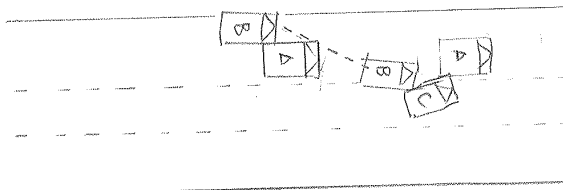
2:28 PM

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

Witnessed by Reporting Centre
Personnel

Sketch Plan

VEHICLE A: SGMS0Q2L
VEHICLE B: SJD195GL
VEHICLE C: SGG 7931L



Sketch Plan #2 Pg.1

Describe Circumstances of the Accident

The accident happened on 21/07/2016 at 9:00 AM along ANA MO KIO AVE, TOWARD(LENTOR. I was traveling straight at lane 3 when suddenly vehicle B scratched and bumped to my LH rear bumper up to LH rear fender. My vehicle A was pushed forward and vehicle B hit the vehicle C in lane 2. and caused vehicle C to scratched my RH rear side.

Declaration

We declare the foregoing particulars are true in every respect.

Shula 21/7/16 [Signature] 21/7/16 2:28 pm _____
 Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre
 Time 2:28 pm & Time Personnel

Insurance Co.	AXA		
Vehicle NO.	SEM5062L	Date Of Accident	21, 07, 2016
<input type="checkbox"/> Reporting Only			
<input type="checkbox"/> Own Damage Claim			
<input checked="" type="checkbox"/> Third Party Claim	AUTO REPAIRS		

LETTER OF UNDERTAKING

I/We, SITI AISYAH BINTE MOHD NAZARUDIN, the owner of vehicle no. 89M5062L

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, AUTO NCARS SERVICES PTE LTD

Signed and Acknowledge by:


[Signature]
Nric no. and signature of policyholder

Company Stamp

21/07/2006
Date

Sketch Plan #4 Pg.1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8608660C**


 Name
SITI AISHAH BINTE MOHD NAZARUDIN
سیتی عائشة بنت محمد نذالدين


Race
MALAY

Date of birth
04-04-1986


Sex
F

Country/Place of birth
SINGAPORE






5585833

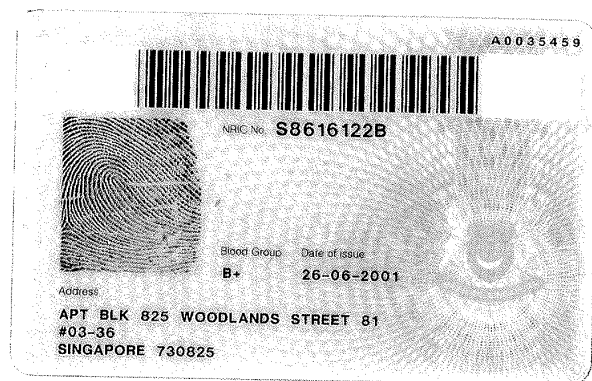
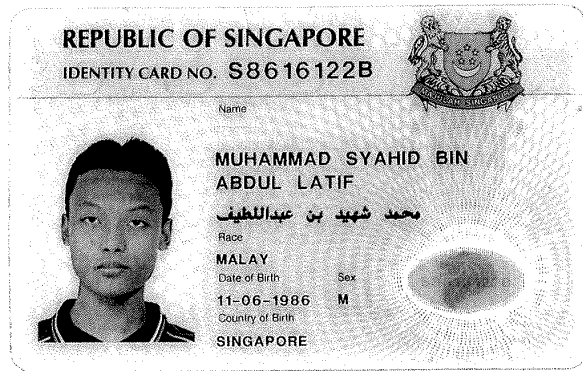


NRIC No. **S8608660C**



Date of issue
09-04-2016

Address
**APT BLK 176 ANG MO KIO AVENUE 4
#02-733
SINGAPORE 560176**





TRAFFIC POLICE DEPARTMENT
SINGAPORE POLICE FORCE
10, UBI AVENUE 3
SINGAPORE 408865



Class 3: 18 Jul 2006

Private & Confidential

MUHAMMAD SYAHID BIN ABDUL LATIF

APT BLK 825 WOODLANDS STREET 81 #03-36
SINGAPORE 730825

7 working days

You will receive your photocard licence by registered mail within 1 month from date of application unless you made a special request to collect at Traffic Police Department at time of application.

S8616122B
(3)

C001129874

\$25/-

21/07/2016

(Please do not detach)

YOU CAN DRIVE WHILE AWAITING THE
DELIVERY OF YOUR PHOTOCARD
DRIVING LICENCE.



redefining / insurance

AXA Insurance Singapore Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

account number
 03811

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Road Transport Act, 1987 (Malaysia)
 -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	SITI AISHAH BINTE MOHD NAZARUDIN	Certificate number	GA030838 / 1
Cover	Comprehensive	Chassis number	SCP921016762
Plan name	Private APW	Engine number	2SZ1548344
NCD applicable	10%		
Vehicle registration number	SGM5062L		
Period of insurance	from 20/04/2015 to 19/04/2016 (both dates inclusive)		
Finance loan company	CENTURY TOKYO LEASING (S) PTE LTD		

Persons or classes of persons entitled to drive*

- (a) The usage of the vehicle by the Policy Holder (Insured) is not covered under this policy.
 (b) Any Named Driver as stated in the Policy:
 1. MUHAMMAD SYAHID BIN ABDUH LATIF
 (c) Any person who is driving on the Policyholder's order or with their permission

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.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, 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; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* 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.

EXCESS	Basic Own Damage Excess	SGD 250.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Memoranda, clauses, warranties & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Singapore Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).
 The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

