Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 17/10/2016 13:59

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Gender

Date Of Driving Pass

Driving Experience

Mobile Number

Fax Number
Contact Number

EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	17/10/2016 13:50
Date Of Accident	28/09/2016 12:50
Exact Location Of Accident	PERMAS 7 JOHOR BAHRU
Country/State of Loss	Malaysia/Johor Darul Takzim
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGM7344K
Insured/Policyholder	
Name Of Registered Owner	BEK KOK SWEE
NRIC No	S6967860B
Email Address	BEK.MARK@YAHOO.COM
Mobile Phone No	(LOCAL) +65-91528570
Alternative Phone No	Others-91528570
Vehicle Particulars	
Manufacturer	NISSAN
Model	SUNNY-1.6 EX (A)
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
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	GA030267/1
Cover Note Number	26/04/2016 - 26/10/2017
Driver	
Name of Driver	BEK KOK SWEE
NRIC No	S6967860B
Date Of Birth	25/05/1969

Indoor

01/11/2010

5 Years And 10 Months

(Local) +65-91528570

BEK.MARK@YAHOO.COM

Others-91528570

BLK 539 ANG MO KIO AVE 10 Address

#18-2571

Postcode 560539

Was driver an employee of the Insured's Company No Owner

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident Collision- Head to Rear (TP Hit Insured)

Weather Conditions Clear Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident?

Foreign Vehicle Registration Number WNH4497 (Private Car)

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

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name Teck Ghee Neighbourhood Police Post

ROAD: Blk 321 Ang Mo Kio Street 31, POSTCODE: 560321, COUNTRY: Police Station Address

Singapore

No

Yes

Police Station Contact TEL NO: 1800-4599999 - FAX NO: 64574478

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO THE SKETCH PLAN BY DRIVER

Are accident photos available for attachment?

Yes

WNH4497

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

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

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. The 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre

Sketch Plan

To words John Joyn,

To words John Joyn,

To words John Joyn,

MAZDA

MORK SHOP

Permas Joya.

Gata.

B.

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	Reter to the police report.
	Forther in the lottle half.
·····	
	
	() Claim OD/TP at Ah Lim Motor () Claim OD/TP at other workshop Reporting Only
	Remarks: Please forward a copy of my efile accident report to:
	My workshop :
	email address : & myself :
	email address: bek. wark @ yahoo. com.
	Janes Com.
	Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

Declaration

IWe 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

Page 4 of 16

Witnessed by Reporting Centre Personnel





1 of 2

Report No. F/20161017/2059

POLICE REPORT (NP299)

Police Station Of Origin Teck Ghee NPP 321 Ang Mo Kio Street 31 SINGAPORE 560321

Tel No: 1800-4599999

Date/Time Report Made	Vide Re	Vide Report No.		Station Diary No.		
17/10/2016 12:56				14		
Name Of Informant	Address					
BEK KOK SWEE	APT BLK 539 ANG MO KIO AVE 10 #18-2571					
	SINGAPORE 560539					
ID Type / ID No.	Contact	Contact No.				
NRIC NO / S6967860B	Home/O	Home/Office		Mobile		
			91528570			
Nationality	Email Ad	Email Address				
MALAYSIAN						
Occupation	Sex	Age	Date of Birth	Race		
EMPLOYMENT AGENT	Male	47	25/05/1969	Chinese		
Institution/School Name	Language					
	English					
Date/Time Of Incident	Location	Location Of Incident				
28/09/2016 12:50	PERMAS 7					
***************************************	MALAYSIA					

Brief details.

On 28/09/2016 at about 1250hrs, I was driving my champagne gold colour Nissan Sunny bearing license plate number SGM7344K along Permas 7, Johor Bahru. When I was turning right to a minor road, one gold colour Proton Malaysian vehicle bearing license plate number WNH4497, which was travelling from the opposite direction, hit onto my vehicle. We stopped and spoke to each other. I had already reported this matter to the Malaysian Traffic Police and I was summoned by them (receipt no. 0201002016N0016742) for the amount of RM300/-. My vehicle's rear left tail light was plamaged and the

Signature Of Officer Recording The Report:	Signature Of Informant/
F / Staff Sgt MUHAMMAD-AZRI BIN ABDUL RAHIM	1 Dogum
Signature Of Interpreter: Not applicable	Date/Time ^{f.} 17/10/2016 12:56
Officer In-Charge Of Case: F / Ang Mo Kio South N.P.C / Staff Sgt MUHAMMAD AZRI BIN ABDUL RAHIM Contact No.: 64519999	Classification Of Case:

n Stamp		-SN 085
) Signature	· ·	





Signature Of Inførmant

Classification Of Case:

Date/Time: // 17/10/2016 12:56 2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20161017/2059

fender was dented. The other vehicle's front bumper was also damaged. None of us were injured.

Signature Of Officer Recording The Report:

F / Staff Sgt MUHAMMAD AZRI BIN ABDUL RAHIM

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: F / Ang Mo Kio South N.P.C / Staff Sgt MUHAMMAD AZRI BIN ABDUL RAHIM Contact No.: 64519999

Authentication Stamp

SN 085

Singapors Police Force

Page 6 of 16

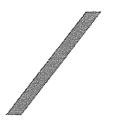
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achiadak Osotooskierateo 300 OSOTOOSOT@OOS4TO@ I\l ferue shum ness nama2 nagan i Hoebo zoesa teeti nemed nailtud : 16/10/2016 : 16/10/2016 : 5/10/2016 : 5/20/2016 : 5/20/2016 4/N rockuc eme sudejner gestr neseved nebee isis sodec definu neseved naiss sises sentenae ; uve: ombor Resit Induk : 0201002016M0016742 BEELT RASMI

> AISYAJAM ALASIG SLIOG

_				kamu				E
55415(WERAH CODE)] 2003	2 2	A T S L A K Type of Vehicle Very annual sebab-sebab yang munasabah untuk mempercayai bahawa kamu di bawah:	8.7	KAMU ADALAH DENGAN INI DIPERINTAHKAN supaya hadir sendiri atau melalui peguam YOU ARE HEREBY ORDERED to appear in person or by a counsel adapsan Mahkamah Majistret di.	Suray pering Suray pering Suray pering Suray pering Suray pering Suray pering MOHOD Traffit (JES) Pegawaf Polific (JES) Pegawaf Polific (JES)	lahah ini boleh / tidak boleh dikompaun Sfence is compoundable No. Tel. 19D: Sesalahan ini boleh dikompaunkan, kamu dinasihatkan boleh mengkompaunkan Fence is compoundable, vou diere advised to have the offence compounded
E D	KOD DA AREA (Каеран-Каеран Рексановитли Јалан [Noths Di Bawah Subseksyen 33(1)] 2003 Rold Transport [Notice Under Subsection 53(1)] Rules 2003 $\mathbb{R}\{\mathbb{R} \in \mathbb{R} \setminus \mathbb{R} \in \mathbb{R} \setminus \mathbb{R} \in \mathbb{R} \}$		Pendaftaran Kenderaan or Community of Community of Community (Community) or Vehicle Programment Registration No. Community of Community (Community) of Community (Community	Couran Jalan 1987 1. Act 1987 1. C.	endiri atau me	(Surayarapeung Pegr Felayabath Trafik Balai(Polis Trafik (JBS) ACHOR Trafik (JBS) Police Officer	. IPD: na boleh mer
≪.	u)] a)} 1. JALAN 198 I.CT 1987	Л Ваман Ѕов <i>спом 53(1)] 1</i>		munasabah u u have comm	Akta Pengangkutan Road Transport Act Kacdah-Kacdah- Rules jam (pagi/petang) ime (a.m.lp.m.)	upaya hadir s by a comsel	B I	able No. Tel. IPD: kamu dinasihatkan bo
	ih' You Pay' SCHEDULE Borang 1 Form 1 [perenggan 2 (a)] [paragraph 2 (a)] AKTA PENGANGKUTAN JALAN 1987 ROAD TRANSPORT ACT 1987	леван Рекалискитм Јалал [Notis Di Bawah Subsersyen 53 Rojd Transport [Notice Under Subsection 53(1)] Rules 2003 $\{\ell\}$		b-sebab yang vah:	A A A B A B A B A B A B A B A B A B A B	NTAHKAN s	pukul inne pukul inne	mpaun ipoundable inkan, kamu
	iin' You Pay' M II If AKTA PENG ROAD 7	engangkutan] <i>nsport (Notice</i> Suul (npunyai sebal berikut di bav	(A)	INI DIPERI	20	NOTA: Kesalahah ini boleh / tidak boleh dikompaun NOTE: This offence is compoundable (not compoundable ''Yik kesalahan ini boleh dikompaunkah, kan "'If the offence is commonwich by yangan kan
23	Bayar Lel usmi PDRI gov.my	н-Кабран Рез Road Tran KC ! (ration No. C. C. YA saya mempunyai alahan yang berikut c		KAMU ADALAH DENGAN II YOU ARE HEREBY ORDERED		than ini boleh / tidak boleh dikompaun Jence is compoundable / not compound esalahan ini boleh dikompaunkan, esalahan ini boleh dikompaunkan,
(Polis 257—Pin. 2/12) P.U. (A) 104/2003 PENDUA	Bayar Lewat,] ore You Delay, Rujuk Portal r, www.rmp.	422	ingenala	No. Pendafaran Kenderaan Motor Vehicle Registration No. BAHAWASANYA saya me	Seksyen	KAMU ADALA YOU ARE HERE di hadapan Mahkam	Pada 2 0n Dikeluarkan pada	: Kesalahah in : This offence "Jika kesalal "If the offen
(Polis 257- P.U. (A) 10	The MG	Kepada	No. Kad NRC Na Alamat. Address	No. Pen Motor V BAI tefalt me	Seks Section Kated Rute di (te at (pu at (pu pada on (d	KAl YOL di hadap before M	Pada On Dikeluark Issued on	NOTA:





Certificate number

Chassis number

Engine number

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

account number

GA030267 / 1

OG16414755

JN1CFAN16Z0103334

03094

Certificate of Insurance

Motor Vehicles (Turd-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 BEK KOK SWEE
Cover Comprehensive
Plan name Private APW
NCD applicable 40%

Vehicle registration number SGM7344K

Period of Insurance from 26/04/2016 to 26/10/2016 (both dates inclusive)

Finance loan company GE MONEY PTE LTD

Persons or classes of persons entitled to drive*

(a) The Policyholder

(b) 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.

* Undations rendered inoperative by Section 8 of the Motor Validies (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Read Transport Act, 1987 (Malaysia), are not to be included under these headings.

SGD 400.00 SGD 100.00

EXCESS Basic Own Damage Excess
Windscreen Excess

An Additional Excess is applicable as follows:

- 1. \$\$500 for unnamed Authorised Driver 2. \$\$500 for declared Young and Inexperienced Driver
- \$45,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & 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

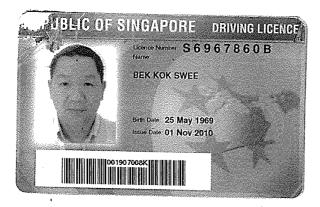
Important note

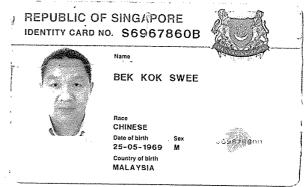
Policyholders are warned that on the sale of a motor vahicle they must somender the Cortificate of Insurance and the Policy to the insurance company. It the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with thesofoligation is an offence under the Motor Vehicle (Timit-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 habitity under the policy, renewal certificate, endorsement etc.

AXA Insurance Singapore Pte Ltd (M2-0009922-2) 8 Shenton Way, #27-01, AXA Tower, Singapore 068811 Customer Care Department, #81-01

1 of 3





91828570. Dy.

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS[ES]

Class 2B Motorcycles =< 200 cc Of Nov 2010 of the driver; and other motor vehicles =< 2500kg Of Nov 2010 of the driver; and other motor vehicles =< 2500kg





AXA INSURANCE SINGAPORE PTE LTD

1800-880 4888 (Within Singapore)
(65) 6880 4888 (International)

(65) 6338 2522

www.axa.com.sg

04 October 2016

BEK KOK SWEE BLK 539 ANG MO KIO AVENUE 10 #18-2571 SINGAPORE 560539

Dear Sir / Madam,

OUR REF: C0402442MC/VO YOUR REF: SGM7344K

ACCIDENT INVOLVING SGM7344K & WNH4497 ON 28/09/2016

We refer to the above subject matter. We have received third party claim(s) against your motor insurance policy.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We highlight that this accident has not been reported to us. Under the Motor Claims Framework (MCF), you are required to report any accident with the accident vehicle (whether damaged or not) within 24 hours or by the next working day after the accident. The primary purpose of this reporting is to provide your version of the accident to AXA. Omission to report the accident will result in a loss of your No Claim Discount (NCD) upon renewal of your policy, and will prejudice any claim(s) by or against you.

The report has to be lodged at any of our AXA Premium Workshops or reporting centres (subject to your policy). For the list of our Premium Workshops conveniently located throughout Singapore, please refer to the back of your Certificate of Insurance or the accompanying folder, or visit

https://www.axa.com.sg/customer-care/personal/motor/own_damage_accident_reporting.

Your full co-operation is required. Kindly submit the following when lodging the report which list is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- · Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)











