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 <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.

	ACCIDENT STATEMENT
Date Of Report	04/01/2018 10:27
Date Of Accident	03/01/2018 18:05
Exact Location Of Accident	BARTLEY ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKZ8168E
Insured/Policyholder	
Name Of Registered Owner	TAY MINGHAO, ERNEST
NRIC No	S8508121G
Email Address	ETAYMH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91135055
Alternative Phone No	OFFICE-91135055
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	GLA180 (R18 BI)
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 PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA147073/1
Cover Note Number	
Driver	
Name of Driver	TAY MINGHAO, ERNEST
NRIC No	S8508121G
Date Of Birth	18/03/1985

NRIC No S8508121G
Date Of Birth 18/03/1985
Occupation OUTDOOR
Date Of Driving Pass 20/09/2010

Driving Experience 7 YEARS AND 3 MONTHS

Gender MALE

Mobile Number +65-91135055

Fax Number

Contact Number OFFICE-91135055
EMail Address ETAYMH@GMAIL.COM

BLK 159 TAMPINES STREET 12 Address

#04-91

Postcode 521159

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

NO

NO

NO

General Information of the Accident

Type Of Accident **CHAIN COLLISION**

Weather Conditions **DRIZZING** Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

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

1 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO THE ATTACHMENT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YP84C

Vehicle Make/Model/Colour

Details Of Properties Vehicle Category

VELLAIKKANNU MURUGAN Name of Driver

NRIC/Passport Number G8135670Q **Contact Number** 86493969

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

SJV2496E

Vehicle Registration Number

Page 2 of 38

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

YAHYA BIN JANFAR

S0037839I

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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:
 - 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.

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	-1			
			CAARB	A: SKZ8168E B: YP 84C C: SJV249
SCRIBE CIRCUMSTAN	TABLE OF THE PARTY.	NEED CON.		
good sately Vericle B	y distani	vnderp ce hen	rss and ve	stopped my venicle,
at a Fe	st speed	and i	+ seemed -	to be unable to enicle veering right
l braced	for im	pact a	nd verticle	B hit the rear
CLARATION We declare the foregoing	particulars are true	in every respec	et.	
icyholder's Signature		's Signature	The state of the s	Reporting Centre Personnel's Signature Name:

Date & Time:

NRIC/FIN No.:

CERTIFICATE OF INSURANCE Pg. 1





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

-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

TAY MINGHAO ERNEST

Certificate number

GA147073 / 1

Cover Plan name Comprehensive Flexi+ Chassis number Engine number WDC1569422J158428 27091030735056

NCD applicable Vehicle registration number 30% SKZ8168E

Period of Insurance from 21/01/2017 to 29/01/2018 (both dates inclusive)
Finance loan company MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD

Persons or classes of persons entitled to drive*

(a) The Policyholder

(b) Any Named Driver as stated in the Policy:

1. ONG LAY ENG

(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

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.

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

labo

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.

AXA Insurance Singapore Pte Ltd (M2-0009922-2) 8 Shenton Way, #27-01, AXA Tower, Singapore 068811 Customer Care Department, #B1-01

1 of 3

OWNER IC & DRIVING LICENCE (FRONT)



OWNER IC & DRIVING LICENCE (BACK)



ACCIDENT SCENE PHOTO 1



ACCIDENT SCENE PHOTO 2



ACCIDENT SCENE PHOTO 3











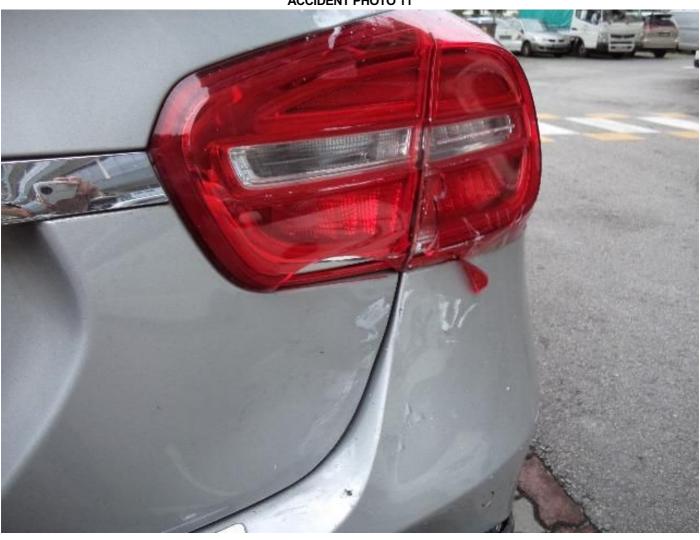
















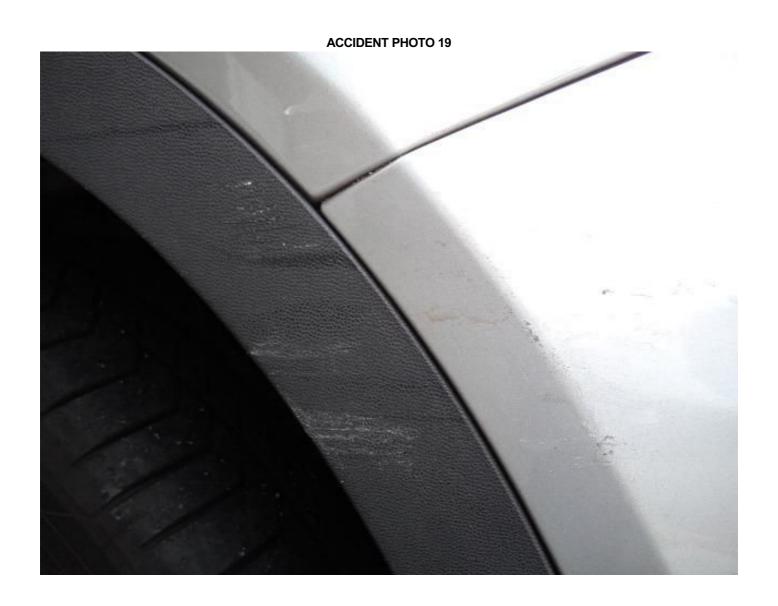




















ODOMETER READING



CHASSIS NUMBER



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 - 17:00 UEN: \$643500206 / GST Reg. No.: M400017735

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: Name(as shown in NRIC): TAY MUNGHAO, ERNEST NRIC/FIN/Passport No: 585081246 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate 19-40#, 61.12 ST. 12, #04-91 Address Singapore(521159. 91135055 Mobile No.: Contact (Tel) etaymb@gmail.com Email Address _Time of Accident: 6.05 PM. Date of Accident : 03 (D1 (2018 Place of Accident : BARTLEY ROAD Insurance Company: AXA (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: OT HZIW INCLUDE THE POLLOWING IN MY ACCIDENT STATEMENT: WHEN THE LORRY HIT MY CAR, IT VEERED TO THE LEFT PUSHED GOT FORWARD & HIT THE CAR IN PRONT OF ME.

Policyholder / Driver's Signature Date:

05/1/2018

Reporting Centre Personnel's Signature Name: Word Choon Yen. NRIC/FINNO : #7778684 Q

Date: 0-()/0-1/18

GWM/C odderdumtern Vs

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