

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 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	13/02/2018 11:23
Date Of Accident	13/02/2018 01:15
Exact Location Of Accident	SERANGOON AVE 3 BESIDE NEX
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5451T
Insured/Policyholder	
Name Of Registered Owner	TRIPLE J TRANSPORT
Co Reg No	53205182C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-94344759

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE COMMUTER GL 3.0 AT 2WD 4DR LWB
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	BUS

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA166188/1
Cover Note Number	

Driver

Name of Driver	MORALES GERARD JERALD
NRIC No	S1469995C
Date Of Birth	27/07/1961
Occupation	INDOOR
Date Of Driving Pass	20/09/1984
Driving Experience	33 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94344759
Fax Number	
Contact Number	
EEmail Address	JAZMIE15@YAHOO.COM.SGG

Address	BLK 119 POTON PASIR AVE 1 #08-1018
Postcode	350119
Was driver an employee of the Insured's Company	YES
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
Weather Conditions	CLEAR
Road Surface	DRY

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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2

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

PLEASE REFER TO ATTACHED

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	SHD1064T
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	SILVER CAB
Vehicle Category	TAXI
Name of Driver	CHIA KEOK KHNG
NRIC/Passport Number	S0027237Z
Contact Number	91072933
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN

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7. 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:
 - (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.
- (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.



[Handwritten Signature]

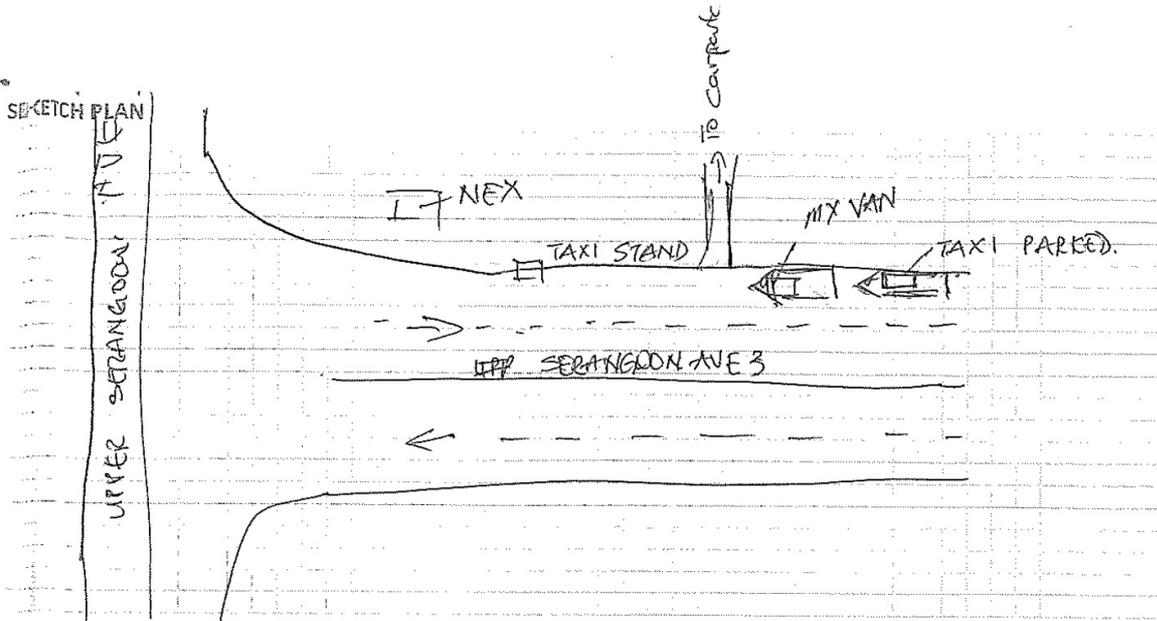
[Handwritten Signature]

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.:

Sketch Plan Pg. 2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On this night as I was travelling along the Serangoon Ave 3 as I was behind the taxi about ~~10~~ a car lanes away I realised suddenly that the taxi stopped to wait for his relief driver and stopping along double yellow line. As I ~~was~~ realise I jammed my brakes but too near already. So it hit slightly on his right side of the taxi. As the road was abit busy I was travelling at 50 kmph. Nobody was injured as it was a slight bang. The taxi sudden stopped ~~may~~ made me to jam brabe and without having hazard lights on. Stopping to wait for his relief driver, and parking on the double yellow lines.

DECLARATION

I/We declare that the particulars are true in every respect.



Policyholder's Signature
Date & Time:

[Handwritten Signature]

Driver's Signature
(If driver is not the policyholder)
Date & Time: 13/2/18 11:31

[Handwritten Signature]

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S1469995C



Name
MORALES GERARD JERALD

Race
FILIPINO

Date of Birth
27-07-1961

Sex
M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1469995C**

Name
MORALES GERARD JERALD

Birth Date: **27 Jul 1961**

Issue Date: **31 Oct 2003**

000967103B




Land Transport Authority

VOCATIONAL LICENCE

Licence No : S1469995C

Name : **MORALES GERARD JERALD**

Issue Date : **25/5/2005**

E) Please visit www.lta.gov.sg to check the status of this vocational licence



2554283



NRIC No S1469995C



Blood Group Date of issue
A+ 30-12-1994

APT. BLK 119 POTONG PASIR AVENUE 1 #08-1018
 SINGAPORE 350119
 NRIC No: S1469995C Date: 22-07-2001 No: 4006125

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	20 Sep 1984

NP 428A

Licence No: S1469995C



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	19/01/1998
04	BUS ATTENDANT	19/01/1998



skuta



redefining / insurance

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

date
 22/02/2017

policy number
 CB1 / GA166188

Certificate of Insurance

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

Policy details

Policyholder name	TRIPLE J TRANSPORT	Certificate number	GA166188 / 1
Cover	Comprehensive	NCD	0%
Engine number	1KD2665728	Chassis number	KDH2230030202
Vehicle Registration number	PC5451T		
Period of Insurance	from 22/02/2017 to 21/02/2018 (both dates inclusive)		
Sum Insured	Market Value at The Time of Loss		
Finance Loan Company	THINK ONE CREDIT PTE LTD		

Persons or classes of persons entitled to drive

Any person provided he is in the Policyholder's employ and/or is driving on their 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.

Limitations as to use*

- (a) Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
- (b) Use only in the Republic of Singapore.

The Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed testing
- (b) Use whilst drawing a trailer except the towing (other than for reward) of anyone disabled mechanically propelled vehicle

* Limitations rendered inoperative by Section 8 of the Commercial 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

Section I	SGD2,000.00
Section II	SGD1,500.00
Windscreen	SGD200.00

An additional excess is applicable as follows:

Additional All Claims Excess of S\$2,000 is applicable for any named/unnamed drivers who:

- a) Is 18 years old to 26 years old and/or
- b) Is 66 years old and above and/or
- c) with driving experience of less than 1 year on the relevant classes of driving license



AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B1-01

TRIPLE J TRANSPORT

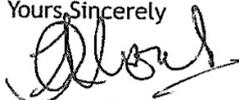
119, #08-1018,
Potong Pasir Ave1 S (350119)
Reg No 53205182C

13th February 2018

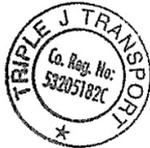
TO WHOM IT MAY CONCERN

I, Jazinhno G. Morales, S8619469D, hereby the sole propretior of the company authorised Gerard Morales, S1469995C, to drive PC 5451T.

Yours Sincerely



Jazinhno Morales
HP. 92422491



Sketch Plan Pg. 6

Date: _____

To: Owner of Vehicle Number: _____

PC5451T

The following has been advised to you via your workshop, EDGE through their staff, Brenda

Please tick the applicable box if you had been advised on the content as seen below:

- You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- You had been advised by the workshop on the liability and merits of the case accordingly.
- You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- The Estimation waiting time for the spare parts to arrive is _____
The estimated arrival time does not include the repair period.
- You will be driving the vehicle out despite being advised by the workshop mechanical personnel that the vehicle may not be road worthy.
- For vehicles below Three (3) years old, your insurance company will use only genuine or parts to repair your vehicle.

For vehicles above Three (3) years old, your insurance company will be carrying out r using any combination of genuine original parts and/or original equipment manufacture (OEM) parts.
- You had been advised by the workshop of the Twelve (12) months warranty for Own repairs on workmanship related to the accident.
- For vehicles below Five (5) years old, you had been advised by the workshop to check local distributor on your warranty status.
- Others _____

Signed and acknowledge by:

[Signature]

Name and signature of policyholder / authorised driver

[Signature]



Name and signature of workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



