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 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	20/02/2018 10:24
Date Of Accident	20/02/2018 08:55
Exact Location Of Accident	CTE TOWARDS MERCHANT ROAD
Country/State of Loss	SINGAPORE

Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKP9890Z	
Insured/Policyholder		
Name Of Registered Owner	ERLIN YEO YUAN NEE	
NRIC No	S9146256G	
Email Address	ERLIN91@MSN.COM	
Mobile Phone No	(LOCAL) +65-97959439	
Alternative Phone No	OTHERS-NOPHONE	
Vehicle Particulars		

Manufacturer AUDI

Model A1 SB 1.4 TFSI S-TRONIC (122BHP)

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?

YES

If No, Please state action to be taken

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number GA162817/1

Cover Note Number

Driver

Name of Driver ERLIN YEO YUAN NEE

NRIC No S9146256G

Date Of Birth 17/12/1991

Occupation INDOOR

Date Of Driving Pass 15/03/2012

Driving Experience 5 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97959439

Fax Number

Contact Number OTHERS-NOPHONE
EMail Address ERLIN91@MSN.COM

Address BLK 75C REDHILL ROAD

#05-74

Postcode 153075

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 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?

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : ANGUS LAM CHUN TAY

GENDER: : MALE

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?

NO NO

Circumstances of Accident

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 SLN994R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 15

SKETCH PLAN

IMPORTANT NOTICE

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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.

Policyholder's Signature

Date & Time: 20 Feb 2018

10.25 am.

Driver's Signature
(If driver is not the policyholder)

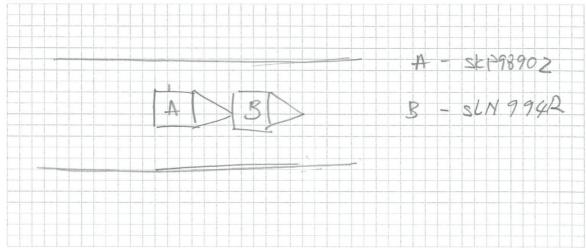
Date & Time:

Reporting Centre Personner's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: SKP 9890 Z	ACCIDENT DATE & TIME: 20 Feb 2018 8:55am
CONTACT NUMBER: 9795 9439	E-MAIL ADDRESS: anguskm 2009 @gmail-un
LOCATION: CTE TOWARDS merchant Road.	erlinal@msn-com
Herry Traffic , show moving, Edden brown	acce of front can due to that
- our A bit on the back of	rehide B. Ho inhance on buth partiers.
COV A front Lumper Lamage.	CAT B back honey and car place
dropped	
1-1	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HA	AVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN
OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PL	EASE CHECK YOUR POLICY FOR MORE INFORMATION
Please state/	~^
Claim Own Policy () Claim Third Party () Claim OD/TP at other workshop Reporting Only
DECLARATION	7

GIARMC SketchF

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

Policyholder Spignature
Date & Time: 2018

10. DOP

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:





Certificate number

Chassis number

Engine number

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

Certificate of Insurance

account number 03180

-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 Cover Plan name

NCD applicable Vehicle registration number Period of Insurance

Finance loan company

ERUN YEO YUAN NEE Comprehensive For Her

10% SKP98907

from 10/02/2018 to 09/02/2019 (both dates inclusive)

HONG LEONG FINANCE LIMITED

GA162817 / 1 WAUZZZ8X1CB250307 CAXB26964

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.

* 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 1,400.00 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. \$\$5,000 for undeclared Young and inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium

Additional clauses & endorsements to your policy

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 Pte Ltd

Authorised signature

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 falling which there would be no liability under the policy, renewal certificate, endorsement etc.

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

1 of 3

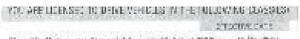
A	WA .	redefining / insurance
Da	ite:	20/02/18
		ner of Vehicle Number: OKD 9 890Z
Th	e foll	owing has been advised to you via your workshop, wova automotive P/L through their
Ple	ease t	ick the applicable box if you had been advice on the content as seen below:
1	1	You had been advised by the workshop that in the case 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.
()	There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
()	The estimated waiting time for the spare parts to arrive is The estimated arrival time does not include the repair period.
()	
(estimated arrival time does not include the repair period. You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the
()	estimated arrival time does not include the repair period. You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy. For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to
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Name and signature of workshop personnel including company stamp

Driving License







Chang SA. Matter expressed transplacting income (Abstract or 2000) and the Company of the Community of the C



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25-12-2/2016 APT BLS 750 PEDH III HOND WIS - 24 SINGSTON, PORTS

nds 20 05 2007 x2: 571 \$520

Licenso No. Services

365-0004

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Accident Photo







Accident Photo









