

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	20/02/2018 12:12
Date Of Accident	19/02/2018 15:25
Exact Location Of Accident	BOON LAY AVE (HDB CARPARK ENTRANCE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN8114H
Insured/Policyholder	
Name Of Registered Owner	ALTIVO PTE LTD
Co Reg No	201309497K
Email Address	KAIENN.ADMIN@ALTIVOGROUPS.COM
Mobile Phone No	
Alternative Phone No	OFFICE-62948858
Vehicle Particulars	
Manufacturer	ISUZU
Model	NPR85UH5A
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P1809133
Cover Note Number	
Driver	
Name of Driver	PICHAPILLAI MANI
NRIC No	G7459931T
Date Of Birth	07/01/1983
Occupation	INDOOR
Date Of Driving Pass	23/04/2013
Driving Experience	4 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86214478
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address -
 Postcode
 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 -
 Vehicle -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
 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) 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

ON 19/02/2018 AT ABOUT 3.25PM, I PARKED MY VEHICLE AT BOON LAY AVE BLK 216 HDB CARPARK ENTRANCE. I WENT TO THE SITE TO CHECK MY WORKERS. WHEN I CAME BACK, VEHICLE B (YN8542E) WHILE DRIVING OFF FROM PARKING LOT REVERSED BACK AND HIT ONTO MY STATIONARY VEHICLE.

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 YN8542E
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver AOWLAT MD
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

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.
- (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.



P. mani

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

A) YN 81411

B) YN 8542E



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/03/2018 at about 3:35 pm, I parked my vehicle at Boon Lay Ave Blk 216 HDB Carpark entrance. I went to the site to check with my workers. When I came back, vehicle B (YN 8542E) while driving off from parking lot reversed back and hit on my stationary vehicle.

DECLARATION

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



Policyholder's Signature
Date & Time:

P. Mani

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

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

SGP/SP/ST/01/0000_V3

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	9497K
Vehicle Details	
Vehicle No.:	YN8114H
Vehicle to be Exported:	No
Intended De-registration Date:	26 Feb 2018
Vehicle Make:	ISUZU
Vehicle Model:	NPR85UH5A 3.0 MT TURBO 2WD 2DR 5.0T
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	4JJ11U8945
Chassis No.:	JAANPR85HF7100196
Maximum Power Output:	-
Open Market Value:	\$26,509.00
Original Registration Date:	13 May 2015
First Registration Date:	13 May 2015
Transfer Count:	0
Actual ARF Paid:	\$1,326.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	12 May 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$26,728.00
COE Rebate Amount:	\$19,270.00
Total Rebate Amount:	\$19,270.00

The information contained herein is correct as at 26 Feb 2018

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