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 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.	3	and the separation of the sepa
《自我的事题》,但是他们的一种,但是一种的	ACCIDENT STATEMENT	
Date Of Report	08/03/2018 17:20	
Date Of Accident	08/03/2018 14:20	
Exact Location Of Accident	ALONG ALEXANDRA RD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	数据 地名美国拉拉克 电电路电路
Vehicle Registration Number	SKB7170E	
Insured/Policyholder		
Name Of Registered Owner	ONG REN KAI BENJAMIN	
NRIC No	S8907179H	
Email Address	BENONGRK89@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-82981601	
Alternative Phone No	OTHERS-NOPHONE	
Vehicle Particulars		
Manufacturer	BMW	
Model	Z4-2.5 SDRIVE23I (A)	
Exact Purpose for which vehicle was being used at time of accident	AL 320	
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	GA288731	
Cover Note Number		
Driver		
Name of Driver	PHONG CHUN FONG	
NRIC No	S8870101A	
Date Of Birth	01/04/1988	
Occupation	OUTDOOR	
Date Of Driving Pass	25/02/2015	
Driving Experience	3 YEARS AND 0 MONTHS	
Gender	FEMALE	
Mobile Number	(LOCAL) +65-84810491	The state of the s
Fax Number		4 I
Contact Number		* 8.
EMail Address	NOEMAIL	

Address

BLK 412 YISHUN RING RD #08-1893

Postcode

760412

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

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

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.

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

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

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties Vehicle Category

PRIVATE CAR

SJA6576S

DETAILS OF OTHER VEHICLE PROPERTY 1

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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 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 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:

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

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

Sketch Plan Pg. 2

SKETCH PLAN	2.20	
Accident Date: 8318 Tin		
My Vehicle A: STA 657-65	/ehicle B:SKB 孔やE	Vehicle C/Others
		\wedge
	1 1 1	
		5
		OR HADE STAKETER
Variation of the state of the s		040/11/9
910		
ESCRIBE CIRCUMSTANCES OF THE AC	CIDENT	
Vols A Gudden by Jan	Eriste and 7	vas behind him was
not able to stop	in stop. Porned th	seem back risher.
THE TOTAL TO STOP	n = up production	a roly rich
>		
*		

		±
Claim OD / JP at Ah Lim Motor	() Claim OD / TP at othe	er workshop () Reporting Only
,	8	() repealing and
Remarks : Please forward a copy of my My workshop :	sille accident report to	
Email Address :		
& Myself :		
Email Address : bentokai ?	59 Domail com.	
Note: Please take note that your insurer		
your own policy. Kindly check with your o	wn insurer for more information.	
DECLARATION /We declare the foregoing particulars are tru	ue in every respect.	
The acciding particulars are the		1
(DE)		A N
(L)	All was a second of the second	
Policyholder's Signature	Driver's Signature(If driver is not the police	
Date & Time: 8/5/18 1610H	Date & Time 8/3/18 16/07	Personnel

wWWMI Svershills*FeerigMi

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

EFFECTIVE DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive 25 Feb 2015 of the driver; and other motor vehicles =< 2500kg Class 3

Licence No: S8870101A

VP 428A







PHONG CHUN FONG

Name

M

Sex

CHINESE Date of birth ш

01-04-1988 Country of birth

MALAYSIA





AXA Insurance Pte Ltd

(65) 6880 4888 (Within Singapore)

(65) 6880 4740

⊠ customer.care@axa.com.sg

Www.axa.com.sg

Certificate of Insurance

account number 04140

-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

ONG REN KAI BENJAMIN

Certificate number

GA288731/1

Cover Plan name Comprehensive

Chassis number Engine number WBALM32050E494534 15577787N52B25AF

NCD applicable

Peace 0%

SKB7170E

Vehicle registration number Period of Insurance

from 09/11/2017 to 08/11/2018 (both dates inclusive)

Finance loan company

MAVDANIV

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 1.100.00 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
- 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 Pte Ltd

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