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.

By the lodgement of this report to the insurers, you he aforesaid.	ereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	21/04/2018 09:46
Date Of Accident	20/04/2018 10:25
Exact Location Of Accident	PAYA LEBAR JUNCTION TO PIE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKB8478L
Insured/Policyholder	
Name Of Registered Owner	SIMON FRANCIS WALSH
Passport No/FIN	G5512980R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90610983

HOME-90610983

Alternative Phone No **Vehicle Particulars**

VOLVO Manufacturer

Model XC90 T5 A/T ABS D/AB 4WD 5DR TC

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?

REPORTING ONLY If No, Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number GA161853

Cover Note Number

Driver

Name of Driver HERMILDA BINTE JUMA'AIN

NRIC No S7613430H Date Of Birth 03/05/1976 Occupation INDOOR Date Of Driving Pass 12/05/1997

Driving Experience 20 YEARS AND 11 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-81989469

Fax Number

Contact Number

EMail Address NOEMAIL

30 MARYLAND DRIVE SINGAPORE 277522 Address

Postcode

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

NO

NO

General Information of the Accident

Type Of Accident **COLLISION - HEAD TO REAR**

Weather Conditions **CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

2 Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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) 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 SKETCH PLAN

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 **SLB1774R** Vehicle Make/Model/Colour TOYOTA

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)





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

Certificate of Insurance

account number

00914

-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

WALSH SIMON FRANCIS

Certificate number

GA161853 / 1

Cover Plan name Comprehensive Flexi

Chassis number Engine number

YV1CZ5957B1594949 B5254T4500357

NCD applicable Vehicle registration number 50% SKB8478L

from 01/02/2017 to 29/06/2018 (both dates inclusive)

Finance loan company

Persons or classes of persons entitled to drive*

(a) The Policyholder

Period of Insurance

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

1. HERMILDA BINTE JUMA'AIN

(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

Windscreen Excess

Not Applicable

- An Additional Excess is applicable as follows: 1. S\$500 for unnamed Authorised Driver
 - 2. \$\$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 Workshops.

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

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.

> ANIKA INSURANCE BROKERS & CONSULTANTS PTE LTD Co. Reg. No. 197800194N

Your Broker ...

1 of 3

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

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

Date of issue 02-10-2006

30 MARYLAND DRIVE SINGAPORE 277522 NRIC No: \$7613430H

Date: 09/06/2015



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7613430H

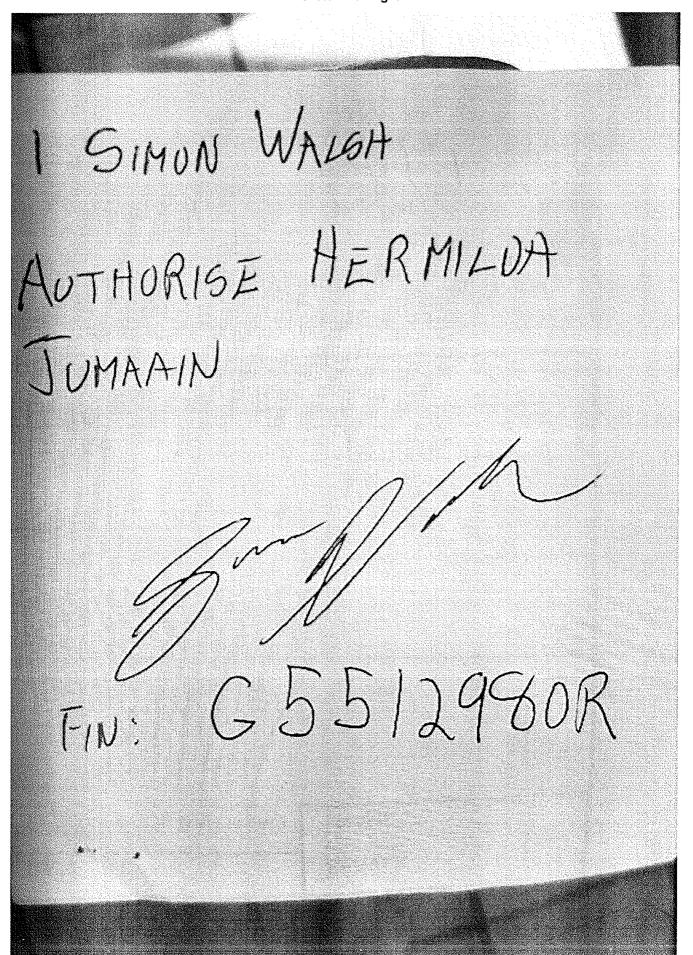


HERMILDA BINTE JUMA'AIN

حيرميلدا بئت جوماعين Race JAVANESE Date of birth Set 03-05-1976 F

Country of birth SINGAPORE

47**61343**0H



SKETCH PLAN		
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party involved we		
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Important:		/
	- Reporting Only d by the workshop that in the event that you wish to	
claim against your own policy (OD CLA	NM), There is a FOURTEEN (14)	- Claim OD
DAYS CLAUSE WHEREBY MUST BE MA from the day of the occurrence.	ADE within the stipulated time frame	- Claim TP
		- Claim OD/ TP at other workshop
DECLARATION		
I/WE declare the foregoing particu	iars are true in every respect.	
	Ho	
***************************************	The state of the s	Many
Policyholder's signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time	(if driver not the policyholder)	Name:
	Date & Time 21/4/2018	Nric/Fin No.

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:

- 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 daims (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
- 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.
- 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: 21/4/2018

entre Personnel's Signature

Name:

NRIC/FIN NO

Vehicle Details			
Vehicle No.:	SKB8478L		
Vehicle Type:	P11 - Passenger Station Wagon/Jeep/Land Ro	ver	
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	VOLVO		and the second second second
Vehicle Model :	XC90 T5 A/T ABS D/AB 4WD 5DR TC		
Chassis No. :	YV1CZ5957B1594949		e entre commente de la commentación de la commentac
Propellant:	Petrol		
Engine No. :	B5254T4500357		
Engine Capacity :	2521 cc		
Maximum Power Output:	154.0 kW (206 bhp)		
Maximum Laden Weight:	2720 kg		
Unladen Weight :	2094 kg		
Year Of Manufacture :	2011		
Original Registration Date :	30 Jun 2011		
ifespan Expiry Date:	•		
COE Category:	E - Open Category		
Quota Premium :	\$62,000.00		
COE Expiry Date :	29 Jun 2021	des en elemente en en el mente en en en en elemente de elemente en en el mente en mente en mente en en en en e	er e
Road Tax Expiry Date:	29 Jun 2018		
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ntended Transfer Date :	27 Apr 2018		
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Offsetting Over Payment):	· 		, 1210
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Amount Payable (From 30 Ju	n 2018 to 29 Jun 2019)		
	Amount Before GST	GST Amount	Amount After GS
	(S\$)	(S\$)	(55
	25.00	-	25.0
Fransfer Fee :			
Fransfer Fee : Sub Total :			25.00
	1,824.00	**************************************	25.0 1,824.0

You may print this page for reference.

OK Print

















REPORTING MILEAGE



