

MG SOLUTION PTE LTD
23 Kaki Bukit Ave 4 (South Wing) #02-03B
Vicom Inspection Centre, Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
Co. Reg. No. : 201427944N

Date : 23/04/2018

To : AXA INSURANCE PTE LTD
Tel : 1800 880 4741
Fax : 6886 4740
Email : cst@axa.com.sg
motor.surney@axa.com.sg

By Fax & Email

Vehicle In #
SLP 7225X

Attn: Motor Claims Department

Dear Sir,

Re: **Accident involving motor vehicle Nos.** SLP 7225X and SJP 3739G along
NANYANG AVE BESIDE ENTRANCE TO HALL 9 CAR PARK on 20/04/2018

We are instructed by KOH GIM ANN (Name of Claimant) to notify you of a road traffic accident on the above mentioned. A copy of the Singapore Accident Statement / Traffic Police Report filed is enclosed.

As a result of the accident, our client's / customer's vehicle has been damaged. Before our client / we proceed to repair the damaged vehicle, please let us know within **2 working days** of your receipt of this notice whether you or your insurer would like to conduct a **Pre- Repair Survey** of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client / we shall proceed to repair the vehicle without further reference to you.

Thank you.

Yours faithfully.



MS. HENG YOKE HONG
HP: 9188 6931

FOR SURVEYOR

Please initial here after completion of pre-repair inspection. Thank you.

Appointed Surveyor: _____
(Name & Signature)

Date & Time of Inspection: _____

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	23/04/2018 15:01
Date Of Accident	20/04/2018 12:00
Exact Location Of Accident	ALONG NANYANG AVE BESIDE ENTRANCE OF HALL 9 C/PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP7225X
Insured/Policyholder	
Name Of Registered Owner	KOH GIM ANN
NRIC No	S1579134I
Email Address	HANQUAN8882@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96699819
Alternative Phone No	OFFICE-60000000

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 1.5X CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE

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 PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA220417/1
Cover Note Number	

Driver

Name of Driver	KOH GIM ANN
NRIC No	S1579134I
Date Of Birth	26/05/1963
Occupation	INDOOR
Date Of Driving Pass	14/11/1985
Driving Experience	32 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96699819
Fax Number	
Contact Number	OFFICE-60000000
EEmail Address	HANQUAN8882@HOTMAIL.COM

Address BLK 556, HOUGANG ST 51 #07-350
 Postcode 530556
 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 -
 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?
 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? YES
 If Yes, Please state which Police Station
 POLICE STATION NAME [OTHER] T/20180420/2165
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

Report please refer to sketch Plan

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Remarks/ Reasons: GET FROM WORKSHOP
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJP3239G
 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)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report accurately the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and for the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to regulate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the respective 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 lodging 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 (including, processing, handling and/or dealing with my claims (collectively the "Purposes").
- (b) All insurer(s) who have insured vehicle(s) involved in the 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:
- (i) my Personal Information may/are to be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including the Insurers' lawyers/law firms), which may/are to be used for one or more of the above Purposes;
 - (ii) the Personal Information may/are to be stored and used by computer systems (including any third party system on which the Personal Information is stored) owned or managed by the Insurers or their service providers;
 - (iii) my Personal Information collected under this Form may be shared to:
 - (a) all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulations, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (b) for complying with requirements under any regulations, laws or court orders.

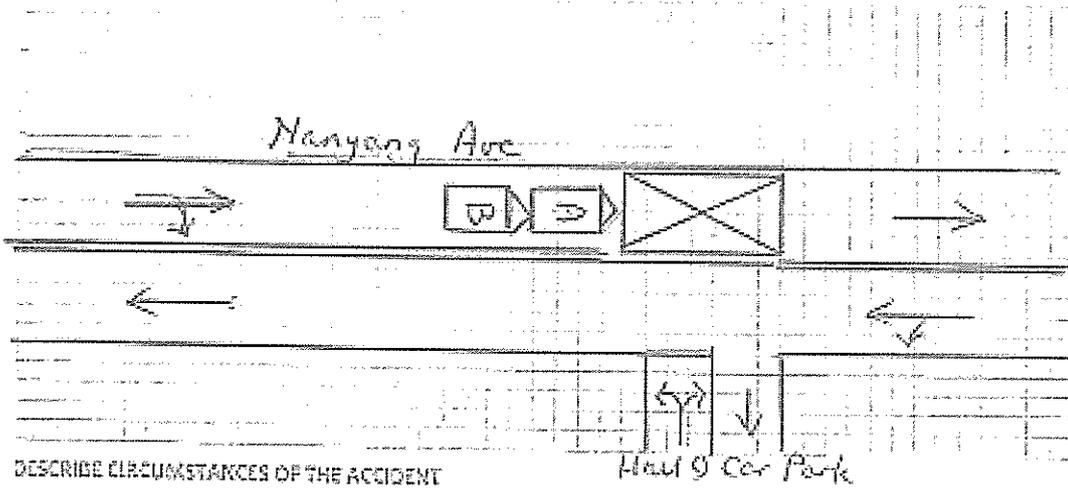
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Annak
NRIC/PIN No: 57131309C

Sketch Plan #2

SKETCH PLAN



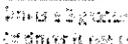
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/04/2018 at 1202 hrs at along Nanyang Ave beside entrance to Hall 9 Car Park. I was travelling on the above mentioned road and came to a stop while waiting to turn Right into Hall 9 Car Park. While waiting, I heard a loud bang from behind and before I could go down from my vehicle, Vehicle (B) squeeze thru from my left and speed up without stopping. My Vehicle (A) Rear Portion was seriously damaged. I had CCTV footage that had recorded the whole incident. I had also made a Police Report for hit & Run Case.
 (A) SLP 7225 X
 (B) SJP 3239 G

DECLARATION

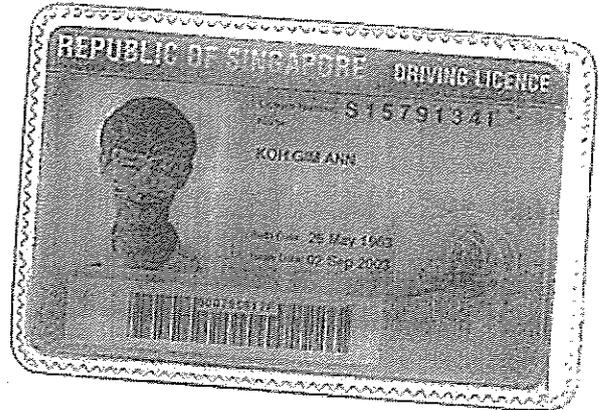
I/We declare the foregoing facts are true & correct.


 Police Officer's Signature
 Date & Time:


 Driver's Signature
 (If driver is not the person making the statement)
 Date & Time:

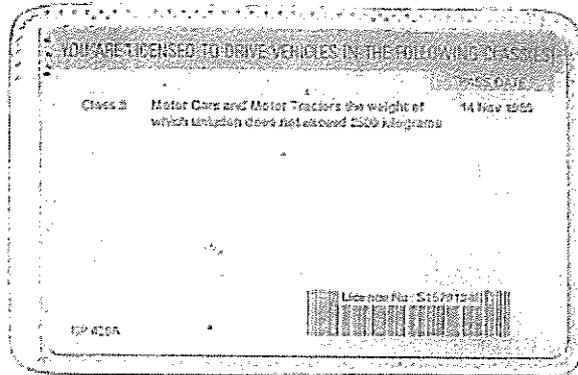

 Reporting Centre's Signature
 Name: **RENJIE**
 Date & Time: **27/04/2018**

Driving License



owner & driver

S4P 7225X



Insurance Cert



redefining / insurance

AXA Insurance Pte Ltd
 1600 600 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

Account number
 05322

Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 127) Motor Vehicles (Third Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia)

Policy details

Policyholder name	ROH CIM ASIN	Certificate number	GA220417 / 1
Cover	Comprehensive	Chassis number	RU11206920
Plan name	Flex	Engine number	L1584405910
ICD applicable	90%		
Vehicle registration number	SLP7229X		
Period of insurance	from 15/09/2017 to 14/09/2018 (both dates inclusive)		
Finance loan company	MALAYAN BANKING BERHAD		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
- (b) Any Named Driver as stated in the Policy:
 - 1. NG SUAN CHOK
- (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 imposed hereunder by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 127) and Section 59 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 Authorized Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. 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

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 127) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

[Signature]
 Authorized signature

会利企业私人有限公司
 CHUAN LEE ENTERPRISES PTE LTD
 1 Bukit Satok Crescent #04-02
 Weega Plaza Singapore 658064
 Tel: 6469 0002 Fax: 6469 2777

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. 127). The Premium Warranty Clause requires the premium to be paid in full within a specific period of time which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903822M)
 5 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B1-01

Police Report



**SINGAPORE
POLICE FORCE**



T201804202165

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 3

Report No: T201804202165

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/04/2018 22:18		Vide Report No.:		Station Diary No.: 149	
Informant's Particulars					
Name of Informant KOH GIM ANN			Address: APT BLK 556 HOUGANG STREET 51 #07-35D SINGAPORE 530556		
ID Type / ID No.: NRIC NO / S15791341			Contact No.: Home/Office: Mobile: 99898319		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 54	Date of Birth: 26/05/1963	Type of Informant: Driver		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: SALES EXECUTIVE			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/04/2018 12:00	Type of Location: Straight Road
Location: Along Road 1 NANYANG AVENUE Along Nanyang Avenue before the entrance to Hall 9 Carpark				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJP3239G	Car	MAZDA	MAZDA3SP LUX	Red	Slightly Damaged	0
SLP7225X	Car	HONDA	VEZEL 1.5X CVT	Silver	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLP7225X	AXA INSURANCE SINGAPORE PTE LTD	GA220417	15/06/2017	14/06/2018

Police Report



**SINGAPORE
POLICE FORCE**



T/20180420/2165

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

2 of 3

Report No. T/20180420/2165

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KOH GIM ANN	ID No	S1579134I
Related Vehicle	SLP7225X (Car)	Contact No.	96699819
Hospital/Clinic	IDOC CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	20/04/2018	Date Discharge	20/04/2018
No. of Days granted Medical Leave	03	Degree of Injury	NIL

Brief Details.

On 20/04/2018 at about 1200hrs. I was driving my car(Registration No. SLP 7225X) along Nanyang Avenue before the entrance to Hall 9 Carpark on a one lane road when I was stationary and waiting to turn right into Hall 9. Suddenly, I heard a loud bang and felt an impact. I suffered sprain on my back. Before I could go down to make a check, the car(Registration No. SJP3239P) squeeze through on my left and speed up without stopping to render assistance. There are dent damages on my car's rear. There is in-car CCTV inside my car. I later went to IDOC Clinic and has got 3days of MC. I am lodging this Traffic Accident report as it is a hit-and-run incident.

Police Report



SINGAPORE
POLICE FORCE



T/20180420/2165

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No: T/20180420/2165

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 BOH YONG SENG 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2018 22:18
Officer In Charge Of Case: TP / HRT / SI TAN LEE HWANG DAWN Contact No: 65476215  SA 085	Classification Of Case:
Authentication Stamp NP:08  Signature: _____	
Singapore Police Force	