

## 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	08/05/2018 13:47
Date Of Accident	08/05/2018 10:35
Exact Location Of Accident	NEWTON CIRCUS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR5622K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ACE DRIVE PTE LTD
Co Reg No	201004348K
Email Address	APRIL.KOH@ACEDRIVE.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64444400

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRER USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VFX/P1861952
Cover Note Number	

### Driver

Name of Driver	SUDARNO TASMIN
Passport No/FIN	610512058881
Date Of Birth	11/05/1961
Occupation	INDOOR
Date Of Driving Pass	01/06/2016
Driving Experience	1 YEAR AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85858731
Fax Number	
Contact Number	
Email Address	MMITED@HOMTAIL.COM

Address	17 TAMPINES STREET 86 #09-39
Postcode	528591
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	2
Passenger 1	NAME: : MIMI TEDOEN GENDER: : FEMALE

#### 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

FROM NEWTON CIRCUS GOING TO TURN LEFT TO KENG LEE ROAD SLOWLY, SUDDENLY A VEHICLE B (SKH 8779 L) CAME FROM LEFT AND HIT BACK OF MY CAR FROM LEFT SIDE.

#### 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	SKH8779L
Vehicle Make/Model/Colour	
Details Of Properties	CAR B
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**

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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.

  
Ace Drive Pte. Ltd.

Policyholder's Signature  
Date & Time:

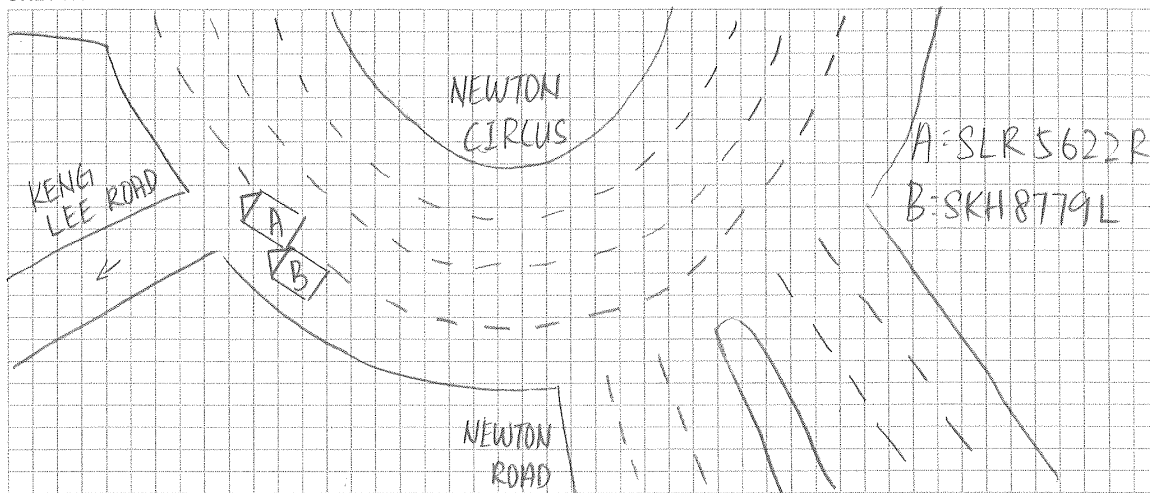


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

From Newton Circus going to turn left to Keng Lee Road slowly, suddenly a vehicle B (SKH 8779 L) came from left and hit back of my car from left side.

## DECLARATION

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

~~ACE  
DRIVE  
Ace Drive Pte. Ltd.~~

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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



A circular logo for Specialists Motor Ltd. The text "SPECIALISTS MOTOR" is written in a circle around the top, and "LTD" is at the bottom. In the center, the word "Trans" is written in a stylized script font, with a horizontal line passing through it.

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

**AXA INSURANCE PTE LTD**

8 Shenton Way, #24-01  
 AXA Tower, Singapore 068811  
 Customer Service Centre #B1-01  
 Tel:(65)63387288 Fax:(65)63382522  
 Website:www.axa.com.sg  
 GST Registration Number: 199903512M  
 customer.service@axa.com.sg

**CERTIFICATE OF INSURANCE**

■ 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)

CERTIFICATE NO.	: VFX/P1861952	Account No. : 03936
Coverage	: Comprehensive	
Sum Insured	: Market Value At The Time Of Loss	
Name of Policy Holder	: ACE DRIVE PTE LTD	
Vehicle Registration No.	: SLR5622K	
Period of Insurance	: From 14/11/2017 To 13/11/2018 (Both Dates Inclusive)	

**PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\***

Named Driver(s) as stated in the Policy

1. ANY AUTHORISED DRIVER

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.

**LIMITATIONS AS TO USE\***

(a) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(b) Use for social, domestic and pleasure purposes.

The Policy does not cover

(a) Use for racing, pace making, reliability trial or speed-testing

(b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle

(04)

**EXCESS :**

All Claims-Any Author'd Driver : SGD 800.00

Windscreen Excess : SGD 100.00

\* 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.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

**VIRTUAL INSURANCE AGENCIES PTE LTD**

192 Waterloo Street #02-02  
 Skyline Building, Singapore 187866  
 Tel: (65) 63350083 Fax: (65) 63350040

**AXA INSURANCE PTE LTD**

  
 Authorized Signature



Issued by - SGOSTPR on 28/11/2017


**IMPORTANT :**

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).

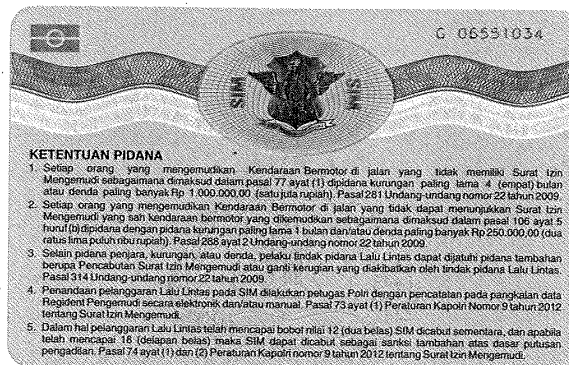
FOR INDIVIDUAL CUSTOMERS : Cover Under the policy is valid only upon the payment of the full premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS : Please refer to the Premium Warranty Clause on the policy

<b>No. 0059296</b>  <b>INDONESIA</b> International Motor Traffic  <b>Surat Izin Mengemudi Internasional</b> <b>INTERNATIONAL DRIVING PERMIT</b>  Konvensi Lalu Lintas Kendaraan Bermotor tanggal 8 November 1968 <i>Convention on Road Traffic of 8 November 1968</i>  <b>01-June-2019</b>	<b>KORPS LALU LINTAS POLRI</b>  Jakarta  <b>01-June-2016</b>  Tanggal Date
1. <b>SUDARNO TASMIN</b> 2. <b>MAKASSAR</b> 3. <b>11 May 1961</b> 4. <b>CITRA V BLOK A-4/5 A KANAL JAKGAR</b> 5.	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="display: flex; flex-direction: column; gap: 5px;"> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">A</div> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">B</div> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">C</div> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">D</div> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">E</div> </div> <div style="text-align: center;">    </div> </div> <div style="margin-top: 10px;"> <p style="text-align: right; font-size: small;">Signature of holder</p> <p><b>DISQUALIFICATIONS:</b>          The holder is deprived of the right to drive in the territory of ..... until .....          At ..... on .....          The holder is deprived of the right to drive in the territory of ..... until .....          At ..... on .....</p> </div>



a.n. KEPALA SUB  
 KEPALA BID. RESIDENT  
 KOMISARIS BESAR POLISI NRP. 63120378  
 EDIANDRI M.Si.





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

