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 <u>truthful and accurate</u> 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

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	ACCIDENT STATEMENT
Date Of Report	24/05/2018 17:11
Date Of Accident	23/05/2018 21:45
Exact Location Of Accident	TOA PAYOH CENTRAL (NEAR BUS DEPOT)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKQ5246E
Insured/Policyholder	
Name Of Registered Owner	LIM HOON CHENG
NRIC No	S1762880A
Email Address	LIMHOONCHENG@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81188824
Alternative Phone No	OFFICE-81188824
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	ESTIMA-2.4 (A)
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA073853/1
Cover Note Number	
Drivor	

Driver

Name of Driver LIM HOON CHENG
NRIC No S1762880A
Date Of Birth 20/07/1966

Occupation INDOOR

Date Of Driving Pass 10/07/1995

Driving Experience 22 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81188824

Fax Number

Contact Number OFFICE-81188824

EMail Address LIMHOONCHENG@YAHOO.COM

Address BLK 99A LORONG 2 TOA PAYOH #10-39

Postcode 310099 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

-

Insurance Company of Driver's Own Vehicle

-

NO

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions LIGHT RAINS

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?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT

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 SLK5198E Vehicle Make/Model/Colour MAZDA 3

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver CHEONG CHEE KEONG

NRIC/Passport Number S2537105D Contact Number 88235985

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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- 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)

lunderstand, 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 olicyholder's Signature

ate & Time: 24/5, 5:10 pm

Driver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

SKETCH PLAN		1.1C	1 - 1		
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) (1) (1)		
	2) _ \				
P P		> \			A=5KQ52466
214					B: SLK 5198 E
Totalhus	2				

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car B (SLK 5198E) is filtering out to the main road
but pansed atthough the bus was far away. Car A
which I was doing thought that car B has moved
but I moved forward and hit hum in the boumper.
Car B (SLK 5198E) is filtering out to the main road but pursed atthough the bus was far away. Car A which I was during, thought that car B has moved but I moved forward and hit hum in the bounger. There was a slight deat to Car B's bounger.

DECLARATION

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

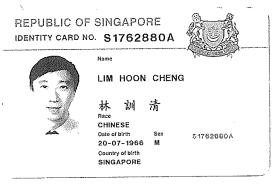
Policyholder's Signature Date & Time: 24

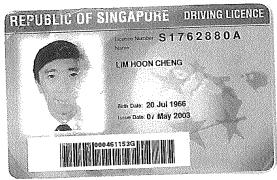
Driver's Signature

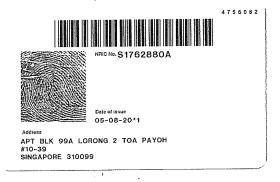
(If driver is not the policyholder)
Date & Time:

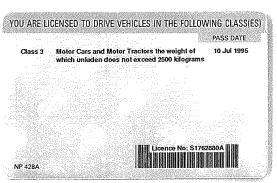
Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:













Certificate number

Chassis number

Engine number

AXA Insurance Pie I id

1800 880 4888 (Within Singapore) (65) 6380 4888 (International)

(65) 6880 4740

⊠ customer.care@ana.com.sg

53 www.exa.com.sg

Certificate of Insurance

account number 04154

GA073853 / 1

2AZJ116040

ACR507125025

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1980-Road Transport Act. 1987 (Malaysia) -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name Cover Plan name

NCD applicable Vehlele registration number Period of Insurance

Finance loan company

LIM HOON CHENG Comprehensive

Flexi 50% SK05246E

from 05/12/2017 to 04/12/2018 (both dates inclusive)

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 139) 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. S\$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

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 Perty Risks and Compensation) Act. (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

AXA Insurance Pie Lid

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 cartificate, endorsement etc.

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

Lof 3

· Data	24/05/2018
7or	Owner of Vehide Number: SEQSZP6E
	following has been advised to you via your workshop, CDGE through
. Plea	se tick the applicable box if you had been advice on the content as seen below:
<i>J</i>	You had been advised by the workhop that in the event that you wish to daim against you own policy, there is a Fourteen (14) days clause whereby the daim must be made within the stipulated timeframe from the day of occurrence.
()	You had been advised by the workshop on the liability and merits of the case accordingly.
()	will be making due to this accident
()	There will be delay to your vehicle repair due to the unavailability of spare parts locally an there is no other option except to indent it from overseas.
()	The estimated arrival time does not include tha repair period.
. ()	personnal that the vehicle may not be road worthy.
. (.)	parts to repair your vehicle.
	For vehicles above Three (3) years old, your insurance company will be carrying out rusing any combination of genuine original parts and/or original equipment menuic (OEM) parts.
2 ()	repairs on workmanship related to the accident.
.()	For vehicles below Five (5) years old, you had been advised by the workshop to check local distributor on your warranty status.
()	Others
Signie	id and admowledge by:
Ham	and signature of policyholder/ authorised driver
. Mame	and signature of workshop personnel including company stamp

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