

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	08/06/2018 17:17
Date Of Accident	08/06/2018 11:15
Exact Location Of Accident	CTE BRADDELL EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ8880R
Insured/Policyholder	
Name Of Registered Owner	FOOD PARADISE ENTERPRISE PTE LTD
Co Reg No	201216687M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67940180

Vehicle Particulars

Manufacturer	PORSCHE
Model	PANAMERA

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	CN881043
Cover Note Number	

Driver

Name of Driver	MARCUS NG KIM YEW
NRIC No	S8124230E
Date Of Birth	14/08/1981
Occupation	INDOOR
Date Of Driving Pass	27/02/2009
Driving Experience	9 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98338880
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	34 DEDAP ROAD
Postcode	809438
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	CLEAR
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?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG LANE 1 IN CTE NEAR BRADDELL EXIT ON 08/06/2018 AT 1115HRS. VEHICLE B APPLIED E-BRAKE AND I FOLLOWED SUIT. MY VEHICLE CANNOT STOP IN TIME AND COLLIDED ONTO REAR PORTION OF VEHICLE B. WET ROAD SURFACE THAT TIME.

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	SLG9690U
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	YAP SIEW LOON
NRIC/Passport Number	S7440369G
Contact Number	90103903
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLANIMPORTANT NOTICE

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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.

X

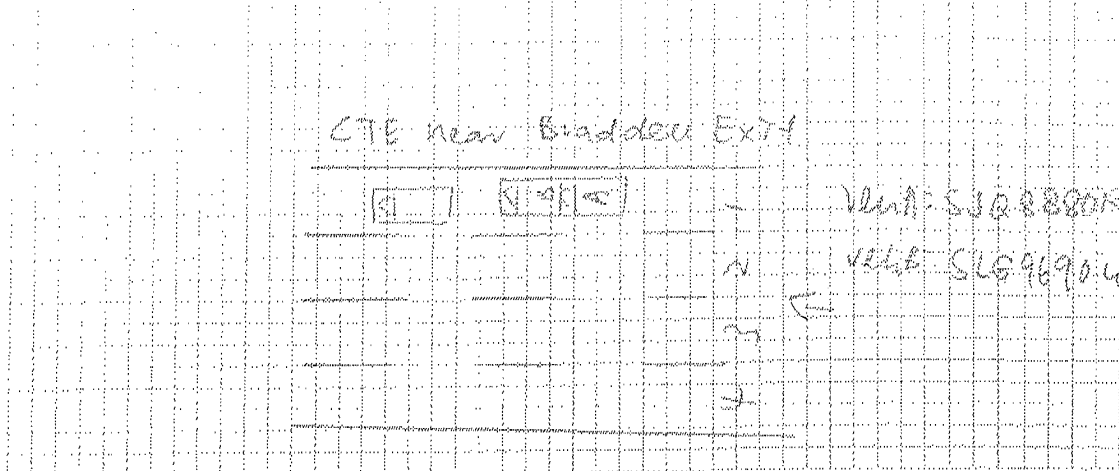
Policyholder
Date & Time:



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

I was travelling along lane 1 in CE near Braddell Exit on 06.06.2018 @ 11:54 hrs - vehicle B applied e-brake and I followed suit. My vehicle cannot stop in time and collided onto rear portion of vehicle B. Wet road surface at that time.

DECLARATION
I/We declare that the above particulars are true in every respect.

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.:

08-06-18;16:05 ;

3/ 3

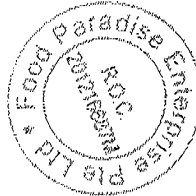
LETTER OF UNDERTAKING

We, Food Paradise Enterprise Pte Ltd, the owner of vehicle no. SJA 8880 R.

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, Hua May
Wong Workshop

Signed and Acknowledge by:



20121687M

Nric no. and signature of policyholder

Company Stamp

Date

27/6/18

Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: **S8124230E**
 Name: **MARCUS NG KIM YEW**
 Date of Birth: **14 Aug 1981**
 Issue Date: **27 Feb 2009**



0017131073

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8124230E**




Name: **MARCUS NG KIM YEW**
黄敬耀
 Race: **CHINESE**
 Date of birth: **14-08-1981**
 Country/Place of birth: **SINGAPORE**



Sex: **M**
 ID No: **S8124230E**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES:

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

PASS DATE

27 Feb 2009

MP 4294



License No. S8124230E

5463237



Identity No. S8124230E



Date of expiry: 15-04-2015

34 DEPAZ ROAD
SINGAPORE 808438
NRIC No. S8124230E

Date: 09/12/2017

INSURANCE

AXA INSURANCE PTE LTD

6 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Service Centre #B1-01
Tel: 6336 7258 Fax: 6336 2527
Website: www.axa.com.sg
GST Registration Number: B0909512M



Original

Agent Code: **15850**

Policy No. (if any)

New Business

SmartDrive Quote Ref:

MOTOR COVER NOTE

No. **CN881043**

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 186) - Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby **HIRED COVERED** under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	FOOD PARADISE ENTERPRISE PTE, LTD.
INSURED BUSINESS REGISTRATION NO.	201216687M
MAKE AND DESCRIPTION OF VEHICLE	PORSCHE PANAMERA
VEHICLE REGISTRATION NO.	SQ8880R
YEAR OF MANUFACTURE	2011
ENGINE NO.	B04191
CHASSIS NO.	WP0ZZ797ZBL003455
ENGINE CAPACITY/TONNAGE	3605
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	THIAM HENG AUTO (S) PTE LTD
VALUE (\$)	148,000
PERIOD OF INSURANCE	FROM: 01/03/2018 TO: 28/02/2019
EXCESS (\$)	\$2K SECT I (WITHIN S'PORE); \$2K SECT I INCLUDING FIRE & THEFT (OUTSIDE S'PORE); WINDSCREEN \$500
AXA PREMIUM WORKSHOP?	NO

WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 186) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by **G&M PTE LTD** on **01/03/2018 3:16pm**

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum of \$453.60 (inclusive of GST), if the policy is cancelled after the inception date.
- An administrative fee of \$526.75 (inclusive of GST) will be charged:
 - o Cover note issued and cancelled before inception.
 - o Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

Please note that the premium in full should be paid within a inception date shown above in order for the insurance cover to be valid.

For Corporate Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days of inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

MOTOR-COVER-001

(R)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

