

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	12/06/2018 12:54
Date Of Accident	11/06/2018 18:15
Exact Location Of Accident	CTE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM3167X
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Insured/Policyholder

Name Of Registered Owner	MOHAMED ABUBACKAR MOHAMED ELIYAS
NRIC No	S2638977A
Email Address	ELIYAS@ZEATECH.COM.SG
Mobile Phone No	(LOCAL) +65-96851054
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P2040528
Cover Note Number	

Driver

Name of Driver	MOHAMED ABUBACKAR MOHAMED ELIYAS
NRIC No	S2638977A
Date Of Birth	19/03/1963
Occupation	INDOOR
Date Of Driving Pass	05/06/1997
Driving Experience	21 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96851054
Fax Number	
Contact Number	OFFICE-NOPHONE
EEmail Address	ELIYAS@ZEATECH.COM.SG

Address	BLK 143 JALAN BUKIT MERAH #23-1140
Postcode	160143
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	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	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)

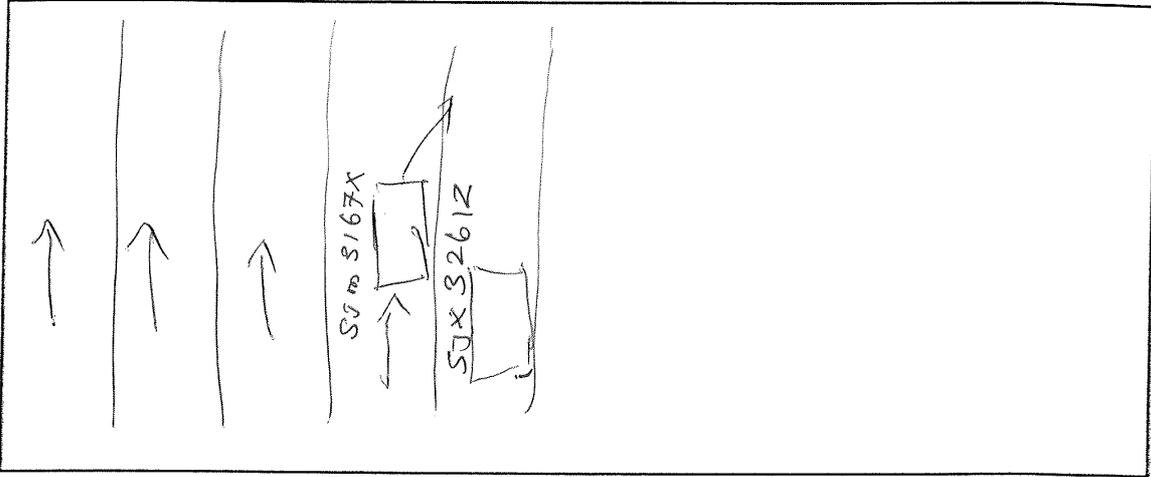
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJX3261Z
Vehicle Make/Model/Colour	HONDA CIVIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHUANG KENG LIANG COLIN
NRIC/Passport Number	S7712574D
Contact Number	91862015
Address	BLK 17 TELOK BLANGAH CRESCENT #21-276
Postcode	090017
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SJM 3167X
a/6/18

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was changing lane from left to right behind car hit on side of the my car on right side of my car door.

OWN DAMAGE () 3RD PARTY CLAIM (X) REPORTING ONLY () OWN WORKSHOP (X)

DECLARATION

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

Policyholder's Signature
Date & Time: 12/06/2018

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

CHARN'S CUSTOMCRAFT
BLOCK 1010, #01-105
JURONG MERRAH LANE 3
CHARN'S CUSTOMCRAFT 99724
Reporting Centre Personnel's Signature
Name: 99724
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



DUPLICATE
 COPY FOR FINANCE COMPANY

Private Cars COMP
POLICY SCHEDULE
NEW BUSINESS
 Duplicate

POLICY INFORMATION		Policy No. : VPA/P2040528	
Source	:	(01) 14885	BMS-AXA TOYOTA NB
Insured	:	MOHAMED ABUBACKAR MOHAMED ELIYAS	
Address	:	BLK 143 JALAN BUKIT MERAH #23-1140 SINGAPORE 160143	
Business/Profession	:	OTHER OCCUPATION Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance	:	From 13/12/2017 To 12/12/2018 (Both Dates Inclusive)	
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			
PREMIUM			
Premium After 50.00% NCD	:	SGD 1,252.33	
GST 7.00%	:	SGD 87.66	
Annual Premium	:	SGD 1,339.99	
Total Payable	:	SGD 1,339.99	
RISK DETAILS THE MOTOR VEHICLE			
Type Of Cover	:	Comprehensive	
Regn No.	:	SJM3167X	
Type Of Use	:	Private Car	
Make/Model	:	TOYOTA WISH 1.8	
Year of Manufacture	:	2017	Seating Capacity (excl. Driver) : 06
Body Type	:	MULTI - PURPOSE VEHICLE	Engine C.C. : 1798
Engine No.	:	2ZR0A32751	
Chassis No.	:	JTDGG20W70J008309	
Insured's Estimated Market Value	:	Market Value At The Time Of Loss (including Accessories and Spare Parts)	
Limitations as to Use	:	As specified in Certificate of Insurance	
Hire Purchase	:	HONG LEONG FINANCE LIMITED	
<u>Extra Coverage (Premium Breakdown)</u>		<u>Limits (SGD)</u>	<u>Premium (SGD)</u>
NCD Protector			
Basic Own Damage Excess		: SGD 500.00	+7% GST.
<u>Named Drivers</u>			
1 MOHAMED ABUBACKAR MOHAMED ELIYAS			
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS			
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:			
Sales Agent ID : BSTL062			

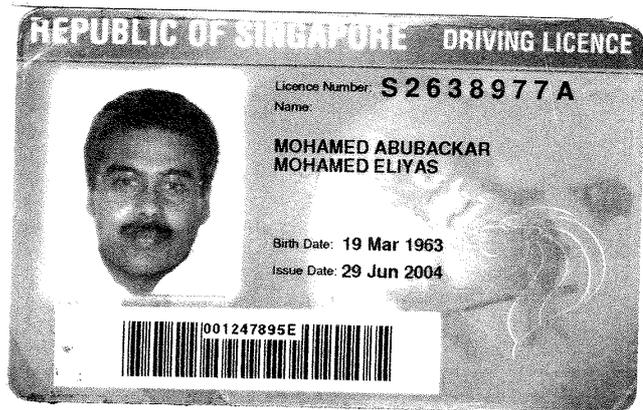
REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2638977A



Name
**MOHAMED ABUBACKAR
MOHAMED ELIYAS**

Race
INDIAN
Date of birth **19-03-1963** Sex **M**
Country of birth
INDIA

S2638977A



4505519



NRIC No. **S2638977A**



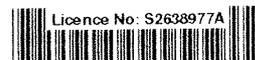
Date of issue
07-01-2010

Address

**APT BLK 143 JALAN BUKIT MERAH
#23-1140
SINGAPORE 160143**

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

	PASS DATE
Class 3 Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	05 Jun 1997



NP 428A

Accident Sketch Plan Pg. 1

SKETCH PLAN

SJM 3167X
a/6/118

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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.

NOTE: DO NOT THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

Policyholder's Signature
Date & Time: 12/06/2018

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

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

CHARN'S CUSTOMCRAFT
K 1210, 101-106
KIT MERAN LANE 3
SINGAPORE 159724
TEL: 67333004
TEL: 67333576

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

