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 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.

	ACCIDENT STATEMENT			
Date Of Report	28/06/2018 15:42			
Date Of Accident	27/06/2018 14:10			
Exact Location Of Accident	JALAN MEMBINA			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				

		DETAILS OF OWN VEHICLE
	Vehicle Registration Number	SLR2080T
	Insured/Policyholder	
	Name Of Registered Owner	LEE CHEE WAI
	NRIC No	S7918462D
	Email Address	RED_DEVILS31@HOTMAIL.COM

Mobile Phone No (LOCAL) +65-97979722 Alternative Phone No OFFICE-97979722

Vehicle Particulars

Manufacturer **HONDA** Model **VEZEL**

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

PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number GA250415

Cover Note Number

Driver

Name of Driver LEE CHEE WAI NRIC No S7918462D Date Of Birth 28/06/1979 Occupation INDOOR **Date Of Driving Pass** 16/08/2001

Driving Experience 16 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97979722

Fax Number

Contact Number OFFICE-97979722

EMail Address RED DEVILS31@HOTMAIL.COM Address BLK 21 JALAN MEMBINA #19-54

Postcode 16302

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 - 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?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

1

NO

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

ON 27/06/2018 AT ABOUT 1412HRS, I WAS DRIVING MY VEHICLE A (SLR2080T) ALONG JALAN MEMBINA HEADING TOWARDS MY HOME. I CHECKED THE OPPOSITE DIRECTION TRAFFIC WAS CLEAR BEFORE I MAKE A RIGHT TURN. WHEN I WAS MAKING A RIGHT TURN, SUDDENLY, THE VEHICLE B (SGT2974M) WHICH WAS DRIVING STRAIGHT FROM THE OPPOSITE DIRECTION ON THE INNER LANE AND HIT ONTO MY VEHICLE'S LEFT PORTION. NOBODY WAS INJURED IN THIS ACCIDENT. BOTH VEHICLES HAVE NO PASSENGER ON BOARD.

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 SGT2974M

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B
Vehicle Category PRIVATE CAR

Name of Driver NANCY HOON SIEW GUET

NRIC/Passport Number \$1681667A

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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 as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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)

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.

Policyholder's Signature
Date & Time: 28/06/1801340L
Date & Time: Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

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Sketch Plan #2 Pg. 1

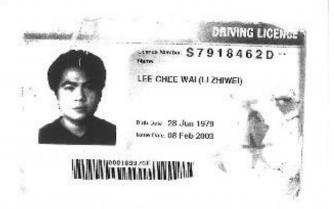
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DECLARATION 'We declare the fore	// I.	2 12/1/11
	28/6/ _U j	2.10pm

LETTER OF UNDERTAKING

I/We, Lee Chee Was	, the owner of vehicle no. SLR	20801
My/Our Insurance is under M/s AXA Insurance to claim under my/our Policy or against the Thiclaim to M/s AXA Insurance Singapore Pte Ltd 14(fourteen) days of occurrence or disco	with all relevant facts and docume	de whether pmit such 2 nts within
My/Our Third Party claim is handle by my/our pro	eferred workshop, Tan Lim M	notor Pte Ud
1. A deposycledate by:		
Signed and Acknowledge by:	,	1
S7918462D Nric no. and signature of policyholder Co	mpany Stamp Date	16/2018

Driving License





HP: 97979722 ENSIL: red_devils31@ hotmail com Cocupation: Enghaer





INSURANCE





AXA Insurance Ptc Ltd

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

- 165) 6880 4740

M customer.care@axa.com.ag

E www.asa.com.sg

Certificate of Insurance

account number 03809

Appendencies (third Perty Residence section Activismus des). Mojor Wholey Then Derty Black and Component con Pules. 1990-Page Transport Act 1997 (Addition for the Page Than Page 1997 of the Page Than Page 1997 of the Page 1997

Policy detalls

Polityholder name Cover

LEE CHEE WAS Comprehensive

Cartificate number Chassis number Engine number

6/250435 / 1 RU11207410 1.1504407413

Planname NCO applicable

50% SLRZH801

Vehicle registration number

Period of Insurance

from 02/08/2017 to 02/08/2018 (fight dates in the see

TORYO CERRENE LEASING VISI PTE LTD Finance Inan company

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Persons or classes of persons entitled to drive*

on The Police older

(a) Any paraon who is driving an the Policyholder's croen or with broin pounission

Provided that the person driving is sermited in accordance with the identified or other laws or regulations to drive the Motor Variable or has been with parallised and a not disqualified by product a Count of Law or by reason of any opportunition regulation in that be will then divide the voter feature.

Limitation as to use*

Use only for social, domostro and planeurs, burnases and for the Policyholdera businesse.

The policy does not private use for nine or reward income, page inclining, reliability that, speed to string the carriage of goods other than complete in connection estimate rade at business or use for any purpose or connection with motor trade, or when the Motor Car, whether stationary, in use or otherwise, is in or or a racing treat, circuit, round, counterpression respectively contained and an explosity used for racing, page-making or such similar purposes

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EXCESS

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Additional clauses & endorsements to your policy

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4X4 Insurance Pte Ltd

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AKA Insurance Pta Ltd (199903512M). 8 Sherto i Way, #24-01, 700A Towar. Singapore 96861.1 Sustamer Contie, #31.01

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