

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	16/07/2018 09:09
Date Of Accident	13/07/2018 15:30
Exact Location Of Accident	ALONG AYE TOWARDS JURONG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC651R
Insured/Policyholder	
Name Of Registered Owner	AEDGE HOLDINGS PTE. LTD.
Co Reg No	200509323E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91460806

Vehicle Particulars

Manufacturer	GOLDEN DRAGON
Model	XML6957J14
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	BUS

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VFX/P1758076
Cover Note Number	

Driver

Name of Driver	ASMUNI BIN SALLEH
NRIC No	S7302396C
Date Of Birth	22/01/1973
Occupation	OUTDOOR
Date Of Driving Pass	17/06/2015
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91685229
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 366 CLEMENTI AVENUE 2 #22-529
Postcode	120366
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	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	26

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI N.P.C
Police Station Address	ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER 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	YN3930B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

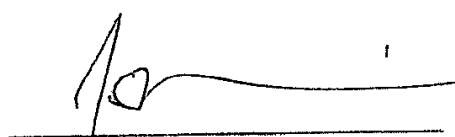
No. Of Passenger (Including Driver)

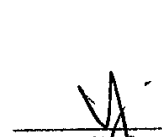
SKETCH PLAN

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- 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.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan

AYE
toward Jurong

A - PLESI R
B - YN 3930B




Describe Circumstances of the Accident

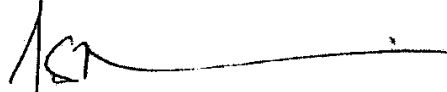
On 13/07/2018 @ 15:30hrs, I was driving my bus PC651R along
 AYE towards Jurong when a lorry YN39308 in front of me jammed
 brake & I could not brake in time & hit onto the lorry.

Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date &
 Time




 Driver's Signature (if driver is not the policyholder) / Date
 & Time

 **Yvonne Toh**
 Witnessed by Reporting Centre
 Personnel

Annex E

NOTICE OF REPORTING

This is to confirm that Asmuni Bin Salleh, NRIC/PIN

S7302396C, has reported to the Police a non-injury traffic accident which

occurred at along AYE towards Tmas
after
before South Buona Vista Rd (Flyover)

on 13/07/18 at 2:30 am/pm involving the following vehicles: 1) PC 651R (Complainant)
2) YN 3930B (Lorry)

2 If this accident was reported to the Police within 24 hours of its occurrence, then
he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSJgt Simon Chia

Date: 13/07/18 Time: 2050hrs

S/D Ref: 193

Police Post/Unit: Clementi NPL

Clementi NPC
20 Clementi Ave 5
S (129858)
Tel: 68728999
Fax: 68728039

13/07/2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

