#### 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	21/07/2018 12:07
Date Of Accident	20/07/2018 17:45
Exact Location Of Accident	PUNGGOL WAY FILTER LANE TOWARD TPE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGH8214Y
Insured/Policyholder	
Name Of Registered Owner	CHUA TZE SHERN
NRIC No	S8012849E
Email Address	ARENZIN@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96663987
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	CAMRY-2.0 (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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

#### **Insurance Company**

AXA INSURANCE PTE LTD Name of Insurance Company

Type Of Coverage **COMPREHENSIVE** 

Fleet Policy NO

Policy Number GA360915/1

Cover Note Number

#### **Driver**

Name of Driver **CHUA TZE SHERN** 

NRIC No S8012849E Date Of Birth 17/04/1980 Occupation **INDOOR Date Of Driving Pass** 27/02/2001

**Driving Experience** 17 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96663987

Fax Number

OFFICE-NOPHONE Contact Number

**EMail Address** ARENZIN@YAHOO.COM Address BLK 17 DOVER CRESCENT #20-52

Postcode 130017

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

2

NO

NO

NO

**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?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

humber of December (Including Driver)

Number of Passengers (Including Driver)

Passenger 1 NAME: : CHUA KAI XIN

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

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? YES

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SHC1933R

Vehicle Make/Model/Colour TAXI

Details Of Properties REAR

Vehicle Category TAXI

Name of Driver CHAN HUNG HUAT

NRIC/Passport Number S1267313B Contact Number 94365508

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### **SKETCH PLAN**

#### **IMPORTANT NOTICE**

VEHICLE NO: SGH 82147 ACCIDENT DATE: 20 7/11

- 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.
- 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.
- 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:
  - 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 NOTE 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: 21/4/1

1

Driver's Signature

(If driver is not the policyholder)

Date & Time:

CHARN'S CUSTOMCRAFT

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

### Sketch Plan #2 Pg. 1

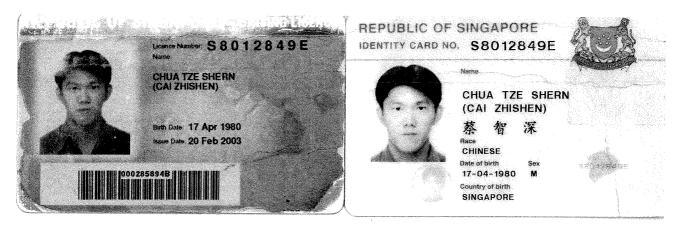
SGHBZIYY 20/7/18 SKETCH PLAN Web A: SHC1933R Ven B = SGH 8214Y DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 20th Jul 2017 driving Stop noticed tried 40 rear. Scratch OWN DAMAGE ( ) 3RD PARTY CLAIM ( ) REPORTING ONLY (/) OWN WORKSHOP ( ) DECLARATION I/We declare the foregoing particulars are true in every respect. CHARN'S CUSTOMCRAFT Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: 217 18 (If driver is not the policyholder) Name:

NRIC/FIN No.:

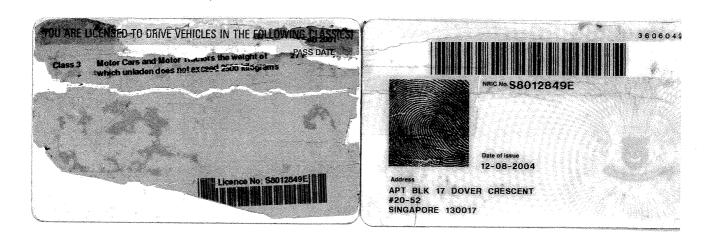
Date & Time:

1215/0

## Sketch Plan #3 Pg. 1



3GH 82144 20/7/19.







AXA Insurance Pte Ltd

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

(65) 6880 4740

☑ customer.care@axa.com.sg

www.axa.com.sg

# **Certificate of Insurance**

account number 00627

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960 - Road Transport Act. 1987 (Malaysia)
-Motor Vehicles (Third-Party Risks ) Rules, 1959 (Malaysia)

#### Policy details

Policyholder name Cover

CHUATZE SHERN Comprehensive Essential

Certificate number Chassis number Engine number

GA360915 / 1 MR053BK3106015819 1473239424

Plan name NCD applicable 0% SGH8214Y Vehicle registration number

Period of Insurance from 23/06/2018 to 22/06/2019 (both dates inclusive)

Finance loan company

## Persons or classes of persons entitled to drive\*

(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 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**EXCESS** 

Basic Own Damage Excess Windscreen Excess

SGD 600.00 SGD 100.00

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 Workshops.

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

#### AXA Insurance Pte Ltd

Authorised signature

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 certificate, endorsement etc.

1 of 3

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

