### 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

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	ACCIDENT STATEMENT
Date Of Report	27/06/2018 08:44
Date Of Accident	26/06/2018 13:50
Exact Location Of Accident	CTE AFT MOULMEIN RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS1183G
Insured/Policyholder	
Name Of Registered Owner	CAPARAS CECILIA SANGALANG
NRIC No	G5028881T
Email Address	CAPCES17@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84182640
Alternative Phone No	OFFICE-84182640
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy	YES

for repair to your vehicle?

If No, Please state action to be taken

PRIVATE CAR Vehicle Category

**Insurance Company** 

AXA INSURANCE PTE LTD Name of Insurance Company

Type Of Coverage **COMPREHENSIVE** 

Fleet Policy NO

Policy Number P1986028

Cover Note Number

**Driver** 

Name of Driver TAN KAH MIN CARMEN

NRIC No S7906339H Date Of Birth 06/03/1979 Occupation **INDOOR** Date Of Driving Pass 20/09/2005

**Driving Experience** 12 YEARS AND 9 MONTHS

Gender **FEMALE** 

Mobile Number (LOCAL) +65-91845525

Fax Number

Contact Number

**EMail Address** CARMENJMJ@GMAIL.COM Address BLK 27 TANGLIN HALT RD #09-98

Postcode 142027

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured FRIEND

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

#### **General Information of the Accident**

Type Of Accident CHAIN COLLISION

Weather Conditions DRIZZLING

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?

Was any injured conveyed to hospital by

ambulance?

NO

NO

1

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

#### **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**

### PLEASE REFER AS ATTACHED

### Attachment(s)

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

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SJA9169P

Vehicle Make/Model/Colour KIA/SPORTAGE

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver CAO JI YONG
NRIC/Passport Number S2679917A
Contact Number 96581487

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SGW792T

Vehicle Make/Model/Colour TOYOTA/WISH

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver CHAN KOK HONG

NRIC/Passport Number S7443912H Contact Number 98487421

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number SLQ4268L Vehicle Make/Model/Colour MAZDA

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver ABDUL RAZAK BIN MOHAMED NOR

NRIC/Passport Number S7232621J Contact Number 96787529

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

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- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Funderstand, 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' law yers/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:
- (i) investigating the accident and/or my claims;
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

april 266-18 3-50 pm

Policyholder's Signature / Date & Driver's Signature (# driver is not the policyholder) / Date Time & Time Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident
Describe Circumstances of the Accident  I was travelling along the CTE towards City when there appeared to be some congestion. As the car in front of me stopped I was able to be brake with some distance behind him, but another vehicle hit me from behind and my var rolled forward to hit the car M front.
to be some consestion. As the car in front of me stopped I
was able to bend brake with some distance behind him but
another reliefe lit we from behind and my for rolled forward
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To will face fact in front.

Declaration

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IWe declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel









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.sq GST Registration Number: 199903512M customer.service@axa.com.sg



### CERTIFICATE OF INSURANCE

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

CERTIFICATE NO.

: VPA/P1986028

Account No. : 14885

Coverage

: Comprehensive (SmartDrive Toyota Prestige)

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: CAPARAS CECILIA SANGALANG

Vehicle Registration No. : SLS1183G Period of Insurance

: From 08/09/2017 To 07/09/2019 (Both Dates Inclusive)

#### PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

(a) The Policyholder The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner (b) Any other person who is driving on the Policyholder's order or with his 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 exactment or regulation in that behalf from driving the Motor Vehicle.

#### LIMITATIONS 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, speedtesting, the carriage of goods other than samples in connection with any trial, specitesting, 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 staticnary, 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.

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#### Basic Own Damage Excess

; SGD 500.00

An Additional Excess is applicable as follows: \$\$2,500.00 for Young or Inexperienced Driver.

Young or Inexperienced Driver is defined as any driver whom is sged below 23 years old and/or less than one year of driving experience.

(Please refer to your policy on the terms & conditions) \* 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.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions 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

Issued by - SGOAGPH

on 12/09/2017

IMPORTANT :

Authorized 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 Fremium 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, covernote and endorsement etc.





















