### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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</u> 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	27/08/2018 14:31					
Date Of Accident	24/08/2018 17:10					
Exact Location Of Accident	QUEENSWAY TOWARDS PORTSDOWN ROAD					
Country/State of Loss	SINGAPORE					
D	DETAILS OF OWN VEHICLE					
Vehicle Registration Number	GBG2461D					
Insured/Policyholder						
Name Of Registered Owner	T ZONE CAR & TRUCK RENTAL					
Co Reg No	53358093E					
Email Address	NOEMAIL					
Mobile Phone No						
Alternative Phone No	OFFICE-87504656					
Vehicle Particulars						
Manufacturer	NISSAN					
Model	NV350 PANEL VAN 2.5 5MT 5DR EURO V					
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE					
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	GOODS VEHICLE					
Insurance Company						
Name of Insurance Company	AXA INSURANCE PTE LTD					
Type Of Coverage	COMPREHENSIVE					
Fleet Policy	YES					
Policy Number	VFX/P2055530					
Cover Note Number						
Driver						
Name of Driver	AMIR HAMZAH BIN SAWI					

NRIC No S9103358E

Date Of Birth 02/02/1991

Occupation OUTDOOR

Date Of Driving Pass 26/02/2018

Driving Experience 0 YEAR AND 5 MONTH

Gender MALE

Mobile Number (LOCAL) +65-87504656

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 203 ANG MO KIO AVENUE 3 #04-1696 SPORE 560203

Postcode

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

-

NO

NO

**General Information of the Accident** 

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions RAINING
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?

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) 1

**Details of Police Action** 

Was the accident reported to the police?

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?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SHD2991K

Vehicle Make/Model/Colour TOYOTA VELLFIRE HYBRID 2.4X A

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **Sketch Plan**

#### SKETCH PLAN

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- 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.
- 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.

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

Date & Time: 25/6/18 / 1600

Reporting Centre Personnel's Signature

Name: Suhaimi

NRIC/FIN No.: S8040377A

# Sketch Plan #2

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## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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						in time									
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DECLARATION

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

s Signature Driver's Signature

(If driver is not the policyholder)
Date & Time: 25/8/18/4600

Reporting Centre Personnel's Signature

Name: Suhaimi

NRIC/FIN No.: S8040377A

CURRAC SheachPlanForm\_V3













# **Driving License**





## Insurance policy

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



### CERTIFICATE OF INSURANCE

■Motor Vehicles (Third-Party Blaks 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)

CERTIFICATE NO.

: VFX/P2055530

Account No.: 05058

Coverage

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: T ZONE CAR & TRUCK RENTAL

Vehicle Registration No. : GBG2461D

Period of Insurance

: From 08/08/2018 To 01/01/2019 (Both Dates Inclusive)

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

Any person who is driving on the hirer'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.

#### LIMITATIONS AS TO USE\*

- (a) Use for the carriage of passengers or goods in connection
- with the hirer's business.

  (b) Use for social domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.

  The Policy does not cover

- (a) Use for racing, pace making, reliability trial or speed-testing
  (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle
  (c) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

(09)

### EXCESS :

Sect I - Used In S'pore Only : SGD 2,000.00 Sect II-Used In Singapore Only : SGD 1,500.00 : SGD 100.00 Windscreen Excess

\* 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 (Malayaia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - MVUELSIE on 15/08/2018

INFORMANT:

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. 1801) 1891

FOR INDIVIDUAL CUSTOMERS

:Cover Under the policy is valid only upon the payment of the full premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS: Please refer to the Premium Warranty Clause on the policy