

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	09/06/2018 12:37
Date Of Accident	08/06/2018 21:30
Exact Location Of Accident	JUNCTION OF CLEMENCEAU AVE & RIVER VALLEY RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX3634G
Insured/Policyholder	
Name Of Registered Owner	NATASHA NUR BINTE SULAIMAN
NRIC No	S8435989J
Email Address	AZMIN.SAILANI@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-94561945
Alternative Phone No	OFFICE-94561945

Vehicle Particulars

Manufacturer	BMW
Model	323I
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA059506
Cover Note Number	

Driver

Name of Driver	AZMIN BIN JAILANI
NRIC No	S8334129G
Date Of Birth	08/11/1983
Occupation	INDOOR
Date Of Driving Pass	24/09/2003
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97846041
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address 5000K MARINE PARADE ROAD #14-45
 Postcode 449292
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured SPOUSE
 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? YES
 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) 2
 Passenger 1 NAME: : NATASHA NUR BINTE SULAIMAN
 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name MARINE PARADE N.P.C
 Police Station Address ROAD: 300 MARINE PARADE ROAD , POSTCODE: 449296 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: - FAX NO:
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20180609/2008.

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 SHA3220L
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category TAXI
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name AZMIN BIN JAILANI

Approximate Age

Injuries Sustain

Injured person in which vehicle? SJX3634G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

DETAILS OF INJURED PERSON 2

Name NATASHA NUR BINTE SULAIMAN

Approximate Age

Injuries Sustain

Injured person in which vehicle? SJX3634G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode


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.
- (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.

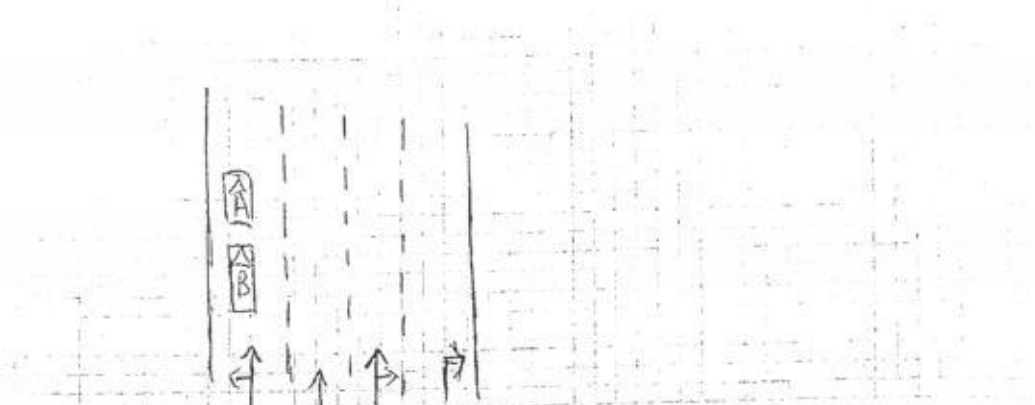

 Policyholder's Signature
 Date & Time: 9/6/18
 10:15am


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 9/6/18
 10:15am

Reporting Centre Personnel's Signature
 Name
 NRIC/PIN No.

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

DECLARATION

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

x [Signature]
Policyholder's Signature
Date & Time: 9/6/18
10:15 am

x [Signature]
Driver's Signature
(if driver is not the policyholder)
Date & Time: 9/6/18
10:15 am

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

LETTER OF UNDERTAKING

I/We, Natasha Nur Bte Sulaiman, the owner of vehicle no. SJX5639G

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, _____

Signed and Acknowledge by:

Natasha Nur Bte Sulaiman 58435989J
Nric no. and signature of policyholder

.....
Company Stamp

.....
Date



**SINGAPORE
POLICE FORCE**



T/20180609/2008

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Report No. T/20180609/2008

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/06/2018 02:03	Vide Report No.:	Station Diary No.: 16
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Informant's Particulars

Name of Informant: AZMIN BIN JAILANI		Address: 5000K MARINE PARADE ROAD #14-45 SINGAPORE 449292	
ID Type / ID No.: NRIC NO / S8334129G		Contact No.: Home/Office: Mobile: 97846041	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 34	Date of Birth: 08/11/1983	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: LEGAL SERVICE OFFICER		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/06/2018 21:30	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 CLEMENCEAU AVENUE RIVER VALLEY ROAD Junction of Clemenceau Avenue and River Valley Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA3220L	Car	HYUNDAI		Blue		3
SJX3634G	Car	BMW	323	Grey	Seriously Damaged	1



**SINGAPORE
POLICE FORCE**



T/20180609/2008

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

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Report No. T/20180609/2008

CONTINUATION OF REPORT

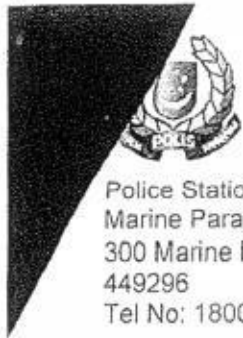
Brief Details.

I was driving my vehicle (BMW) along Clemenceau Avenue towards Havelock. I was travelling on the last lane of the said road. My wife, Natasha Nur Binte Sulaiman, S8435989J was sitting at the front passenger seat. Both of us were wearing seatbelts. At the X-junction of Clemenceau Avenue and River Valley Road, there was a traffic light. When the light turns green, we proceeded to move off. As the vehicle (Silver Mitsubishi SUV, SLL6905U) in front of us moved slightly and then stopped, we slowed down and stopped into a stationary position while waiting for the SUV to move off.

At that point of time, the vehicle (Comfort Taxi, SHA3220L) on the rear collided onto the rear of my vehicle which caused it to lurch forward. This lurching motion was recorded in the In-car camera. As the result of the collision, both my passenger and my bodies were thrown forward and backward in a quick snapping motion. We alighted from the vehicle and took photograph of the accident. We also exchanged particulars with the taxi driver.

My passenger and I experienced strain and soreness on our necks and backs. We then went to Parkway East Hospital and both of us was given 4 days of medical leave. I only have an In-car camera at the front area of my vehicle.

Particulars of taxi driver:
Sim Eng Chuan, S7108631C, H/p: 92236435.



SINGAPORE POLICE FORCE

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999



T/20180609/2008

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Report No. T/20180609/2008

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Staff Sgt MUHAMMAD SHAMIR BIN ZAINAL	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / AEIT / Sgt 2 YEO KIA HUAT Contact No.: 65476325	
Authentication Stamp NP168	

Signature Of Informant:	
Date/Time: 09/06/2018 02:03	
Classification Of Case:	