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 <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

aloresalu.			
	ACCIDENT STATEMENT		
Date Of Report	03/09/2018 18:22		
Date Of Accident	30/08/2018 17:00		
Exact Location Of Accident	IMM 3RD LEVEL CARPARK		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SDT888C		
Insured/Policyholder			
Name Of Registered Owner	TANG RUI YI		
NRIC No	S2643496C		
Email Address	NOEMAIL		
Mobile Phone No	(LOCAL) +65-90108456		
Alternative Phone No	OFFICE-NOPHONE		
Vehicle Particulars			
Manufacturer	JAGUAR		
Model	XJ-3.0 (A)		
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	REPORTING ONLY		
Vehicle Category	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	AXA INSURANCE PTE LTD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	VPA		
Cover Note Number			
Driver			
Name of Driver	HUANG JIN		
NRIC No	S2643496C		

Name of Driver HUANG JIN
NRIC No S2643496C
Date Of Birth 26/06/1975
Occupation INDOOR
Date Of Driving Pass 03/05/2005

Driving Experience 13 YEARS AND 3 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96877196

Fax Number

Contact Number

EMail Address HUANG.CELINE@YAHOO.COM.SG

Address 17 CAIRNHILL CIRCLE #15-08

Postcode

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? 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

2

Number of Passengers (Including Driver)

Passenger 1

NAME: : WUUXI

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

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 SKK446L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver MR CHANG

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 14

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO:

SD7888c ACCIDENT DATE: 30/0/18

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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:

- 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)
 - (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 "Purnoses"\
- (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
- 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,

(ii) for complying with requirements under any regulations, laws or court lands in the complying with requirements under any regulations.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT 4-DAYS TIMEFRAME FOR YOU TO SLEEMIT AN OWN DEEP REFER TO YOUR POLICY FOR MORE INFORMATION

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Name NRIC/FN No.:

CHARN

Reporting Cer

62

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tre Personnel's Signature

Singapor vel: 6271/054

03/09/2018

Sketch Plan #2 Pg. 1

		227886
SKETCH PLAN		30/8/4
		one work
		ONE WOY Spot 88 c.
	damy	5kk 4462
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	dan.
I was at-	The 3rd fevel of In	um Corpork fung
out, but	instead I come to	a point (show- one
way dive	ection) At this poin	nt I hear behind cer.
'honk'	honk' at my vehicl	

OWNI DANA CE ()	AND DARTY OF ARACC	TRIC ON W. COURT WORKSWORK
OWN DAMAGE () ECLARATION	3RD PARTY CLAIM () REPORT	TING ONLY () CHARNS CUSTOMCRAPT WORKSHOP ()
We declare the foregoing partic	ulars are true in every respect.	Block 1010 #04 Pane 3 Bukit Merah kane 3 Singapore 159724
olig/holder's Signature tee & Time:	Driver's Signature (If driver is not the policyHolder) Date & Time:	Tel: 62710 ARMYS CUSTOMCRAFT Fax: 68 For Centre Personnessignature Email Name Sesingnessignature NRIC/FIN No.:
	03/09/2018	

Issued by 05377001-Dong Cheng Chep on 06/09/2017 ${f 2}$ of 2

redefining / insurance





redefining / insurance

AXA Insurance Pte Ltd
1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
(65) 6880 4740

customer.care@axa.com.sg

account number

05377

Certificate of Insurance

Adder Venicles (Trius Party Risks and Compensation) Act. (Chapter 153). Mofer Vetuclins (Trius Party Pirks, and Compensation) Rules, 1960-Road Transport Act. 1987 (Minigra). At the Veniclins (Trius Party Risks) (Rules, 1956 (Milling va).

Policy details

Policyholder name Cover Pian name NCD applicable Vehicle registration number TANG RUIY)
Comprehensive
Private
50%
SDT888C

Certificate number Chassis number Engine number GA062003 / 1 SAJAC2221ANV09025 04770313050T

Period of Insurance from 17/09/2017 to 16/09/2018 (both dates inclusive)
Finance loan company DBS_BANK_LTC

Persons or classes of persons entitled to drive*

(a) The usage of the vehicle by the Policy Holder (Insured) is not covered under this policy. (b) Any Named Driver as stated in the Policy:

1. HUANG JIN

(c) 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 bire or reward, racing, pace-making, reliability foal, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with inster trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, source or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

+ (Installand rendered magerative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1983 (Mastaysia), are not to be included finder these Ecologic

EXCESS

Basic Own Gamage Excess Windscreen Excess SKD 500.00 4GD 100.00 +7% FS7.

An Additional Excess is applicable as follows:

- 1 \$\$500 for ungarned Authorised Driver
- 2. \$\$500 for declared Young and Inexperienced Driver
- \$\$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

Aiii

Tywe 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 (Malbysie)

AXA insurance Pte Ltd

Authorised signature

Accident Sketch Plan Pg. 1





















