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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	04/09/2018 15:50
Date Of Accident	03/09/2018 12:00
Exact Location Of Accident	JALAN BASAR
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKE2468P
Insured/Policyholder	
Name Of Registered Owner	ERALIL LUCOSE TITUS
NRIC No	S7081478A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97372067
Alternative Phone No	OFFICE-97372067
Vehicle Particulars	
Manufacturer	VOLVO
Model	XC90-2.5 T (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	GA119378/1
Cover Note Number	

Driver

Name of Driver

APARNA KUMAR

NRIC No

S7081478A

Date Of Birth

19/09/1970

Occupation

INDOOR

Date Of Driving Pass

19/04/2004

Driving Experience

14 YEARS AND 4 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96615612

Fax Number
Contact Number

EMail Address APAKUMAR@YAHOO.COM

Address 3 TAMAN NAKHODA #06-05

Postcode 257744

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

-

NO

General Information of the Accident

Type Of Accident SIDE SWIPE
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?

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 REPORT ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLM2849U

Vehicle Make/Model/Colour TOYOTA PRIUS

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver ONG SOON KEE

NRIC/Passport Number S6826015I Contact Number 98456755

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

. •		The state of the s					
and the second s		1			- - - -		
The second secon							
			A CONTRACTOR OF THE PARTY OF TH			411	
سبيريريان أأري والأقمر				at world I +			
The parameters and the same and		And all and the second				1/: \	
and the second		1	ر در این به این مستونستون در این به این به ستونستونستون در این در این به ستونستونستونستونستونستونستونستونستونستون	K B	-		200
,		127					
				SKA			
-			<u> </u>			- - - 	
	myca	\mathcal{U}	e compete as the even man	mention with a second control of the second		1-1-1	
<u> </u>	Other	Cáv I	uum sad sii kuund kali oo kii kaaddaaddaanaa doolaanaadaa oo sii sii sii sii sii sii sii sii sii	<u> </u>			
A - Au . A							
ESCRIBE CIRCUI	MSTANCES OF TH	1E ACCIDENT		`.			
	The second secon	1.5 2.4 2.5 2.5 2.5 2.5 2.5 2.5 2.5 2.5 2.5 2.5		A PERSONNELS CONTROL OF THE PROPERTY OF THE PR			
							······································
~	1	1 t .		1 0	0 .	·	_ ^
an e	s turn	ing deft	- onto 5	Jalan B	<u>zao</u>	<u>l. 7</u> 7	<u>ure</u>
mere i	madwo	W/U B	on pric	obstruc	true	on	و
Jane.	Ac 9	TINO	J. J. J.	- on t	NO 10	list	`
2010-	As 9 Anconc	निकारी	Frairl	at My CAL	1 0 L	Jah	
			5 Magis	trand_	201		<u>ea</u>
the y		4 4 4 4 4	<u> Lumpei</u>	> 9, nuy			
Slight	BCVOUZ	hes on	my' (al bunk	be	V. TI	<u>~e</u>
nPrev				on the	10	it.	Cide
	· Mo b					U	***************************************
LO MONIVO	· MO D	MOC.					
							wa
The second secon	And the second s						k
//							
	<u>, , , , , , , , , , , , , , , , , , , </u>	AND PROCESSION OF THE PROPERTY	and the law areas of the control of the property of the control of		hilyanja Malalili Kirika i Kirika anazar	****	*****
CAN HOS CADALLES MINISTER MINI							
NAME TO BE THE RESIDENCE OF THE PROPERTY OF TH							
ECLARATION We declare the for	egning narticulars a	re true in every re-	specify	A			₩
	egoing particulars a	re true in every res	spec	<i>A</i>	<u> </u>	4911	8
	egoing particulars a	re true in every re:	spech	A		4911	8
		ere true in every res	spec	Reporting C		4911	8

Date & Time:

 $(z\mapsto x_0) \mathcal{I}_{X_0} = (z\otimes x_0) \cdot (z\otimes x_0) \cdot (z\otimes x_0)$

NRIC/FIN No.:

Page 3 of 14

SKETCH PLAN

IN IPORTANT 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.
- 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 liability.
- 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.

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

NRIC/FIN No.:



Certificate of Insurance

account number

03180

-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 **ERALIL LUCOSE TITUS** Comprehensive Plan name Essential NCD applicable 40%

Certificate number Chassis number Engine number

GA119378 / 1 YV1CZ5957A1566933 B5254T4462603

Vehicle registration number SKE2468F

from 12/08/2018 to 11/08/2019 (both dates inclusive) Period of Insurance

Finance loan company

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. APARNA KUMAR

(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 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 500.00 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. SS5.000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$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

Important note

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.

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

1 of 3



Licence Number: S 7 0 8 1 4 7 8 A

APARNA KUMAR

Birth Date: 19 Sep 1970 Issue Date: 19 Apr 2004

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7081478A



APARNA KUMAR

Race INDIAN Date of birth 19-09-1970 Country of birth

stoatuta k

8799702

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

19 Apr 2004 19 Apr 2004

NP 428A

NRIC No. S7081478A

INDIAN Date of Issue 18-08-2006

3 TAMAN NAKHODA #06-05 SINGAPORE 257744 RIC No: S7081478A D

NRIC No:

Date: 31/05/2016

Date:	4/9/18
To: Owner o	of Vehicle Number: SKE 2468P
The following their staff,	ng has been advised to you via your workshop, through
Please tick t	he applicable box if you had been advice on the content as seen below:
own	had been advised by the workshop that in the event that you wish to claim against your policy, there is a Fourteen (14) days clause whereby the claim must be made within the ulated timeframe from the day of occurrence.
() You	had been advised by the workshop on the liability and merits of the case accordingly.
() You will	had been advised by the workshop on the claims procedure for the type of claim that you be making due to this accident.
() Ther	e will be delay to your vehicle repair due to the unavailability of spare parts locally and e is no other option except to indent it from overseas.
	Estimation waiting time for the spare parts to arrive is estimated arrival time does not include the repair period.
() You pers	will be driving the vehicle out despite being advised by the workshop mechanic/onnel that the vehicle may not be road worthy.
	vehicles below Three (3) years old, your Insurance company will use only genuine original s to repair your vehicle.
usin	vehicles above Three (3) years old, your insurance company will be carrying out repairs any combination of genuine original parts and/or original equipment manufacturer of parts.
	had been advised by the workshop of the Twelve (12) months warranty for <u>Own Damage</u> irs on workmanship related to the accident.
	rehicles below Five (5) years old, you had been advised by the workshop to check with the distributor on your warranty status.
() Othe	rs
MIC	cknowledge by:
Name and sig	enature of policyholden/ authorised driver

Name and signature of workshop personnel including company stamp













