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 consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	03/10/2018 11:50		
Date Of Accident	03/10/2018 09:40		
Exact Location Of Accident	ALONG CTE TO PIE CHANGI		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SLE1113H		
Insured/Policyholder			
Name Of Registered Owner	CHENG KIA SENG(QIN JIASHENG)		
NRIC No	S8039512D		
Email Address	JASON@DTC.COM.SG		
Mobile Phone No	(LOCAL) +65-92960105		
Alternative Phone No	OTHERS-92960105		
Vehicle Particulars			
Manufacturer	MERCEDES-BENZ		
Model	C180K		
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE		
Are you claiming under your own insurance policy for repair to your vehicle?	YES		
If No, Please state action to be taken			
Vehicle Category	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	AXA INSURANCE PTE LTD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	GA111964		
Cover Note Number	24/06/2018 - 23/06/2019		

Driver

CHENG KIA SENG(QIN JIASHENG) Name of Driver

NRIC No S8039512D Date Of Birth 11/12/1980 Occupation **INDOOR Date Of Driving Pass** 11/02/2003

Driving Experience 15 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92960105

Fax Number

Contact Number OTHERS-92960105 **EMail Address** JASON@DTC.COM.SG Address BLK 328 WOODLANDS STREET 32 #10-69

Postcode 730328

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

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 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?

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

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

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 SKA4314H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver LOW CHIN YICK

NRIC/Passport Number S8562841J

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SFH9577E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR POON SWI CHUN

S1802964B

Date of accidents 3/	10/2018 0940	am	CTE to PIE U
My Vehicle A: SLE SKETCH PLAN	Vehicle B:	COCATION: <a4314 h<="" td=""><td> Vehicle C: SFH 9577</td></a4314>	Vehicle C: SFH 9577
	B) IZ)	ilinational engine (S.).	
DESCRIBE CIRCUMSTANC			
3	exting (TE to g subduly broke and (some down to g can involved (all)		hangi Car brake in time realise it is a
Veh B:	Low Chin Yo	ick / 88	5628417.
Veh c:	Poon Swic	hun / 8	1802964B
Claim OD/TP at Ah Remarks: Please forwa My workshop: Email address: & myself: Email address:	rd a copy of my efile accident repo	oat other workshoort to:	pp Reporting Only
Note: Please take note	ر that your insurer have 14 days time heck with your own insurer for m:	eframe for you to sul ore information.	bmit own damage claim under
DECLARATION I/We declare the foregoing pa	rticulars are true in every respect.		AH CHAPTER STORY
Policyholder's Signature Date & Time: 3/10/2018	Driver's Signature (If driver is not the policyholded) Date & Time:	er) Nam	orting Centre Personnel's Signature ne: C/FIN No.: AHLIM MOTOR COMPANY

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 7. 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 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.

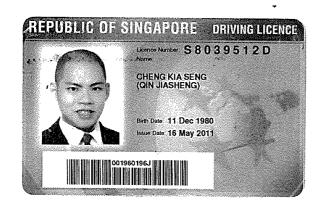
Policyholder's Signature Date & Time:

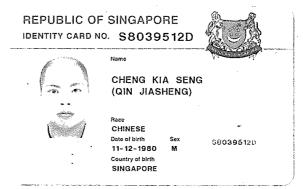
Driver's Signature (If driver is not the policyholder)

Date & Time:

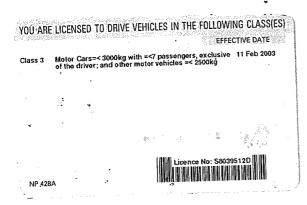
Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:





Smarl, jason@dtc.com.sg





ory no ca: No Ustay: 1.



Certificate of Insurance

13728

0433397 WDD2040452A277269

27191031210135

New Sea (Third-Party Raise and Compensation) A.C. (Chapter 1907, New Yorks of Third-Party Posks and Compensation) Rules, 1960 Faced Tra GALLIGGY Security Field Party (1994) Pales, 1969 (Malays

Policy details

Palicyleddia salar Elevanos. Plan same NGO applicable

SEELLES genete registration combet Period of Insulation

Certificate number Common de la companya Chaosis regnited Eligine number

from 34,96,/2018 to 23,/66/2019 (both dates inclusive) 23/6/2019.

Figures form company > 3 > 4 | 6 | 18 > 3.
Persons or classes of persons entitled to drive

(a) The Policyholder (b) Any patistic who is tinning 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 permitted and is not deschalffrom driving the Motor Vehicle.

Lipite ion as to use?

Use only for social, demestic and pleasure purposes, and for the Policyholder's business.

use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover russ for hire or reveald, racing, pace-making reliability trial, speed testing, the carriage of goods other than samples in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in a racing track, droubt, route, course or any other roads by whatever name called that are typically used for racing, pate-making or such similar purporations.

"Lineatures residered measurables as Section 3 of the Motor Vehicles (Third-Party Ricks and Compensation) Act, (Chapter 185) and Section 95 of the Road Transport Act, (Ideals and Top to the Section 95 of the Road Transport Act, (Ideals and 10 be included under these health as.

EXCESS Easin Own Damage Excess Nadscreen Execu

SGD 400,00 500/100,00

An Additional Excess is applicable as follows:

- 1. S\$500 for unrighted Authorised Driver
- 3. \$\$\$,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AVA 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 Venicles (Third Perty Compensation) Act, (Chapter 189) and Part N of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised 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 t 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 Mos

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, so endorsement etc.

AXA insurance Pts Ltd (199903512M) B Sherton Way, #24.01, AXA Tower. Singapore 088811

Sustamer Centre, #B1/01

AXÁ	redefining / insurance			
Date:	3/10/18			
To: Owr	3 1 0 1 18 ner of Vehicle Number: 8 (- E 1113 H			
The foll staff, Z	owing has been advised to you via your workshop, Ah Lim Motor Company through their illa Eileen / Mui Hong.			
Please tick the applicable box if you had been advice on the content as seen below:				
M	You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe, from the day of occurrence.			
M	You had been advised by the workshop on the liability and merits of the case accordingly.			
	You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.			
1	There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.			
W	There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.			
4	The estimated waiting time for the spare parts to arrive is The estimated arrival time does not include the repair period.			
()	You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.			
1	For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.			
	For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using <i>any combination</i> of genuine original parts and/or original equipment manufacturer (OEM) parts.			
H	You had been advised by the workshop of the Twelve (12) months warranty for <u>Own Damage</u> repairs on workmanship related to the accident.			
()	For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.			
()	Others			
Signed and acknowledge by:				
Name and signature of policyholder/authorised driver				
Name a	nd signature of workshop personnel including company stamp			









