

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 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. 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	08/10/2018 12:52
Date Of Accident	05/10/2018 13:30
Exact Location Of Accident	ALONG KIM SENG WALK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE434G
Insured/Policyholder	
Name Of Registered Owner	GAC (SINGAPORE) PTE LTD
Co Reg No	198100305Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97260252
Alternative Phone No	OFFICE-64771400

Vehicle Particulars

Manufacturer	YAMAHA
Model	YBR125
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSES
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	VMO/P2003234
Cover Note Number	

Driver

Name of Driver	TUGIYEM BINTE PARDI
NRIC No	S1717589J
Date Of Birth	18/09/1965
Occupation	OUTDOOR
Date Of Driving Pass	02/05/1995
Driving Experience	23 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97260252
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 418 BEDOK NORTH AVENUE 2 #03-81
Postcode	460418
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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?	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
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO STATEMENT ON 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?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLQ7004L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MARCUS CHEN
NRIC/Passport Number	S9511459H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

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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 (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:

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

Date & Time:



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

Namian
081012018

Sketch Plan Pg. 2

SKETCH PLAN

ALONG KIM SENG WALK

A- FBE434G B- SLQ700YL

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: <u>FBE434G</u>	ACCIDENT DATE & TIME: <u>08/10/2018 @ 1340hrs</u>
CONTACT NUMBER: <u>64771400 / 97260252</u>	E-MAIL ADDRESS: <u>hidir.jamal@gac.com</u>
LOCATION: <u>Along Kim Seng Walk</u>	
<p>My vehicle was initially stationary on the right lane of a 2-lanes road, along Kim Seng Walk, wanted to turn right. Upon traffic clearance, I proceeded to move off. However, I felt an impact from the rear right of my vehicle. As a result, my vehicle lose balance and impacted on the front left bumper of Veh B (SLQ700YL). Subsequently, I fell onto my left. That's all.</p>	
<p>NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION</p>	
Please state:	
<input type="checkbox"/> Claim Own Policy <input type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input type="checkbox"/> Reporting Only	

DECLARATION

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

Policyholder's Signature
 Date & Time:

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

Reporting Officer's Signature
 Name: Nabilah
 NRIC/FIN No.: 08101018

Sketch Plan Pg. 3



redefining / insurance

Date: 08/10/2018

To: Owner of Vehicle Number: PBE434G

The following has been advised to you via your workshop, MOVA AUTOMOTIVE PTE LTD through their staff, Nabiah.

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ () 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.
- () () 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.
- () () 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.
- () () 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.
- () () 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.
- () () 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 **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.
- () () You had been advised by the workshop of the Twelve (12) months warranty for Own Damage 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 and signature of workshop personnel including company stamp

Sketch Plan Pg. 4

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1717589J**

Name: **TUGIYEM BINTE PARDI**

Birth Date: **18 Sep 1965**

Issue Date: **24 Nov 2012**

002124979H

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1717589J**

Name: **TUGIYEM BINTE PARDI**

توكيم بنت فردي

Race: **JAVANESE**

Date of Birth: **18-09-1965** Sex: **F**

Country of Birth: **SINGAPORE**

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

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	02 May 1995
Class 2A Motorcycles between 201 cc and 400 cc	14 Feb 1997
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	19 Mar 2002

NP 428A

Licence No: **S1717589J**

307074

NRIC No. **S1717589J**

Blood Group: **O+** Date of issue: **17-03-1999**

Address: **APT BLK 418 BEDOK NORTH AVENUE 2
#03-81
SINGAPORE 460418**

AXA INSURANCE PTE LTD

Raffles Place, #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 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)

CERTIFICATE NO.	: VMO/P2003234	Account No. : 11494
Coverage	: Third Party Only	
Sum Insured	: NIL	
Name of Policy Holder	: GAC (SINGAPORE) PTE LTD	
Vehicle Registration No.	: FBE434G	
Period of Insurance	: From 28/10/2017 To 27/10/2018 (Both Dates Inclusive)	

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any other person provided he is in the Policyholder's employ and is driving on their 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 only for the Policyholder's business or profession

(b) Use for social, domestic, and pleasure purposes by the Policyholder

The Policy does not cover use for the carriage of passengers for hire or reward, racing, pace-making, reliability trial or speed testing

(13)

* 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 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOGOWT on 16/10/2017

IMPORTANT :

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, covernote and endorsement etc.

Police Report

ANNEX E

NOTICE OF REPORTING

This is to confirm that Tugiyem Binte Pardi, NRIC: S1717589J, has reported to the Police a non-injury traffic accident which occurred near to No.1 Kim Seng Walk on 05/10/2018 at 01:30pm involving the following vehicles:

FBE434G (YBR Yamaha / Blue)

SLQ7004L (Toyota Sienta/ Red)

2. If accident was reported to the Police within 24 hrs of its occurrence, then he has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Bedok North NPC
No. 30 Bedok North Road
Singapore 469676
Tel: 1800-3449999

Rank / Name of Issuing officer: SSGT Imtiaz Ahmed

Date: 05/10/2018

Time: 1903hrs

S/D Ref: B4

Police Post/ Unit: BEDOK NORTH NPC

Original - To be issued to informant
Duplicate - to be submitted to Traffic Police

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



ACCIDENT SCENE PHOTO



ACCIDENT SCENE PHOTO



ACCIDENT SCENE PHOTO



ACCIDENT SCENE PHOTO

