

## 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	05/10/2018 12:32
Date Of Accident	04/10/2018 16:00
Exact Location Of Accident	SEMPAWANG RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC9496K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ALEXIS TOMOE GIRIN
NRIC No	G3139719M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98261290
Alternative Phone No	OFFICE-98261290

### Vehicle Particulars

Manufacturer	AUDI
Model	Q7
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	GA266167
Cover Note Number	

### Driver

Name of Driver	DE SAINTE MARIE D'AGNEAUX CAROLINE CECILE NADINE
NRIC No	G3154538U
Date Of Birth	05/06/1979
Occupation	INDOOR
Date Of Driving Pass	01/06/2007
Driving Experience	11 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92710050
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	64A WALMER DRIVE
Postcode	555096
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	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?	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)	5
Passenger 1	NAME: : MATAHILDE GIRIN GENDER: : FEMALE
Passenger 2	NAME: : CAMILLE GIRIN GENDER: : FEMALE
Passenger 3	NAME: : NALL GENDER: : FEMALE
Passenger 4	NAME: : UNKNOWN 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
If Yes, against whom?	

#### Circumstances of Accident

I WAS TRAVELLING ALONG THE CENTER LANE OF 3 LANES OF SEMBAWANG ROAD. TRAFFIC LIGHT AHEAD TURNED RED. VEHICLE IN FRONT OF ME SLOWED DOWN AND STOPPED, I FOLLOWED SUIT. SUDDENLY, I HEARD A LOUD BANG. VEHICLE C HIT ONTO THE REAR PORTION OF VEHICLE B, CAUSING VEHICLE B TO SURGE FORWARD AND HIT ONTO THE REAR PORTION OF MY VEHICLE. I ALIGHTED AND REALISED THERE WERE A TOTAL OF 3 VEHICLES INVOLVED. I WOULD LIKE TO LODGE THIS FOR INSURANCE CLAIMING PURPOSE.

#### 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	SLU5346S
Vehicle Make/Model/Colour	

Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GZ2194Z
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE C
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**SKETCH PLAN**

**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. 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 (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:

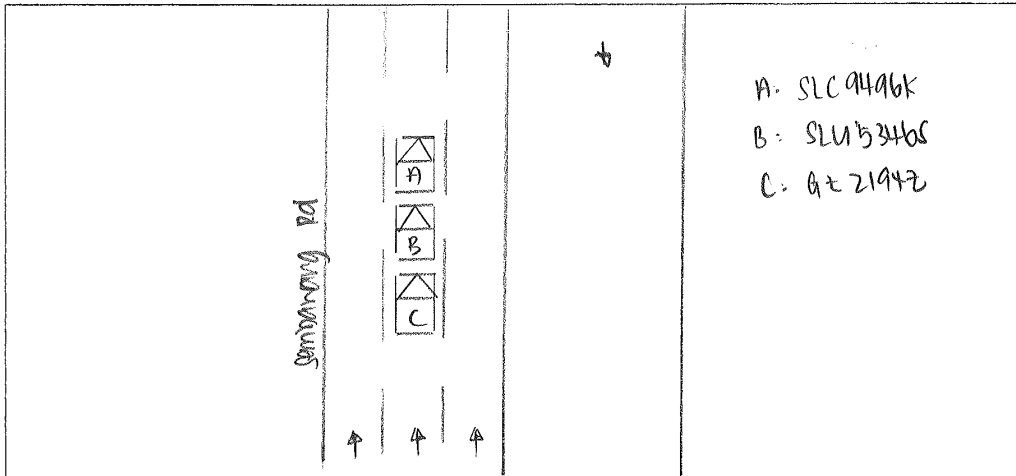


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# Sketch Plan #2 Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

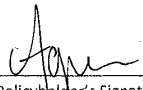
I was travelling along the centre lane of 3 lanes of Sembawang Road. Traffic light turned red, vehicle in front of me slowed down and stopped, I followed suit.

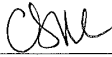
Suddenly, I heard a loud bang. vehicle C hit onto the rear portion of vehicle B, causing B to surge forward and hit onto the rear portion of my vehicle.

I alerted and realized there were a total of 3 vehicles involved. I would like to lodge this for insurance claiming purpose.

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

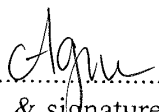
## LETTER OF UNDERTAKING

I/We, Alexis Tomoe Ginn, the owner of vehicle no. SL 9496C.

My/Our Insurance is under M/s AXA Insurance 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 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, NEW HOON TEE

Signed and Acknowledge by:

  
Nric no. & signature of policyholder

.....  
Company stamp

05/10/2018  
Date



**EMPLOYMENT PASS**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
**AMADEUS GDS SINGAPORE PTE. LTD.**



Name  
**ALEXIS TOMOE GIRIN**  
Occupation  
**SENIOR ACCOUNTING MANAGER**

FIN  
**G3139719M**

Date of Application  
**13-02-2015**

Date of Issue  
**02-03-2015**

Date of Expiry  
**02-03-2017**



**L5376388**

**VISIT PASS**  
Immigration Regulations

Name  
**ALEXIS TOMOE GIRIN**



Date of Birth	Sex	Nationality
<b>12-04-1978</b>	<b>M</b>	<b>FRENCH</b>
FIN	Date of Issue	Date of Expiry
<b>G3139719M</b>	<b>02-03-2015</b>	<b>02-03-2017</b>

**MULTIPLE JOURNEY VISA ISSUED**

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**



REPUBLIC OF SINGAPORE

FIN G3154538U



Name

DE SAINTE MARIE D'AGNEAUX CAROLINE  
CECILE NADINE

Date of Birth  
05-06-1979

Sex  
F

Nationality  
FRENCH



FA1313499

**DEPENDANT'S PASS**  
Immigration Regulations

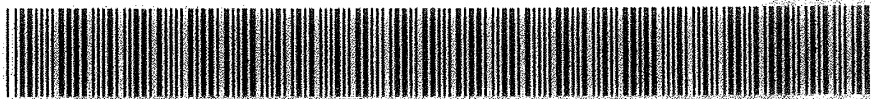


FIN G3154538U

MULTIPLE JOURNEY VISA ISSUED

Date of Issue  
07-04-2015

Date of Expiry  
02-03-2017



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



1. Nom : DE SAINTÉ MARIE D'ABNEAUX  
EPOUSE GIRIN

2. Prénom : CAROLINE CECILE

3. Date et lieu de naissance : 05/06/1979  
VERDUN (055)

8. Domicile : 13 AVE DES ARBOUSIERS  
PARC RES. DE L'ESTEREL  
83600 FREJUS


4. Délivré par : LE SOUS-PREFET (06)

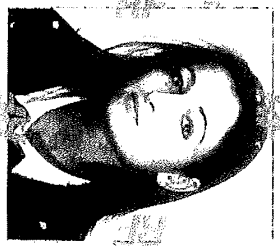
A GRASSE












le 13/06/2007

5. N° 060706100166

7. Signature du titulaire





CATEGORIES DE VEHICULES POUR LESQUELLES LE PERMIS EST VALABLE		DEPUIS LE	JUSQU'AU	RESTRICTIONS	MENTIONS	TIMBRE
A	A1	 ≤ 125 cc ≤ 11 kW	*****			
	A	 ≤ 25 kW ≤ 6,16 kW/kg	*****			
			*****			
B	B1		17/04/2007			
	B	 ≤ 3500 kg ≤ 11 - 6 L	17/04/2007			
C	C		*****			
D	D		*****			
E	B		*****			
	C		*****			
	D		*****			

RÉPUBLIQUE FRANÇAISE

CIRCULATION AUTOMOBILE INTERNATIONALE

# PERMIS INTERNATIONAL

DE CONDUIRE N° 13994115

Convention sur la circulation routière  
du 8 novembre 1968

Valable jusqu'au 21 AOUT 2018<sup>(1)</sup>

Délivré par

à le PRÉFECTURE  
Permis de Conduire  
DU RHÔNE 21 AOUT 2015

Numéro du permis de conduire national 060706100166



Pour le Préfet,  
le chef de service délégué  
Gaëlle ARBEY (3)

(1) Trois ans au maximum après la date de délivrance ou jusqu'à la date d'expiration de la validité du permis national de conduire, si celle-ci survient auparavant.

(2) Sceau ou cachet de l'autorité ou de l'association qui délivre le permis.

(3) Signature de l'autorité ou de l'association qui délivre le permis.

1. de Sainte Marie d'Agneaux ép. Girin
2. Caroline
3. Verdur
4. DS 06 1979
5. 69006 Lyon

CACHET (1)	CACHET (1)
A	A1
B	B1
C	C1
D	D1
BE	
CE	C1E
DE	D1E



Signature du titulaire :

## EXCLUSIONS

Le titulaire est privé du droit de conduire sur le territoire de

(6)

Jusqu'au

Le

A

Le titulaire est privé du droit de conduire sur le territoire de

(6)

Jusqu'au

Le

A



redefining / insurance

AXA Insurance Pte Ltd  
 1800 880 4888 (Within Singapore)  
 (65) 6880 4888 (International)  
 (65) 6880 4740  
 customer.care@axa.com.sg  
 www.axa.com.sg

account number  
 08028

## 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)

### Policy details

Policyholder name	ALEXIS TOMOE GIRIN	Certificate number	GA266167 / 1
Cover	Comprehensive	Chassis number	WAUZZZ4L69D028832
Plan name	Essential	Engine number	BHK099517
NCD applicable	0%		
Vehicle registration number	SLC9496K		
Period of Insurance	from 10/09/2017 to 18/11/2018 (both dates inclusive)		
Finance loan company	DBS BANK LTD		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder
- (b) Any Named Driver as stated in the Policy:
  - 1. DE SAINTE MARIE D'AGNEAUX CAROLINE CECILE NADINE
- (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	SGD 800.00
	Windscreen Excess	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. S\$5,000 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

Nil

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

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

