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 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	08/10/2018 17:15
Date Of Accident	07/10/2018 15:40
Exact Location Of Accident	ALONG DUNCAN ROAD TOWARDS NEWTON CIRCUS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLD6500X
Insured/Policyholder	
Name Of Registered Owner	LEE SZE SIONG
NRIC No	S1462422H

Email Address LSSGOAL36@OUTLOOK.COM

Mobile Phone No (LOCAL) +65-91882063
Alternative Phone No OFFICE-NOPHONE

Vehicle Particulars

Manufacturer PORSCHE
Model PANAMERA

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?

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 GA369051/1

Cover Note Number

Driver

Name of Driver

LEE SZE SIONG

NRIC No

S1462422H

Date Of Birth

15/10/1961

Occupation

INDOOR

Date Of Driving Pass

16/04/1979

Driving Experience 39 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91882063

Fax Number

Contact Number OFFICE-NOPHONE

EMail Address LSSGOAL36@OUTLOOK.COM

36 ROBIN CLOSE S258313 Address

Postcode

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 **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.

1

NO

NO

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given? 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 NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLS636Z

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category Name of Driver **JACKY CHOO**

NRIC/Passport Number

98155389 **Contact Number**

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 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 (all 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 Pg. 2

SKETCH PLAN	18/ B
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Date & Time:

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

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

Underwritten by:



redefining / insurance

Certificate of Insurance

Distributed by:



☎ 6220 9266 ⊠ motor@gnm.com.sg

AXA Insurance Pte Ltd 1800 880 4888 (65) 6880 4740 ⊠ customer.care@axa.com.sg

date 25/06/2018

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960-Road Transport Act. 1987 (Malaysia)

Policy details

Policyholder name Cover

LEE SZE SIONG Comprehensive Plan name Persche Prime NCD applicable 50% Vehicle registration number

SLD6500X

from 24/06/2018 to 23/06/2019 (both dates inclusive)

Certificate number GA369051 / 1 Chassis number WP0ZZZ97ZGL005618 Engine number 013684

SGD 298,800

Persons or classes of persons entitled to drive*

(a) The Policyholder

Period of Insurance

The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his

(b) Any Named Driver as stated in the Policy

1. RITA CHEW WAI KUEN

3. NOORAZHAR BIN MOHD TAP

2. LEE SZE LEONG

Finance lean company

Sum Insured

(c)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:

to 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

Sect I - Used In S'pore Only Sect I - Used Outside S'pore Fire&Theft - Outside S'pore Windscreen Excess

SGD 2,000.00 SGD 2,000.00 SGD 2,000.00 SGD 500.00

An Additional Section 1 Excess of \$3,000 will apply for Authorized drivers who are at the age of 23 years old or below and/or with less than 3 years of driving experience. 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.

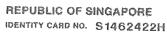
Authorised signature

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

1 of 2

Sketch Plan Pg. 4









Nome

LEE SZE SIONG

李 忠 淑

CHINESE
Date of bluth
15-10-1961
Country of birth
SINGAPORE

::14**62**045H

4861437

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS[ES]

PASS DATE

PASS DATE

10 Apr 1979

Ulcenice No: \$1462422H

NP 4284

Neic No. S1462422H

Date of beaue

Address
36 ROBIN CLOSE
SINGAPORE 258313









