### 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.

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	ACCIDENT STATEMENT
Date Of Report	09/10/2018 13:54
Date Of Accident	08/10/2018 14:50
Exact Location Of Accident	KEPPEL DISTRICT PARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YN8557M
Insured/Policyholder	
Name Of Registered Owner	IVY WAREHOUSING & TRANSPORTATION PTE LTD
Co Reg No	199607117D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63651683
Vehicle Particulars	
Manufacturer	UD TRUCKS
Model	PKC8ELN5EP
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VCA/P1667496
Cover Note Number	
Driver	
Name of Driver	YEO KEE KIAT

Name of Driver YEO KEE KIA
NRIC No S6901968D
Date Of Birth 20/01/1969
Occupation OUTDOOR
Date Of Driving Pass 06/06/2013

Driving Experience 5 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96896260

Fax Number

Contact Number

EMail Address NOEMAIL

602 SENJA ROAD Address

#05-17

Postcode 670602

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** 

SIDE SWIPE Type Of Accident Weather Conditions **UNDER SHELTER** 

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : JOHNSON

GENDER: : MALE

**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?

NO

NO

**Circumstances of Accident** 

REFER ATTACHED 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 Y8974Y

Vehicle Make/Model/Colour UNKNOWN / UNKNOWN / GREEN

**Details Of Properties** 

Vehicle Category **COMMERCIAL VEHICLE** 

**CHIN CHIAP YIN** Name of Driver

NRIC/Passport Number S1595560J

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

### **IMPORTANT NOTICE**

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- 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.
- Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers to the GIA Records Mangement Centre establised 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.
- 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 w ith 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 detention, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insureres 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 requirments under any regulations, laws or court orders.

Policyholder's Signature

9/10/18

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

8110118

IMPORTDELGRO ENGINEERING PTE EI

45 PANDAN ROAD SINGAPORE 609286 9/10/18-

TEL 6338 8778 FAX: 6262 6950 Reporting Centre Personnel's Signature
Name: Vo Yung Khow
NRIC / Fin No.:

626389777.

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To Custom To all
SKETCH PLAN  To other way.  A = YM8974Y.
h = 1/1109749
yellow box. B=?
B k     C= YN 8557M.
C19 ABICT Yeare Cook
69096810 91018
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
All vehicles were uniting for clearance on own lane.
Lone A& B going to custom while Lane c going other way
or turning left to behind Blk 519. When I was driving left
almost passby vehicle A, then vehicle A drive forward & hit LH side of my vehicle.
John State of Johnson
<b>X</b>
Les Kee Kiat
690196812
9.10.18
IMPORTANT NOTE
IMPORTANT NOTE  Under General Condition – Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.
or discovery or damage whether or not to claim under the policy. Flease check your policy for more information.

<u>DECLARATION</u>
I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time

81.01.0

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

9.10.18

JMFJRTDELGRU ENGINEERING PTE L)
45 PANDAN ROAD
SINGAPORE 609286 9/10/19,
FL 6338 8778 FAX: 6262 6950

Reporting Centre Personnel's Signature
Name: Vo You Why
NRIC / Fin No.:
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AYA MOURANCE PTE LTD 8 S \_iton Way, #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.

: VCA/P1667496

Account No.: 04437

Coverage

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: IVY WAREHOUSING & TRANSPORTATION PTE LTD

Vehicle Registration No. : YN8557M

Period of Insurance

: From 03/08/2018 To 02/08/2019 (Both Dates Inclusive)

### PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

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.

### LIMITATIONS AS TO USE\*

(a) Use in connection with the Policyholder's business
 (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
 (c) Use for social, domestic and pleasure purposes

This Policy does not cover

(a) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing

(b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

(05)

### EXCESS :

Sect I - Any Authorised Driver : SGD 2,500.00 Sect II-Any Authorised Driver : SGD 1,500.00 Windscreen Excess : SGD 200.00 (Please refer to your policy for Additional Excess)

\* 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 - SGOMOHA on 10/08/2018

IMPORTANT :

IMPORIANT:
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.

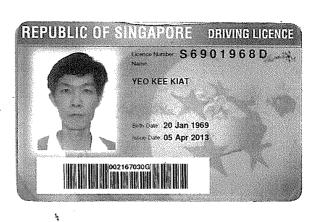
The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.

**ALLINK INSURANCE AGENCY** Bik 153 Bukit Batok Street 11 #02-290 Singapore 650153

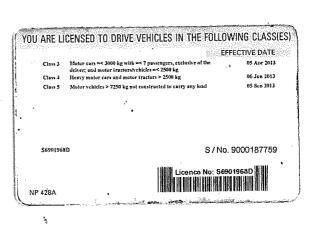
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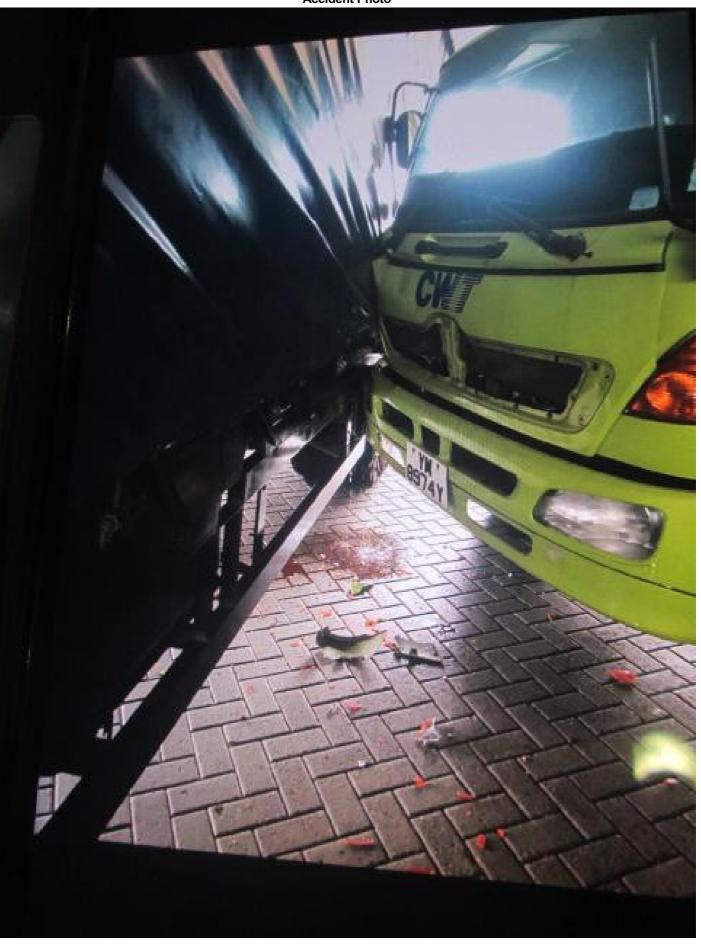


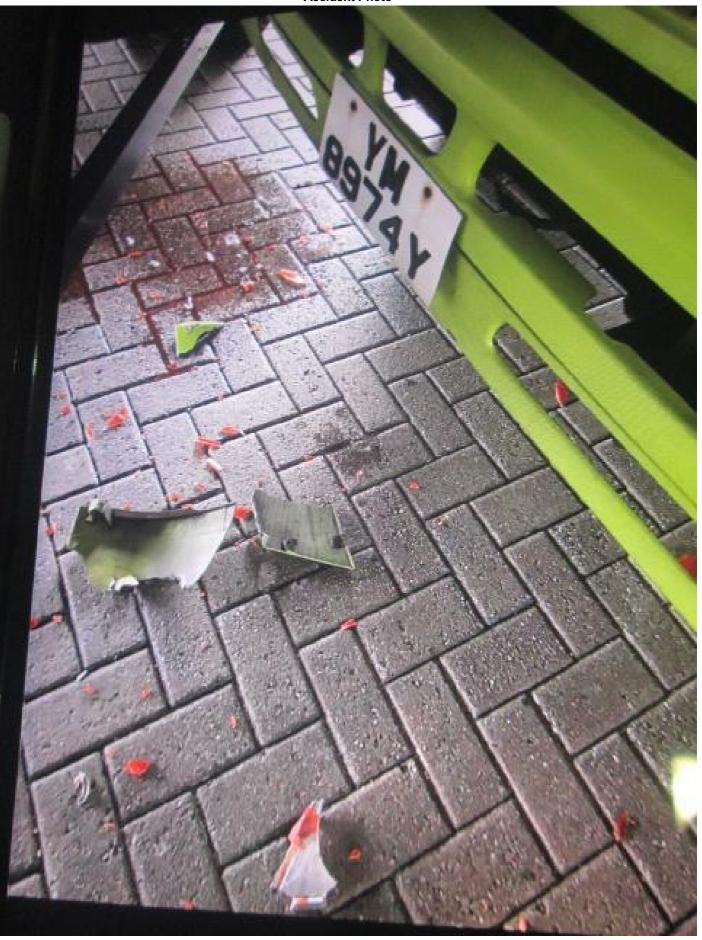


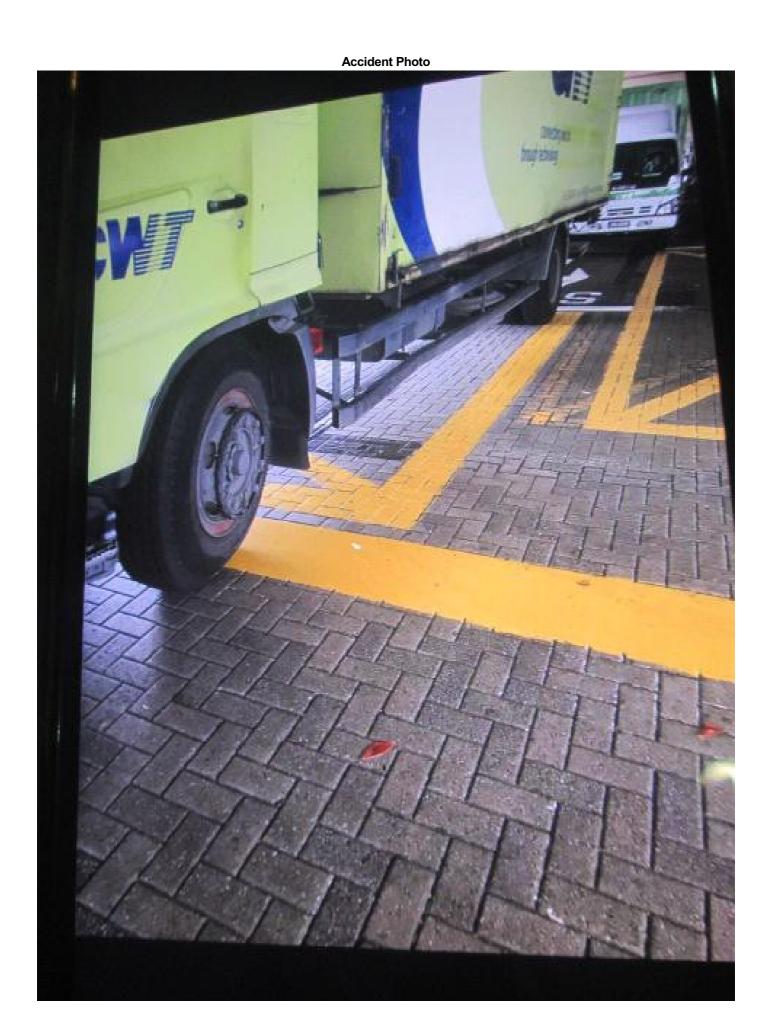




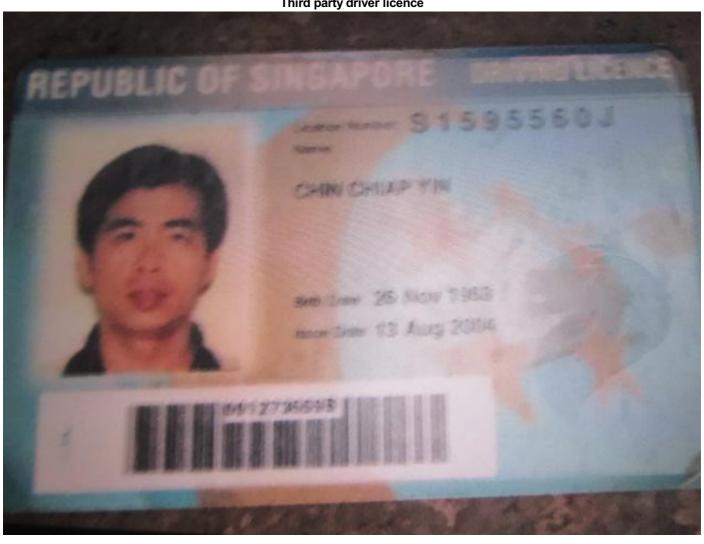








Third party driver licence



Third party driver licence

