#### 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 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

	ACCIDENT STATEMENT
Date Of Report	24/10/2018 11:30
Date Of Accident	24/10/2018 07:15
Exact Location Of Accident	SLIP ROAD TOWARDS KJE
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKH8964T
Insured/Policyholder	
Name Of Registered Owner	ANDREW NG YANG EN
NRIC No	S8680704A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90112533
Alternative Phone No	OTHERS-90112533
Vehicle Particulars	
Manufacturer	SUBARU
Model	IMPREZA 5D 1.5R AWD AT
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?	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	GA139364/1
Cover Note Number	
Driver	

Name of Driver ANDREW NG YANG EN

NRIC No S8680704A Date Of Birth 20/10/1986 Occupation **INDOOR** Date Of Driving Pass 02/02/2009

9 YEARS AND 8 MONTHS **Driving Experience** 

Gender MALE

Mobile Number (LOCAL) +65-90112533

Fax Number

Contact Number OTHERS-90112533

**EMail Address NOEMAIL** 

284 CHOA CHU KANG AVE 3 #08-340 SPORE 680284 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

NO

1

**General Information of the Accident** 

Type Of Accident **CHAIN COLLISION** 

Weather Conditions **CLEAR** Road Surface DRY

Other Information

NO Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**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** 

REFER TO SKETCH PLAN

Attachment(s)

YES Are accident photos available for attachment? NO Was there any video captured by Car Camera? NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number GBD4826M

Vehicle Make/Model/Colour NISSAN CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5

**Details Of Properties** 

**GOODS VEHICLE** Vehicle Category

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 FW6830P Vehicle Make/Model/Colour HONDA TA200 **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)

# **DETAILS OF OTHER VEHICLE PROPERTY 3**

MOTORCYCLE

Vehicle Registration Number SLD7335A

Vehicle Make/Model/Colour HONDA SHUTTLE 1.5G A

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 3 of 17

#### **Sketch Plan**

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- 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 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)
  - 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:

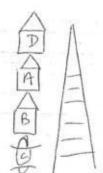
Reporting Centre Personnel's Signature

1

Name: Schular NRIC/FIN No.: SAUTO370A

# Sketch Plan #2

# SKETCH PLAN



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on saliche of 7.15am, I was driving my vehicle A
along Slip road towards KJE. vehicle D stop, I sellow
suit. Suddenly ushicle & hit on my near portion and
) There pertion and
cause my cer to push formered and but on which
J post strong and the on which
D. There 4 cors involved in an accident.
The structures in an allident.
*7

DECLARATION

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

Policyholder's Signature Date & Time

Driver's Signature

(If driver is not title policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: S.L., A; NRIC/FIN No.: SOD YOJOOA













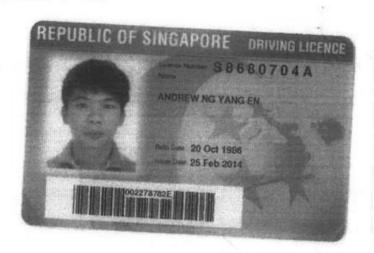


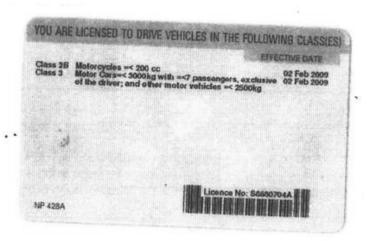






# **Driving License**





#### Insurance policy





AXA Insurance Pte Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740

customer.care@axa.com.sg 12 www.axa.com.sg

account number 08198

**Certificate of Insurance** 

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 1891-Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960-fixed Transport Act. 1987 (Malaysia)
-Motor Vehicles (Third-Party Risks.) Rules, 1959 (Malaysia)

#### Policy details

Policyholder name Cover Plan name

NCD applicable

ANDREW NG YANG EN Comprehensive Essential 30% SICHERRAT

Certificate number Chassis number Engine number

GA139364/1 JF1GH3KS58G022227 EL150501237

Vehicle registration number Period of Insurance

from 30/01/2018 to 29/01/2019 (both dates inclusive) Finance loan company HONG LEONG FINANCE LIMITED

# Persons or classes of persons entitled to drive\*

(a) The Policyholder

(b) 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, rollability 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 S 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 Windscreen Excess

SGD 600.00 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. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium

# 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

#### 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 doctroyed a Statutory Declaration to the effect must be made. Faiture to comply with this obligation is an offence under the Motor Vehicle (Trans-

Party Risks and Compensation Act (Cap. 189).

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

資業(保險)代理私人有限公司 INSMART (INSURANCE) AGENCY PTE LTD NO. 1 KAKI BUETT ROAD 1 903-27 ENTERPRISE ONE SINGAPORE 415934 TEL: 6842 0766 FAX: 6842 6955 / 6842 7855 1 of 2

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #81-01