

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 | 29/10/2018 17:38 |
| Date Of Accident | 28/10/2018 13:00 |
| Exact Location Of Accident | 316A ANG MO KIO ST31 OPEN CARPARK |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SJH4425X |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|-----------------------------------|
| Name Of Registered Owner | JUMILAH JULIE BINTE MOHAMED ISHAK |
| NRIC No | S7914662E |
| Email Address | JUMILAHJULIE@LIVE.COM |
| Mobile Phone No | (LOCAL) +65-91763814 |
| Alternative Phone No | OFFICE-91763814 |

Vehicle Particulars

| | |
|--------------|--------------|
| Manufacturer | HONDA |
| Model | FREED 1.5G A |

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 | P1794110 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | ALIF DANIAL BIN BORHAN |
| NRIC No | S9309675D |
| Date Of Birth | 19/03/1993 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 27/01/2015 |
| Driving Experience | 3 YEARS AND 9 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90867456 |
| Fax Number | |
| Contact Number | |
| Email Address | JUMILAHJULIE@LIVE.COM |

| | |
|---|------------------------------|
| Address | 316A ANG MO KIO ST31 #06-303 |
| Postcode | 562316 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | CHILDREN |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------------------------|
| Type Of Accident | COLLIDED INTO PARKED VEHICLE |
| Weather Conditions | RAINING |
| Road Surface | WET |

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? | NO |
| If Yes, Please state which Police Station | |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE REFER TO ATTACHMENT

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 | SKW849S |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | LEE KIAT YEOW |
| NRIC/Passport Number | S1504065C |
| Contact Number | 98308548 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SGX2961D |
| Vehicle Make/Model/Colour | |

Details Of Properties

| | |
|-------------------------------------|-----------------|
| Vehicle Category | PRIVATE CAR |
| Name of Driver | CHEE CHOON SING |
| NRIC/Passport Number | S7868035J |
| Contact Number | 96520011 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

DETAILS OF OTHER VEHICLE PROPERTY 3

| | |
|-------------------------------------|--------------------|
| Vehicle Registration Number | GBG7075C |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | |
| NRIC/Passport Number | S7518161B |
| Contact Number | 92285205 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

DETAILS OF OTHER VEHICLE PROPERTY 4

| | |
|-------------------------------------|-------------|
| Vehicle Registration Number | SLG4892L |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| 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) | |

Accident Sketch Plan


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.

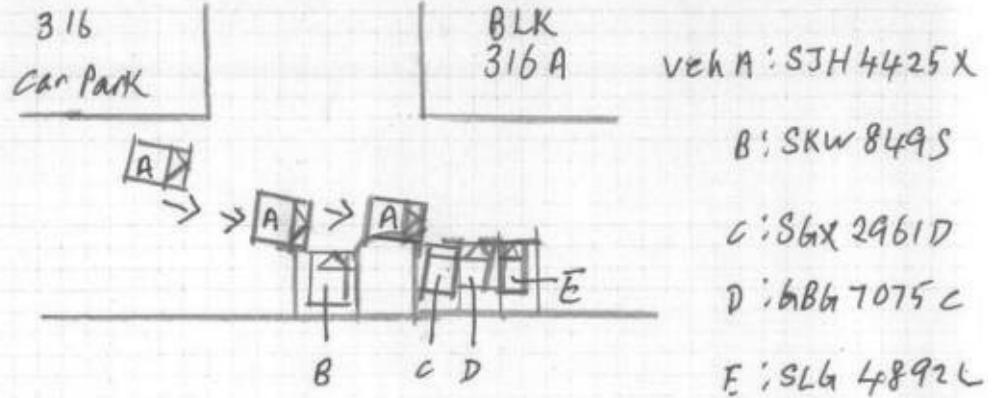

Policyholder's Signature
Date & Time:


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


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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was looking around for lots to park. When a cat dash across my way. I avoid the cat and skidded. First I hit car B and then mounted the curb and eventually hit car C. Car C domino effect hit Car D and Car D hit Car E.

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.:

CERTIFICATE OF INSURANCE Pg. 1

AXA INSURANCE PTE LTD
 8 Shenton 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. | : VPA/P1794110 | Account No. : 13950 |
| Coverage | : Comprehensive | |
| Sum Insured | : Market Value At The Time Of Loss | |
| Name of Policy Holder | : JUMILAH JULIE BINTE MOHAMED ISHAK | |
| Vehicle Registration No. | : SJH4425X | |
| Period of Insurance | : From 07/08/2018 To 06/08/2019 (Both Dates Inclusive) | |

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

- (a) The Policyholder
 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 partner
- (b) Any other person who is driving on the Policyholder's order or with his 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*

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, speedtesting, 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.

(01)

| | |
|-------------------------------|--------------|
| Basic Own Damage Excess | : SGD 400.00 |
| Voluntary Excess | : SGD 500.00 |
| Final Basic Own Damage Excess | : SGD 900.00 |

An Additional Excess is applicable as follows:
 S\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver.
 S\$5,000.00 for Undeclared Young and Inexperienced Driver.
 (Please refer to your policy on the terms & conditions)

* 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 - SGISNEL2 on 27/07/2018

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).

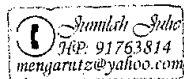
The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.



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

PASS DATE


Class 3 Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =<2500kg 06 Jan 2006



NP 42BA



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7914662E





Name
JUMILAH JULIE BINTE
MOHAMED ISHAK
جويليه جولي بنت محمد اسحق

Race
MALAY


Date of Birth
19-05-1979

Sex
F


Country of Birth
SINGAPORE



3086180



NRIC No. S7914662E



Blood Group
O+

Date of Issue
24-06-1999

Address
APT BLK 316A ANG MO KIO STREET 31 #06-303
SINGAPORE 662316

P S7914662E Date: 04-10-2005 No: 8308242

DRIVER ID AND DRIVING LICENCE

4196446



NRIC No. **S9309675D**

Date of issue
28-03-2008

Address

**APT BLK 316A ANG MO KIO STREET 31
#06-303
SINGAPORE 562316**

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

EFFECTIVE DATE

| | | |
|----------|---|-------------|
| Class 2B | Motorcycles \leq 200 CC | 07 Jan 2012 |
| Class 2A | Motorcycles between 201 CC and 400 CC | 22 Nov 2016 |
| Class 2 | Motorcycles $>$ 400 CC | 12 Jan 2018 |
| Class 3 | Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors/vehicles \leq 2500 kg | 17 Jan 2015 |

S / No. 900077250

S9309675D

NP/428A



Licence No: S9309675D

DRIVER ID AND DRIVING LICENCE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S9309675D**



Name
ALIF DANIAL BIN BORHAN

Race
BOYANESE

Date of birth
19-03-1993

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9309675D**

Name:
ALIF DANIAL BIN BORHAN

Birth Date: **19 Mar 1993**

Issue Date: **07 Jan 2012**



SCENE PHOTOS 1



SCENE PHOTOS 2



SCENE PHOTOS 3



SCENE PHOTOS 4



SCENE PHOTOS 5



SCENE PHOTOS 6



SCENE PHOTOS 7



SCENE PHOTOS 8



SCENE PHOTOS 9



SCENE PHOTOS 10



SCENE PHOTOS 11



SCENE PHOTOS 12



Accident Photo 1



Accident Photo 2



Accident Photo 3



Accident Photo 4



Accident Photo 5



Accident Photo 6



Accident Photo 7



Accident Photo 8



Accident Photo 9



Accident Photo 10



Accident Photo 11



Accident Photo 12



Accident Photo 13



Accident Photo 14



Accident Photo 15



Accident Photo 16



CHASSIS NUMBER



ODO METER

