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	07/11/2018 15:48
Date Of Accident	03/11/2018 06:00
Exact Location Of Accident	ALONG CAUSEWAY WOODLANDS CHECK POINT TOWARDS JOHOR
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGZ3860U
Insured/Policyholder	
Name Of Registered Owner	NOH RIDZUAN BIN KOHSNEN
NRIC No	S8610003G
Email Address	WAN_MUK@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91694762
Alternative Phone No	OFFICE-91694762
Vehicle Particulars	
Manufacturer	HONDA
Model	AIRWAVE-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USAGE
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA291960
Cover Note Number	
Driver	
Name of Driver	NOH RIDZUAN BIN KOHSNEN
NRIC No	S8610003G
Date Of Birth	12/04/1986

 NRIC No
 \$8610003G

 Date Of Birth
 12/04/1986

 Occupation
 INDOOR

 Date Of Driving Pass
 05/12/2008

Driving Experience 9 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91694762

Fax Number

Contact Number OFFICE-91694762

EMail Address WAN_MUK@HOTMAIL.COM

Address BLK 665A PUNGGOL DRIVE #12-506 SINGAPORE

Postcode 821665

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 2

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

4

Number of Passengers (Including Driver)

Passenger 1

NAME: : ILYANI KAVTSAR BTE MOHD HASHIM

GENDER: : FEMALE

Passenger 2 NAME: : IFZA FALISHA BTE NOH RIDZUAN

GENDER: : FEMALE

Passenger 3 NAME: : MEDINA NAWWARAH BTE NOH RIDZUAN

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

REFER TO ATTACHED SKETCH PLAN.

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 SLC539E

Vehicle Make/Model/Colour

Details Of Properties

REAR PORTION

Vehicle Category

PRIVATE CAR

Name of Driver

YANG CHIN MING

NRIC/Passport Number

S1543701D

NRIC/Passport Number S1543701I Contact Number 90038858 Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Passenger 1

2 NAME:

: NIL

GENDER:

: FEMALE

SKETCH PLAN

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- 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

Date & Time

Driver's Signature

(if driver is not the policyholder)

Date & Time

COMPORTDELESSO ENGINEERING PTE LTD

EXTERNAL BUSINESS DIV. PANDAN BRANCH

NAME & SIGNATURE:

DESIGNATION:_

Reporting Centre Personnel's Signature

Name/ONG CHEE WE NRIC/FIN No.: 972/3099/

Page

SKETCH PLAN	
Own DAMAGE Headlight 3rd party damage Front View Headlight Roar view 3rd party	1
SG23860V) * Scratches Scratches Swiff morks Suff marks scratches	The same wife from the same
BUMPER	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	228 ma
On B/11/2018 my car reg no s62 38600 meet met with a minor accident	_
with a car reg no. SLC 539 E & at woodlands chartpoint heading towards	
johore bahw. My rehicle, did a front to near of the other wehicle.	
No injuries reported. No police report have been made.	
Daniel a to the other party relief and a small length porator &	
Downinge to the other party rehicle are a small length ocratch by Scriff marks on the rear left side bumber bumper of the third party	
rehiche. Damage to my vehicle is front left bumper of my car.	_
I offered a private settlement but third party insisted workshop conjutation	<u>и</u> ,
	_
Third party with intention of claiming the wrote bumper damage /crack /	<u></u>
scratches which I find not valid to this accident. Third party resorted	
to insurance claims. Attached pictures for consideration.	
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.	
DECLARATION I/We declare the foregoing particulars are true in every respect.	
COMFORTDELGRO ENGINEERING FIE LTD	
EXTERNAL BUSINESS DIY, BAHDAN BRANCH NAME & SIGNATURE:	

Policyholder's Signature
Date & Time 7/1/2018

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

Reporting Centre Personnel's Signature Name/VONG CHEE WEI NRIC/Fin No.: 672/80994/

DESIGNATION:

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Sketch Plan Pg. 3



redefining / insurance



NOH BIP, TO THE EHOSNEN . 5LK 665A CLUB GOL DRIVE #12-500 SINGAPORE ST1665

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

New business

date 15/11/2017

your servicing distributor DICKSON AUTO AGENCY / 08028

your servicing distributor contact 63447667

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name Cover

NOH RIDZUAN BIN KHOSNEN

Policy number FIN / NRIC

VA1 / GA291960

Period of Insurance

Comprehensive

from 15/11/2017 to 14/11/2018 (both dates inclusive)

S8610003G

Premium breakdown

Gross Premium after 0% NCD

7% GST **Final Premium** SGD 1.620.06 SGD 113.40 SGD 1,733,46

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

Smart Dr. ... Canarenensive Essential Benefits

- 1711 Subject Transportation in Singapore or Overseas
- than the order to Dephasment with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- harmeter or Expairs for twelve (12) Months
- 1.79 × 11.00 pg.
- 4 , , , 11 , 40

Vehicle details

Make & Moder of Vehicle Vehicle registration number Body type Seating constant, and driver) Ori-Peal

HONDA AIRWAVE 1.5 SGZ3860U STATWG No

Year of manufacture Type of Use Engine capacity (c.c.) Engine number Chassis number

2007 Private use 1496 L15A5153814 GJ11203230

Insured s.f. to eated Market Value

Limitation 1 co--Finance Lour Gen pany Market Value at the time of Loss (including accessories and spare parts)

As per Certificate of Insurance DICKSON CAPITAL PTE LTD

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic (min 1 and Excess

SGD 700.00 SGD 100.00

Winds we Chare

Drivers details

Driver type

Driver name

Date of birth

Driving experience

Main Em

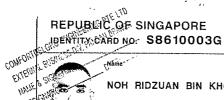
NOH RIDZUAN BIN KHOSNEN

12/04/1986

10 year(s)

AXA Insurance Pre-Ltd (199903512M) 8 Shenton Way #23-01, AXA Tower,

Singapore 068811 Customer Centre: #84-01 1 of 2



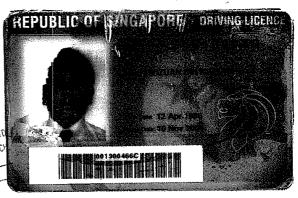


NOH RIDZUAN BIN KHOSNEN

نوه ریدنوان بن خوسنین JAVANESE

12-04-1986 Country/Place of birth SINGAPORE

45370005 EKONEERING PIE LTO KARORIDELGRO EKONEERING PIE LTO EXTERNAL BUSHESS DN PAIDAN BRANC MISSE & SIGNATURE



COMPORTDELGRO ENGINESIRING PTE LTD EXTERNAL BUSHESS DIV. FINDAM BRANCH NAME & SIGNATURE:

