### 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

<ol> <li>By the loagement of this report to the insurers, you hereby consaforesaid.</li> </ol>	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	05/11/2018 13:06
Date Of Accident	04/11/2018 11:00
Exact Location Of Accident	SHEARES AVE
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMD8311A
Insured/Policyholder	
Name Of Registered Owner	CHENG WEE LIANG
NRIC No	S0038490I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90550687
Alternative Phone No	OFFICE-90027019
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	VELLFIRE-2.4 DBA-ANH20W (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number P2173779

Cover Note Number

**Driver** 

Name of Driver RAMAMOORTHY KARTHI

Work Permit No G242025R Date Of Birth 13/11/1989 Occupation **INDOOR** Date Of Driving Pass 17/06/2015

3 YEARS AND 4 MONTHS **Driving Experience** 

Gender MALE

Mobile Number (LOCAL) +65-90550687

Fax Number

Contact Number

**EMail Address** XTRAKARTHI@GMAIL.COM Address 913 JURONG WEST ST 91 #08-127

Postcode 640913

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** 

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?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name NANYANG NEIGHBOURHOOD POLICE CENTRE

NO

NO

NO

YES

1

Police Station Address ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-7929999 - **FAX NO**: 67912972

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

PLEASE REFER AS ATTACHED

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 SLU4317H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver ENG KEE WEE
NRIC/Passport Number S8140850E
Contact Number 91894462

Address Postcode

Insurance Company Name

Nature Of Damage

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No. Of Passenger (Including Driver)

### **Accident Sketch Plan**

### SKETCH PLAN

### IMPORTANT NOTICE

1. 67

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- 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.
- 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)

Lunderstand, 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' law yers/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;

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- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices forme, 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

5MD8311A

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

headles AVE .

Witnessed by Reporting Centre Personnel

Sketch Plan

Martina

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Describe Circumstances o	f the Accident
The of the inner le	succeeding the accident hoppened at about 11 AM at the sheares AVE and Marina BIVD.  I was traveling sheares AVE in It lane to turn into Marina BIVD at the and keeping with in my lane;  Succeeding with in my lane;  Succeeding the san Number SIU 43171 to over lane on my right traveling at the over take me well turning marina BIV AS he was turning he is can my can damaging the infron Right Side of the is the left Side at the back Side of he is
Declaration	

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

Policyholder's Signature / Date & Time

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Witnessed by Reporting Centre Personnel





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

EFFECTIVE DATE

13-11-1989 M Fin Sale of Seas NEKAH 02452025R 71-01-2018 22-02-2021

VISIT PASS

RAMAMOORTHY KARTH

### NOTICE OF COMPLIANCE

Annex D



This is to confirm that Ramamoorthy Karthi, G2452025R, B/913 J/W St 91 #08-127 S(640913) (Hp: 90550687) has reported to the police a non-injury traffic accident which occurred along Sheares Avenue towards Marina Boulevard on <a href="https://doi.org/10.100/journal.org/10.100/jou

2 He / She have therefore complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Date: 04/11/2018 Na

S/D Ref: 56

Name of Issuing Officer: Sgt John

Police Post/Unit: Jurong Police Div / Nanyang NPC

This form was generated from Nanyang NPC

AXA INSURANCE PTE LTD 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Service Centre #01-21 Tel:1800 8804888 Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@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-Risks and Compensation) Rules. 1960 Party Riske) Rules, 1959 (Malaysia;

CERTIFICATE NO.

: VPA/P2173779

Account No. : 14885

Coverage

: Comprehensive (SmartDrive Toyota Prestige)

: Market Value At The Time Of Loss

Sum Insured

: CHENG WEE LIANG

Name of Policy Holder Vehicle Registration No. : SMD8311A

Period of Insurance

: From 06/09/2018 To 05/09/2020 (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 600.00

An Additional Excess is applicable as follows: \$\$2,500.00 for Young or Inexperienced Driver.

Young or Inexperienced Driver is defined as any driver whom is aged below 23 years old and/or less than one year of driving experience.

(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 Boad Transport Act, 1987 (Malaysis), 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 provicions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Boad Transport Act, 1987 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOAGPH

on 07/09/2018

### IMPORTANT :

Folicyholders are warned that on the sale of a motor vehicle they must surrander the Cartificate of Insurance and the Policy to the insurance company. If the Cartificate 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. 169). The Premium Barranty Clause requires the promium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernate and endorsecent

## **AUTHORISATION LETTER**

# AUTHORIZATION LETTER

Date: 5.11.3018
To: AXA
Cc : Borneo Motors (5) Fte Ltd Attn: To Whom It May Concern
Dear Str / Madam,
RE: Authorization to Act on Behalf for Insurance Claims Documentation
I MUIL Marries CHENG WEE LIANG MRIC No. 3 0038490-1 hereby
authorized my wetationship Employee will name Rama mountly Kanthi
MRIC No. 624365 SR to exercise and execute to sign all / any necessary transaction
documentation pertaining to my registration vehicle number $Smb R3U-A$ as I an
currently having tight official business schedules / away from Singapore on duty oversea travel.
Please do not hesivate to contact me should you seguire any further clarification on the above.
Thank You
Yours truty.
Signature:  Name: CHENG WEE CANG  Contact No: 90550687































