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	17/12/2018 17:26		
Date Of Accident	22/11/2018 00:00		
Exact Location Of Accident	ALONG BUGIS STREET		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SJU2882D		
Insured/Policyholder			
Name Of Registered Owner	ONG THIAM HUAT		
NRIC No	S1766670C		
Email Address	IWANTMYRS@GMAIL.COM		
Mobile Phone No	(LOCAL) +65-92320178		
Alternative Phone No	OFFICE-90069178		
Vehicle Particulars			
Manufacturer	MAZDA		
Model	MX-5-2.0 6AT		
Exact Purpose for which vehicle was being used at time of accident	t .		
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	GA110599/1		
Cover Note Number			
Driver			
Name of Driver	WENDELL ONG YU XUAN		

 NRIC No
 \$9335091Z

 Date Of Birth
 20/09/1993

 Occupation
 INDOOR

 Date Of Driving Pass
 21/02/2013

Driving Experience 5 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92320178

Fax Number

Contact Number

EMail Address IWANTMYRS@GMAIL.COM

Address BLK 855 WOODLANDS STREET 83 #10-72

Postcode 730855

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 COLLISION - HEAD TO REAR

Weather Conditions RAINING
Road Surface WET

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?
Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

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

NO 1

NO

NO

NO

NO

YES

Number of Passengers (Including Driver)

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?

Circumstances of Accident

REFER TO THE ATTACH 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 SHD8504D

Vehicle Make/Model/Colour HYUNDAI/I40/YELLOW

Details Of Properties ABRASION MARK REAR BUMPER

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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
 - (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' tawyers/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.

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

COMFORTDELGRO ENGINEERING PTE LTD EXTERNAL BUSINESS DRY DANGER BRANCH

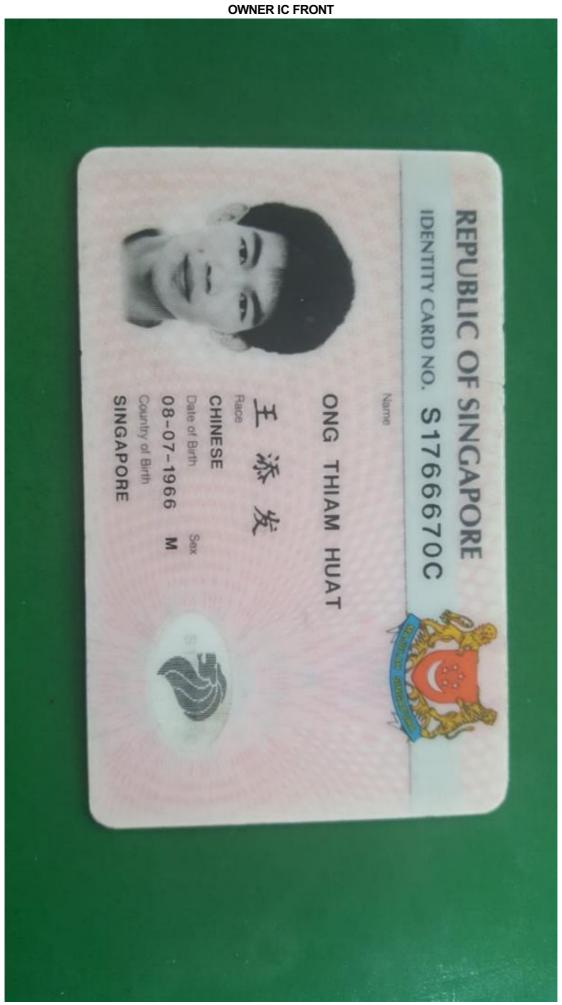
NAME & SYCHATURE. DESIGNATIONS

Hama: Chu Ch HRIC / Fin No.

Pieces

Sketch Plan #2

SKETCH PLAN				
1111		and the second section of the second	er constitution for the contraction	
Torre services est	11.10 tech	1110		
Acres of the second	Jeaffle)	kii. Liike. Historiiiik		
	Carry I			
			a diffred dan	
The second second	the state of the s	The steet car		
The same of the data		The spilling		
THE STRIPTION	. A literature	P SHOSSOU	No contract to the contract to	
the same of the deal of the land of the la		A A A A A A A A A A A A A A A A A A A		
	Howa	23428820		
DESCRIBE CIRCUMSTANCES	S OF THE ACCIDENT		The second secon	
On 20/11/18	about 00 00 HCs. 7 m	as along the named st	met along bugis at	
a fraffic junction	. The light was ke	d, all vehicles were	at a stop.	
then when the	light furned greek	1. I gaw as SHD&	SOUV YOLLOW COL	
more forward,	as hence 2 inch f	orward for without	tapping on the	
gas pegal, jur	t leating the vehicle	e call. As I did shad	- I look at	
my GPS for a quick glonce and took back up and I was not familiar				
with the roads there; and as I look all, the mentioned vehicle stopped				
and my vehic	le rolled into his.	while the offer car	a on other lones	
were moring	off for green light	& my dismay 7	Know any sear front	
to rear accident means it is my fourt as I did not have any in-				
car camera to record. And on the day itself, it was raining and				
we were in the middle of the road. I immediately asked if the work				
was of and of his passengers were it after purking my kench. I				
initiated to offer my ic & up and the spoke to fil known passengers				
and apologised, while refriering my NRIC, I trok a pic of the cabis				
domages. We agreed on private settlement as the damage was just a				
IMPORTANT NOTE	asian 78 pine folia	16 11 11 11 11 11 11	20 1 1 1	
or discovery or damage whether			ras been invoked be	
DECLARATION I/We declare the foregoing particular	Mar to all	s incident, I reach wice but he did not	dout to the cables around my call.	
91 Calcula	Car		Y Gil.	
00/	VAT.		ENGINESHING PTE LTD	
(77)	3	Exterior, illori Name & Sylvasia	CC1- 17/12/12	
Policyholder «Signyflure Dets & Tims	Oriver's Signature (If driver is not the policyholder)		na Personavella Signatura	
	Date & Time	Hame: Chu HP3C / Fin No.:		
			(5263/17)W Page 6	



OWNER IC BACK



CERTIFICATE OF INSURANCE Pg. 1





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

Certificate of Insurance

account number 04058

-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)

Policy details

Policyholder name ONG THIAM HUAT Certificate number GA110599 / 1 Cover Comprehensive Chassis number NCEC201573 Plan name Essential Engine number LF10277815 NCD applicable 50%

Vehicle registration number SJU2882D Period of Insurance from 26/06/2018 to 25/06/2019 (both dates inclusive)

Finance loan company

Persons or classes of persons entitled to drive*

(a) The Policyholder

- (b) Any Named Driver as stated in the Policy:
 - 1. ONG YU XUAN WENDELL
- (c) 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, reliability 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 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,

EXCESS Windscreen Excess Not Applicable

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

Nil

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

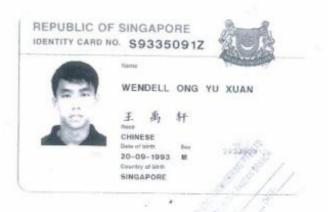
Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the Insurance company, if the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

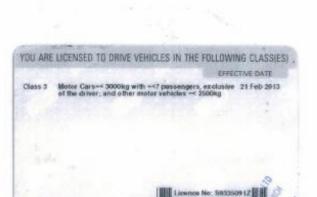
The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate.

1 of 3

DRIVER IC AND LICENCE







. 4

NP 426A



AUTHORIZE LETTER

I ONLY THIAM HUMT, SITEBORTING.

HEREBY AUTHORIZE WENDELL BUG YN XUAN.

S93350912 TO REPRESENT ME AS THE AUTHORISED

DRIVER FOR THE ACCIDENT ON 22/11/2018 @ 0000 MRJ.

AND THE INSURANCE ACCIDENT REPORTING.

GNG IHIAM HUAT

