

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	26/11/2018 10:59
Date Of Accident	25/11/2018 18:15
Exact Location Of Accident	YISHUN ROAD NEAR YISHUN PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FX8177Z
Insured/Policyholder	
Name Of Registered Owner	MUHKMIN BIN ABDUL HAMID
NRIC No	S9712849I
Email Address	MUHKMINHAMIDDD@GMAIL.COM
Mobile Phone No	(LOCAL) +65-86128440
Alternative Phone No	OTHERS-86128440

Vehicle Particulars

Manufacturer	YAMAHA
Model	Y125ZR
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	VM0/P2201358
Cover Note Number	

Driver

Name of Driver	MUHKMIN BIN ABDUL HAMID
NRIC No	S9712849I
Date Of Birth	17/04/1997
Occupation	INDOOR
Date Of Driving Pass	23/11/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86128440
Fax Number	
Contact Number	OTHERS-86128440
Email Address	MUHKMINHAMIDDD@GMAIL.COM

Address	BLK 437 YISHUN AVE 6 #05-2058
Postcode	760437
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 - CHANGE/CROSS LANE
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?	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 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	SKX8568U
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG WEI CHING
NRIC/Passport Number	S7725169C
Contact Number	96503761
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

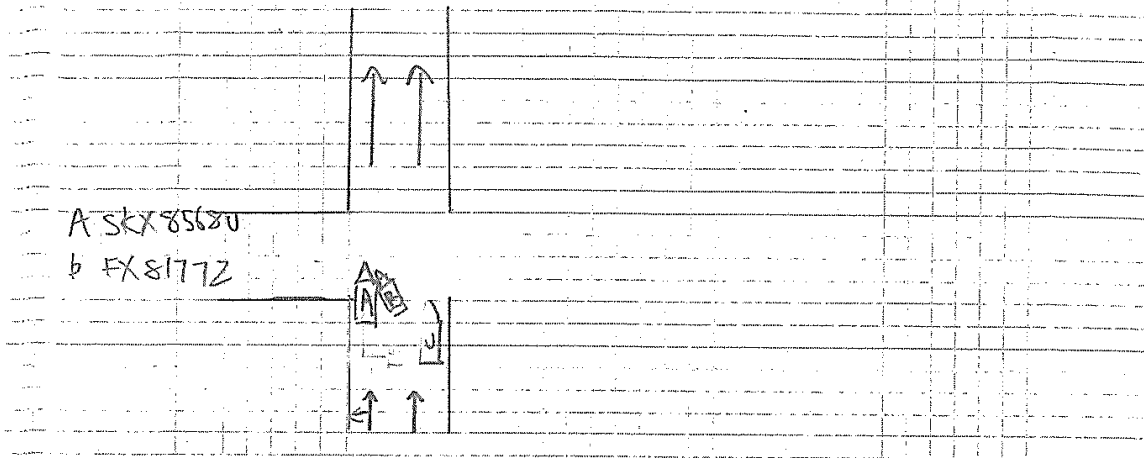
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 25 11.18 @ 6:15PM. I was riding at the road along Xishan park
 its a 2 lane road moving forward the car and my motor. he
 was at the left lane and i was at the centre lane i thought that
 assuming from my judgement he is going for a left turn
 but in that point of time he is going straight at the same
 time he we are moving off at the same time, when i
 make a left turn + bang my back doke. no one was injured
 his car is damage at the front bumper. We exchanged phone
 numbers and his insurance came and controlled the situation.

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.:

AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Centre #01-21
Tel: 1800 880 4888 Fax:-
Website: www.axa.com.sg
GST Registration Number: 199903512M
customer.care@axa.com.sg



CERTIFICATE OF INSURANCE

Motor Vehicle (Third Party Risks and Compensation) Act, (Chapter 189) Motor Vehicle (Third Party Risks and Compensation) Rules, 1987 Road Transport Act, 1987 (Malaysia) Motor Vehicle (Third Party Risks) Rules, 1987 (Malaysia)

CERTIFICATE NO. : VMO/P2201358 Account No. : 03375
Coverage : Third Party Only
Sum Insured : NIL
Name of Policy Holder : MUHKMIN BIN ABDUL HAMID
Vehicle Registration No. : FX8177Z
Period of Insurance : From 31/08/2018 To 09/09/2019 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

- a. The Policyholder
b. 1. MUHKMIN BIN ABDUL HAMID
2. MUHAMMAD SALLER BIN ABDUL HAMID

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 in connection with the Policyholder's business or profession.

The Policy does not cover:

- Use for hire and reward
- Use for racing, pace-making, reliability trial or speed-testing
- Use for the carriage of goods (other than samples) in connection with any trade or business
- Use for any purpose in connection with the Motor Trade

(11)

* 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 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

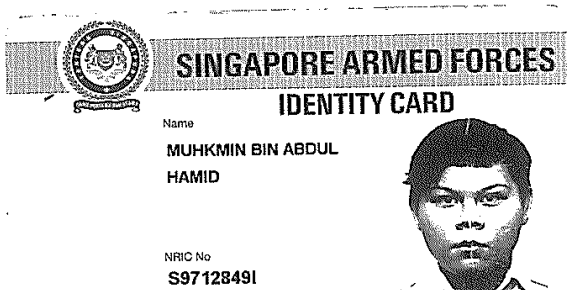
Issued by - SGIFASE2 on 08/11/2018

IMPORTANT :

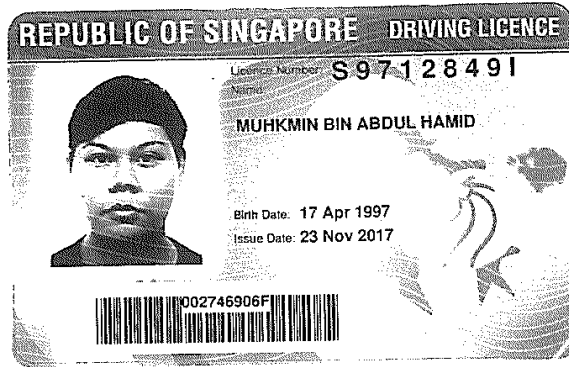
Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation 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 falling which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.

ANDA INSURANCE AGENCIES PTE LTD
(MOTOR DEPARTMENT)
1 King George's Avenue
#06-00 Rohn Building, Singapore 208557
Tel: 6554 2288 Fax: 6453 4466
Email: thomson@anda.com.sg



This card is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.



GEMALTOSSGPU105451581116

00000050315224

NRIC No / Colour
S97128491/ PINK

Race
JAVANESE

Date Of Birth
17/04/1997

Service Status
NSF

Address
Blk 437 YISHUN AVENUE 6

#05-2058 SINGAPORE 760437

Blood Group
AB (+)

Country Of Birth
SINGAPORE

Military Rank Status
ENLISTEE

Sex
M

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

Class 2B Motorcycles =< 200 cc

EFFECTIVE DATE
23 Nov 2017



NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

