

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	21/12/2018 16:46
Date Of Accident	17/12/2018 09:50
Exact Location Of Accident	FARLEIGH AVE ROAD SIDE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GV9307H
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Insured/Policyholder

Name Of Registered Owner	PLAN ENGINEERING SERVICE PTE LTD
Co Reg No	199604647E
Email Address	PLANENG@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97369335
Alternative Phone No	OFFICE-84514774

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	GA299879
Cover Note Number	05/12/2017 - 31/12/2018

Driver

Name of Driver	GURMEET SINGH
Passport No/FIN	G6579606L
Date Of Birth	20/07/1982
Occupation	OUTDOOR
Date Of Driving Pass	02/04/2014
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84514774
Fax Number	
Contact Number	
Email Address	PLANENG@SINGNET.COM.SG

Address	C/O 30 DEFU LANE 10 #02-116
Postcode	539211
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	NO COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) 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
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : SETHIS KUMAR GENDER: : MALE
Passenger 2	NAME: : CHELLIAH PERISAMY GENDER: : MALE

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 THE ATTACHED SKETCH PLAN BY DRIVER.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

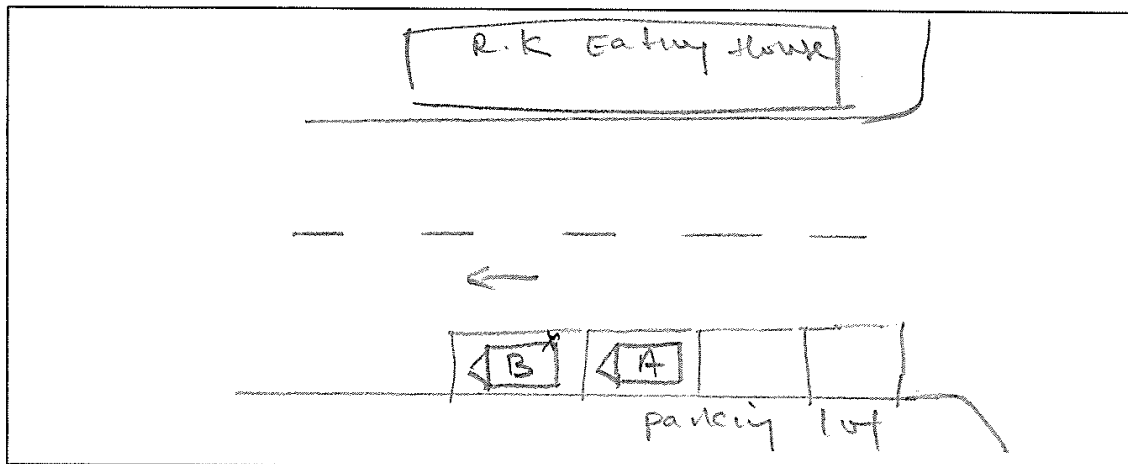
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

Date of accident: 17/12/18 Time: 9:20 AM Location: Farleigh Ave Road side
 My Vehicle A: GV 8074 Vehicle B: Unknown Vehicle C: —
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I reversing my vehicle into the parallel parking lot and stop my vehicle. After I come down from my vehicle veh B driver approach me said my left side mirror had knock onto his Right Rear taillamp. But I did not feel the impact that I had collision with his vehicle.

(No collision) Gurnmeet Singh

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☒ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

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.:

AH LIM MOTOR COMPANY

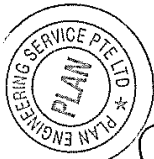
SKETCH PLAN

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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 Pg. 3

To Whom It May Concern,

Accident involving my vehicle no. GV9307H on 17/12/18 (date) with
unknown (other vehicle no) along Farleigh Ave road side

I, Plan Engineering Service Pte Ltd Nric No. _____

Owner of vehicle no. GV9307H am aware of the accident of my vehicle on
17/12/18 (Date) while car was driven by Gurmeet Singh
Nric No. 66579606L. I hereby, authorise him / her to make the report.

X



Name

Date:

.....
..
To fill in if there is a OD claim

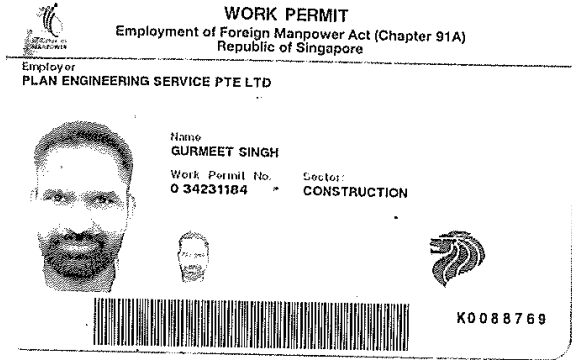
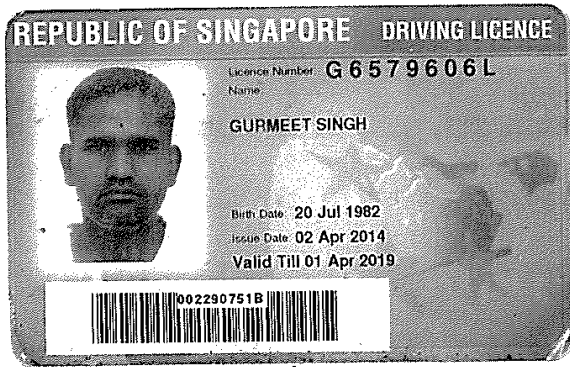
I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.

X

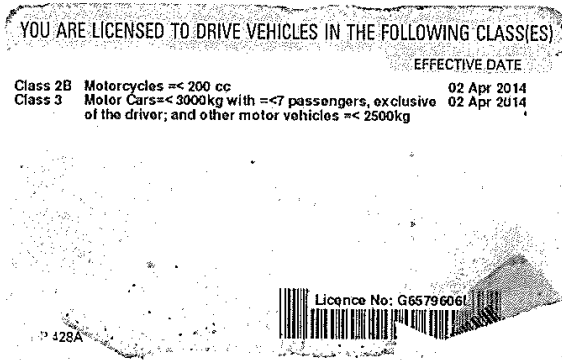
Name

Date:

Sketch Plan Pg. 4



Dep: 8451 4774 / 9736 9335
 Email: planeng@signal.com.sg
 c/o: 30 Dequ Lane W A 02-116
 SC 53924)



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 Sethi's tumor (m)
 Chelliah Perisamy (m).
 Chelliah Perisamy

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 w/o. No
 Ce: No
 Total. 3.



redefining insurance

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

date
 17/11/2018

policy number
 CV3 / GA299879

Certificate of Insurance

-Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Commercial Vehicles (Third-Party Risks and Compensation) Rules, 1960 -Road Transport Act, 1987 (Malaysia) -Commercial Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

19960607E

Policyholder name	PLAN ENGINEERING SERVICE PTE LTD	Certificate number	GA299879 / 1
Cover	Third Party, Fire & Theft	NCD	20%
Engine number	QD32172900	Chassis number	JN1SF4F23Z0845355
Vehicle Registration number	GV9307H		
Period of Insurance	from 01/01/2019 to 31/12/2019 (both dates inclusive)		
Sum Insured	Market Value at The Time of Loss		
Finance Loan Company	Nil		

5/12/17 - 31/12/18

Persons or classes of persons entitled to drive

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.

Limitations as to use*

- (a) Use in connection with the Policyholder's business.
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (c) Use for social, domestic and pleasure purposes.

The Policy does not cover

- (a) Use for the hire or reward or for racing, pace-making, reliability trail or speed testing.
- (b) Use whilst drawing a trailer except the towing of anyone disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Commercial 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

An additional excess is applicable as follows:

Additional All Claims excess of \$2,000.00 is applicable for any named/unnamed drivers who:

- a) Is 18 years old to 21 years old and/or
- b) Is 71 years old and above and/or
- c) with driving experience of less than 1 year on the relevant classes of driving license

Additional clauses & endorsements to your policy

Nil

興利企業(私人)有限公司
 HENLY ENTERPRISES CO. (PTE) LTD
 NO 18 UBI ROAD 4 #02-07
 (UBI CAR MALL)
 SINGAPORE 408616
 TEL:68460012 (5 Lines)

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 *Customer Centre, #B1-01

1 of 3

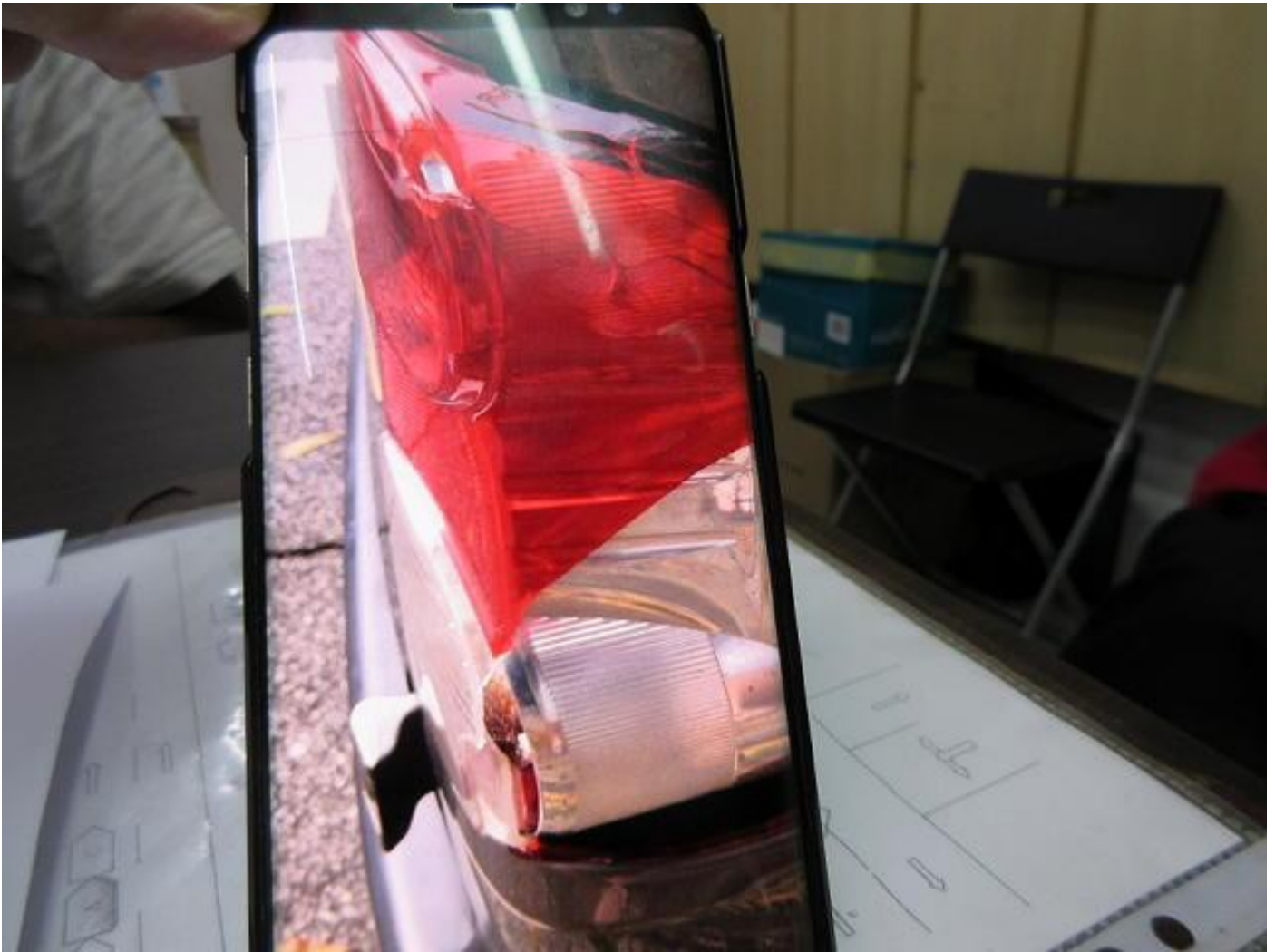
Accident Photo



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