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	18/12/2018 09:33
Date Of Accident	17/12/2018 15:30
Exact Location Of Accident	JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	XE3162K
Insured/Policyholder	
Name Of Registered Owner	H.G TAN BUILDING & PLUMBING CONTRACTOR
Co Reg No	34375200W
Email Address	H-GTAN@SINGNET.COM
Mobile Phone No	
Alternative Phone No	OFFICE-93207698
Vehicle Particulars	
Manufacturer	ISUZU
Model	CYH52T-15.7 D (M)
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	GOODS VEHICLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA406054/1
Cover Note Number	
Driver	

Name of Driver

NRIC No

S1132101A

Date Of Birth

Occupation

Date Of Driving Pass

Driving Experience

41 YEARS AND 3 MONTHS

Gender

ANG CHING TECK

81132101A

08/08/1955

OUTDOOR

16/09/1977

41 YEARS AND 3 MONTHS

Gerider

Mobile Number (LOCAL) +65-93207698

Fax Number
Contact Number

EMail Address H-GTAN@SINGNET.COM

Address BLK 490 ADMIRALTY LINK #07-89

Postcode 750490

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

-

NO

NO

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 (including own vehicle)

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) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT

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 GBG3879B
Vehicle Make/Model/Colour TOYOTA

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

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- By the lodgment 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:

- (2) My insurer, my workshop and the General Insurence 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.

A olicyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

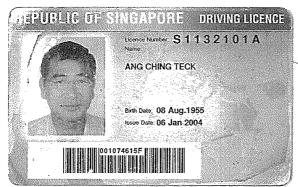
Reporting Centre Personnel's Signature

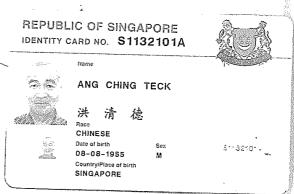
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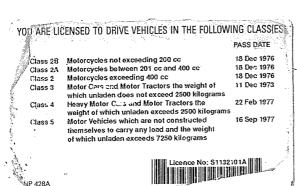
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NP 428A





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

12/10/2018

policy number CV1 / GA406054

Certificate of Insurance

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

Policy details

Policyholder name

H.G TAN BUILDING & PLUMBING CONTRACTOR Certificate number

NCD

GA406054/1 20%

Cover Engine number Comprehensive 6WG1431122

XE3162K

Chassis number

JALCYH52TH7000089

Vehicle Registration number

Period of Insurance Sum Insured

from 01/11/2018 to 31/10/2019 (both dates inclusive) /

Market Value at The Time of Loss HONG LEONG FINANCE LIMITED

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 rendered inoperative by Section 8 of the Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport

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.

Act, 1987 (Malaysia), are not to be included under these headings.

Excess SGD1,500.00 Windscreen

An additional excess is applicable as follows:

Additional Own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who:

- a) is 22 years old to 24 years old and/or
- b) is 66 years old to 70 years old and/or
- c) with driving experience of 1 year to less than 2 years on the relevant classes of driving license

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

1	Date:	18-12-18					
٦	Fo: 0:	wner of Vehicle Number: X 2 3 16 2 K					
Ť	The fo	ollowing has been/advised to you via your workshop, CD&E through					
F	lease	etick the applicable box if you had been advice on the content as seen below:					
J	1	You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.					
()	You had been advised by the workshop on the liability and merits of the case accordingly.					
()	You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.					
{)	There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.					
()	The Estimation waiting time for the spare parts to arrive is The estimated arrival time does not include the repair period.					
()	You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.					
()	For vehicles below Three (3) years old, your insurance company will use only genuine original parts to repair your vehicle.					
		For vehicles above Three (3) years old, your insurance company will be carrying out repairs using <i>any combination</i> of genuine original parts and/or original equipment manufacturer (OEM) parts.					
()	You had been advised by the workshop of the Twelve (12) months warranty for $\underline{\text{Own Damage}}$ repairs on workmanship related to the accident.					
(}	For vehicles below Five (5) years old, you had been advised by the workshop to check with the local distributor on your warranty status.					
()	Others					
	7	and acknowledge by: Way 100 18-10-18 and signature of policyholder/ authorised driver					

Name and signature of workshop personnel including company stamp



