

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	27/12/2018 11:34
Date Of Accident	26/12/2018 15:30
Exact Location Of Accident	UPPER ALJUNIED ROAD TOWARDS ALJUNIED ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG666J
Insured/Policyholder	
Name Of Registered Owner	FONG LAI FOOK
NRIC No	S1118648C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88681118
Alternative Phone No	OFFICE-88681118

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	GLE400 COUPE AUTO
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA299174/1
Cover Note Number	

Driver

Name of Driver	FONG LAI FOOK
NRIC No	S1118648C
Date Of Birth	14/08/1948
Occupation	INDOOR
Date Of Driving Pass	13/09/1977
Driving Experience	41 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	+65-88681118
Fax Number	
Contact Number	OFFICE-88681118
Email Address	NOEMAIL

Address	24 DEDAP ROAD
Postcode	809428
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	HIT BY FALLEN TREE / OTHER OBJECTS
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?	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)	2
Passenger 1	NAME: : PHANG FUI MUI GENDER: : FEMALE

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 ATTACHMENT

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	XD1900R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	AROCKIASAMY MICHEL RAJ
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan


SKETCH PLAN


IMPORTANT NOTICE

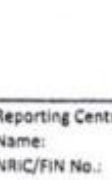
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. 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.
7. 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:

- (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.:

34

Bidadari Park Dr

B: XD 1990R

 tyre

3

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

upper Aljunied Rd

I/We declare the foregoing particulars are true in every respect.

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

OWNER ID AND DRIVING LICENCE

5554239



NRIC No. S1118648C



Date of issue

28-01-2016

24 DEDAP ROAD
SINGAPORE 809428

NRIC No: S1118648C

Date: 14/11/2016

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

PASS DATE

3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

13 Sep 1977



Licence No: S1118648C

438A

OWNER ID AND DRIVING LICENCE

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1118648C





Name
FONG LAI FOOK

Race
馮 猷 富

CHINESE

Date of birth
14-08-1948

Sex
M

Country/Place of birth
SINGAPORE



REPUBLIC OF SINGAPORE

DRIVING LICENCE

Licence Number
S1118648C

Name
FONG LAI FOOK

Birth Date: **14 Aug 1948**

Issue Date: **08 Jul 2003**



000637365J

CERTIFICATE OF INSURANCE



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

Certificate of Insurance

account number
08198

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	FONG LAI FOON	Certificate number	GA299174 / 1
Cover	Comprehensive	Chassis number	WDC2923562A086929
Plan name	Flexi+	Engine number	27682130646984
NCD applicable	50%		
Vehicle registration number	SGC666J		
Period of Insurance	from 01/12/2018 to 30/11/2019 (both dates inclusive)		
Finance loan company	PRIME CARS CREDIT PTE LTD		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
(b) 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. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if you have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

(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

寶業(保險)代理私人有限公司
INSMART (INSURANCE) AGENCY PTE LTD
NO. 1 KAKI BUKIT ROAD 1
#02-27 ENTERPRISE ONE
SINGAPORE 415934
TEL: 6842 0766 FAX: 6842 6955 / 6842 7855

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, endorsement etc.

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

1 of 3

事情发生就是这样子
一大跳，警察来了，
撞过来，吓的我和太太
往着我的右边两个门当中
忽然间一粒大轮胎
在交通灯交界点
十二月廿六日，车经过阿裕反路
我在这一天
情形是这样的

S 1118648/C

FONG LAI FOK



Accident Photo 1



Accident Photo 2



Accident Photo 3



Accident Photo 4



Accident Photo 5



Accident Photo 6



Accident Photo 7



Accident Photo 8




A photograph of a black car's interior, focusing on the center console area. A white rectangular label is affixed to the console, displaying the Mercedes-Benz logo, the text "Mercedes-Benz", and technical specifications: "197", "166", "162", "0", "1.2", "x", "Made in USA". Below this, a smaller white label shows "DAIMLER AG" and the VIN "WDC2923562A086929". A third white label at the bottom displays the number "7/32418" and a barcode.

ODO METER



TO: INSURANCE COMPANY

I, AROCKIASAMY MICHEL RAJ, OF
S PASS NO. 032250491, while driving
lorry no. XD 1900 R, the wheel dislodge
(come get) and hit onto the side (right)
of the car no. 344 666 J.
No people is injured.

 26/12/2018
Time: 15:30

S1118648(C

PONG LALFOOK



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MIAC18166189 Vehicle Registration No: SG4666J
Name (as shown in NRIC) : FONG LAI FOOK NRIC/FIN/Passport No : S1118648C
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 24 DEDAP ROAD Singapore(809428)
Contact (Tel) : _____ Mobile No. : 8868 1118
Email Address : NOEMAIL
Date of Accident : 26/12/18 Time of Accident : 15:30
Place of Accident : UPPER ALJUNIED ROAD TOWARDS ALJUNIED ROAD
Insurance Company : AXA INSURANCE PTE LTD.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Add on Insured's statement.

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Ivy Chian
NRIC/FIN No.: 8621626D
Date: 28/12/18