

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	21/01/2019 16:57
Date Of Accident	21/01/2019 14:40
Exact Location Of Accident	CTE EXIT 71 TOWARDS MOULMEIN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCL1511L
Insured/Policyholder	
Name Of Registered Owner	DIANAWATI TJAHJONO
Passport No/FIN	F2583248P
Email Address	XIPHIELDS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84991268
Alternative Phone No	OFFICE-84991268

Vehicle Particulars

Manufacturer	SUBARU
Model	BRZ-2.0 (A)
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA336604/1
Cover Note Number	

Driver

Name of Driver	INDRA HARTANTO
NRIC No	S8579547C
Date Of Birth	25/03/1985
Occupation	INDOOR
Date Of Driving Pass	11/07/2005
Driving Experience	13 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84991268
Fax Number	
Contact Number	
Email Address	XIPHIELDS@GMAIL.COM

Address	31 JALAN RAMA RAMA #35-03
Postcode	329111
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	CLOUDY
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)	2
Passenger 1	NAME: : SI YING HONG 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

REFER TO STATEMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EM222Z
Vehicle Make/Model/Colour	MERCEDES CLA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANDREW TAN
NRIC/Passport Number	S8634965E
Contact Number	91448666
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN


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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:



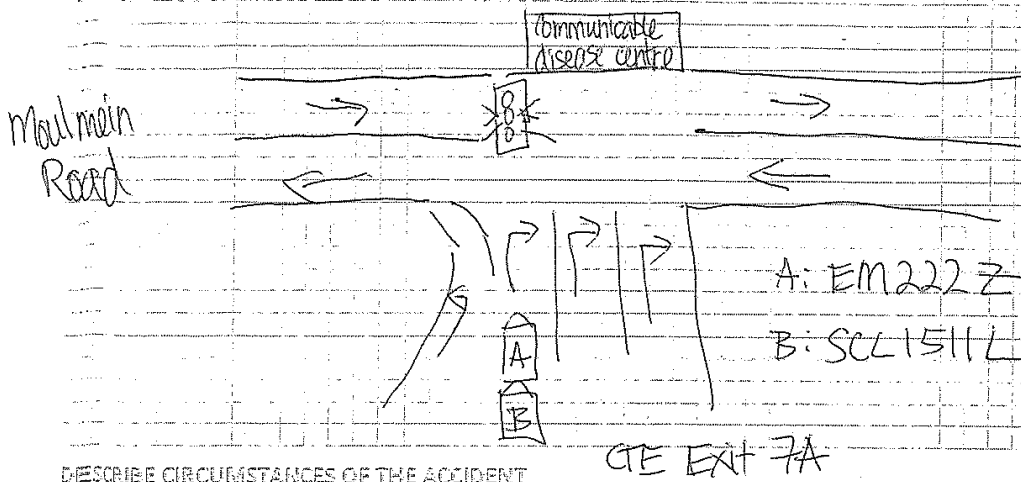
Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 21/1/2019, 2:38 pm, I was driving SCL1511L at CTE exit 7A towards Moulmein Rd and come to a stop at traffic light junction. When the light turn green the car in front was moving off and (EM222Z) and suddenly came to a halt, I was unable to brake in time and hit the rear bumper, when the car moved in front, the rear bumper was stuck to my car's off peak plate number bolt, dislocating it from the car. My car number plate was slightly dented, no other damage.

We exchanged particulars, took photos before we left the scene. No one was injured in this accident, but a note that the other car driver has a medical device on his left leg due to ligament tear.

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.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8579547C




Name
INDRA HARTANTO

Race
CHINESE


Date of birth
25-03-1985

Sex
M

Country of birth
INDONESIA




REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
Name
S8579547C
INDRA HARTANTO

Birth Date: 25 Mar 1985
Issue Date: 10 Jul 2010



NRIC No. S8579547C



Nationality
INDONESIAN

Date of issue
25-01-2010


Address
31 JALAN RAMA RAMA
#35-03
SINGAPORE 329111

9074656

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 11 Jul 2005



Licence No: S8579547C

NP 428A



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
 03121

-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	DIANAWATI TJAHJONO	Certificate number	GA336604 / 1
Cover	Comprehensive	Chassis number	JF1ZC6K72DG002023
Plan name	Essential	Engine number	FA20G817461
NCD applicable	50%		
Vehicle registration number	SCL1511L		
Period of Insurance	from 24/03/2018 to 23/03/2019 (both dates inclusive)		
Finance loan company	Nil		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
- (b) Any Named Driver as stated in the Policy:
 1. HARTANTO INDRA
- (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	Basic Own Damage Excess	SGD 400.00
	Windscreen Excess	SGD 100.00

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

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, endorsement etc.

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

1 of 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

DIANAWATI TJAHJONO
 35-03 31 JALAN RAMA RAMA
 DERROYALE
 SINGAPORE 329111

New business

date
 23/03/2018

your servicing distributor
 DIRECT ACCOUNT-NON PIVOTAL / 03121

your servicing distributor contact

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name	DIANAWATI TJAHJONO	Policy number	VA1 / GA336604
Cover	Comprehensive	FIN / NRIC	F2583248P
Period of Insurance	from 24/03/2018 to 23/03/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,025.76
Total Discounts	- SGD 269.67
7% GST	SGD 52.93
Final Premium	SGD 809.02

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

Vehicle details

Make & Model of Vehicle	SUBARU BRZ 2.0	Year of manufacture	2014
Vehicle registration number	SCL1511L	Type of Use	Private use
Body type	COUPE	Engine capacity (c.c.)	1998
Seating capacity (excl driver)	4	Engine number	FA20G817461
Off-Peak car	Yes	Chassis number	JF1ZC6K72DG002023

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	Nil

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess	SGD 400.00
Windscreen Excess	SGD 100.00

Drivers details

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

1 of 2

Driver type	Driver name	Date of birth	Driving experience
Main Driver	DIANAWATI TJAHJONO	17/10/1957	12 year(s)
Additional Driver	HARTANTO INDRA	25/03/1985	12 year(s)

Additional clauses & endorsements to your policy

Nil

What you should do

- Keep this Policy Schedule as record of insurance cover for your vehicle
- This Schedule should be read in conjunction with the Terms and Conditions of the Policy Wording

AXA Insurance Pte Ltd

This is an auto-generated document and hence no signature is required



Sketch Plan Pg. 7

Date: 21/1/2019

Tor Owner of Vehicle Number: SCL1511 L

The following has been advised to you via your workshop, CDGE through their staff, Man.

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ 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 *any combination* 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 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 _____

Signed and acknowledge by:

[Signature]
Name and signature of policyholder/ authorised driver

Name and signature of workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



