

## 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	30/01/2019 16:57
Date Of Accident	30/01/2019 10:20
Exact Location Of Accident	NOVENA AREA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE4133E
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#### Insured/Policyholder

Name Of Registered Owner	RAZINAH BEGUM BINTI O K MOHAMED HANIFFA
NRIC No	S8501955D
Email Address	PHILIPHALL17@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90180786
Alternative Phone No	OFFICE-NOPHONE

#### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S320L (R19 LED)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	PRIVATE CAR

#### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA243620/1
Cover Note Number	21/07/2018 TO 20/07/2019

#### Driver

Name of Driver	PHILIP EESA EDWARD HALL
NRIC No	S8861903Z
Date Of Birth	17/02/1988
Occupation	INDOOR
Date Of Driving Pass	19/10/2015
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90180786
Fax Number	
Contact Number	
Email Address	PHILIPHALL17@GMAIL.COM

Address	118 KENG LEE ROAD #07-01
Postcode	308404
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	2
Passenger 1	NAME: : RAZINAH BEGUM BINTI O K MOHAMED HANIFFA 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 SKETCH PLAN

#### 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	SLK5260H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	WONG YUT SUN
NRIC/Passport Number	S1823856Z
Contact Number	90027038
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.:



# Sketch Plan Pg. 2

Date of accident: 30/01/19 Time: 10.20am Location: Nova area  
 My Vehicle A: SLE4133E Vehicle B: SLK5260H Vehicle C: \_\_\_\_\_  
 SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Slight contact onto the car in front of me  
 No damage to my vehicle and only small  
 dent to other parties rear bumper

☐ 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. Vehicle SLE 4133E

Policyholder's Signature  
 Date & Time:

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

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



WAB, TON & COMPANY, S.A.

AH LIM MOTOR COMPANY

Driver's Particulars & Briefings Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of Philip Eesa Edward Hall

Licence Number: **S8861903Z**

Name: **PHILIP EESA EDWARD HALL**

Birth Date: **17 Feb 1988**

Issue Date: **26 Apr 2017**

Barcode: 002678420H

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8861903Z**

Portrait of Philip Eesa Edward Hall

Name: **PHILIP EESA EDWARD HALL**

Race: **BRITISH**

Date of birth: **17-02-1988**

Sex: **M**

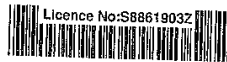
Country/Place of birth: **UNITED KINGDOM**

NRIC No. **S8861903Z**

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

Class	Vehicle Description	Effective Date
Class 3	Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	19 Oct 2015

NP 428A



9512157

Barcode

NRIC No. **S8861903Z**

Portrait of Philip Eesa Edward Hall

Nationality: **BRITISH**

Date of issue: **21-12-2018**

Address: **118 KENG LEE ROAD  
#07-01  
SINGAPORE 308404**

Driver's Particulars & Briefings Pg. 2



redefining / insurance

Date: 30/01/2019

To: Owner of Vehicle Number: SLE 4133E

The following has been advised to you via your workshop, Mh Lim Motors Co through their staff, Mh Lim.

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 case 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.
  - ☐ ( ) There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
  - ☐ ( ) The estimated 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 that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.

☒ ( ) Others Reporting only

Signed and acknowledge by:

[Signature]  
Name and signature of policyholder/authorised driver

[Signature] 30/01/19  
Name and signature of workshop personnel including company stamp

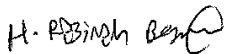
118 Keng Lee Road  
#07-01  
Singapore 308404

30/01/85

Dear Sir/ Madam,

I, Razinah Begum Binti O K Mohamed Haniffa, authorise Philip Eesa Edward Hall to fill out an accident report. I am fully aware of the car accident.

Sincerely,

A handwritten signature in black ink, appearing to read 'Razinah Begum', with a stylized flourish at the end.

Razinah Begum



## Certificate of Insurance

Account Number  
10980

Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1997 (Road Transport Act, 1987 (Malaysia))  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1997 (Malaysia)

### Policy details

Policyholder name	RAZANAH BEGUM BINTI D K MCHAMES HANIFFA	Certificate number	GA241626 / 1
Cover	Comprehensive	Chassis number	WD022296226271070
Plan name	Flex*	Engine number	27682430403391
NCD applicable	80%		
Vehicle registration number	SLE4033E		
Period of Insurance	from 21/07/2018 to 26/06/2019 (both dates inclusive)		
Insurance claim company	OCBC BANK LIMITED		

### 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 Policyholders 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 4 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 reduced under these headings.

EXCESS	Basic Own Damage Excess	SGD 700.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

- \$8500 for unlicensed Authorized Driver
- \$8500 for declared Young and Inexperienced Driver
- \$85,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$52,500 if you have chosen AXA Premium Workshop.

### 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

Authorized 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 Vehicles (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, #61-01

1 of 3



The Other Party's Vehicle



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

