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.

	ACCIDENT STATEMENT	
Date Of Report	02/03/2019 15:34	
Date Of Accident	01/03/2019 16:30	
Exact Location Of Accident	SLIP ROAD TWDS FARRER ROAD.	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKA1954E	

Insured/Policyholder

Name Of Registered Owner SUNRISE & CO (PTE) LTD

Co Reg No 197900831K Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-62583377

Vehicle Particulars

Manufacturer LAND ROVER
Model RANGE ROVER

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?

YES

If No, Please state action to be taken

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number GA335466/1

Cover Note Number

Driver

Name of Driver ONG TECK CHRONG

NRIC No S6878541C

Date Of Birth 04/04/1968

Occupation INDOOR

Date Of Driving Pass 30/03/1996

Driving Experience 22 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94234157

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 533 ANG MO KIO AVE 5 #03-4118

Postcode 560533

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 **CHAIN 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

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

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

VEHICLE B JAM BRAKE, I CAN NOT STOP IN TIME AND HIT ONTO VEHICLE B. WHEN I GOT OUT FROM MY VEHICLE. THEN I REALISED IT WAS CHAIN COLLISION.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBH4317U

Vehicle Make/Model/Colour

Details Of Properties VEH B

COMMERCIAL VEHICLE Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

UNKNOWN

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

LORRY VEH C

COMMERCIAL VEHICLE

SKETCH PLAN

IMPORTANT NOTICE

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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.
- 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.

SUMPLICATION OF THE PARTY OF TH

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

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

Page 4 of 16

SKETCH PLAN		
		NO X CO
DESCRIBE CIRCUMSTANCES OF T	HE ACCIDENT	Dechun
Vehicle B	in house	can't stop in time
and hit	jam brake, i onto vehicle B vehicle then i 'n collision	When i got out
from my	vehicle then i	realized it was
a chai	'n collision	
	Jechn,	
*		
MANAGE IN COLUMN TO THE COLUMN		
A STATE OF THE STA		
DECLARATION /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.:

redefining / Insurance
Date: DAOSA
To: Owner of Vehicle Number: SEA 1954
The following has been advised to you via your workshop, SME_MOTOR PL through their staff,
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 6 - 8 WEELS. 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 <u>Own Damage</u> 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
Signed and acknowledge by:
1) ectus, (*() 50)
Name and signature of policyholder/authorised driver

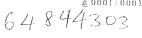
Name and signature of workshop personnel including company stamp

Sketch Plan #5 Pg. 1

12:11 2015 17:27 FAX

B P Philomo Ptc Ltd

Athn: Mr



AXA Insuranco Pte Ltd

1800 880 4888 (WithIn Singapore) (65) 8880 4888 (International)

(65) 6880 4740

☑ customer.care@axa.com.sg

www.axa.com.sg

account number

01409

Certificate of Insurance

50%

redefining / insurance

-Meter Vehicles (Heird-Party Risks and Compensation) Act. (Chapter 189). Morer Vehicles (Third-Party Ricks and Compensation) Rules. 1980-Road Transport Act. 1987 (Malaysia).

-Motor Vehicles (Third-Party Risks.) Rules. 1999 (Malaysia).

Policy details

Policyholder name Cover Plan name

SUNRISE & CO (PTE) LTD Comprehensive Private

Certificate number Chassis number Engine number

GA335466 / 1 SALLSAAE3CA745900 12012006593508PS

NCD applicable Vehicle registration number

SKA1954E

from 18/04/2018 to 17/04/2019 (both dates inclusive) Period of Insurance Finance loan company.

Persons or classes of persons entitled to drive*

(a) Any Named Driver as stated in the Policy:

1. TOH KOK WAI CHRISTOPHER

(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 him or report policy.

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 or. 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 Windscreen Excess

SGD 500.00 SGD 100.00

- An Additional Excess is applicable as follows: 1. S\$500 for unnamed Authorised Driver

 - 2. \$\$500 for declared Young and Inexperienced Driver
 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium

Additional clauses & endorsements to your policy

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

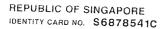
Policytolders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the Insurance company, if the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Purty Risks and Compensation Act (Cop. 189).
The Premium Warranty Claims 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 (19990351.2M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811. Customer Centre, #B1-01

1 of 3

Sketch Plan #4 Pg. 1

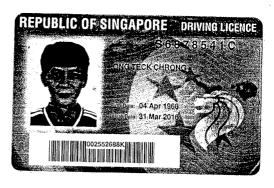




ONG TECK CHRONG

王 德 Race CHINESE

04-04-1968 Country/Place of birth



9396023



MALAYSIAN Date of lesue 14-03-2016

APT BLK 533 ANG MO KIO AVENUE 5 #03-4118 SINGAPORE 560533

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)





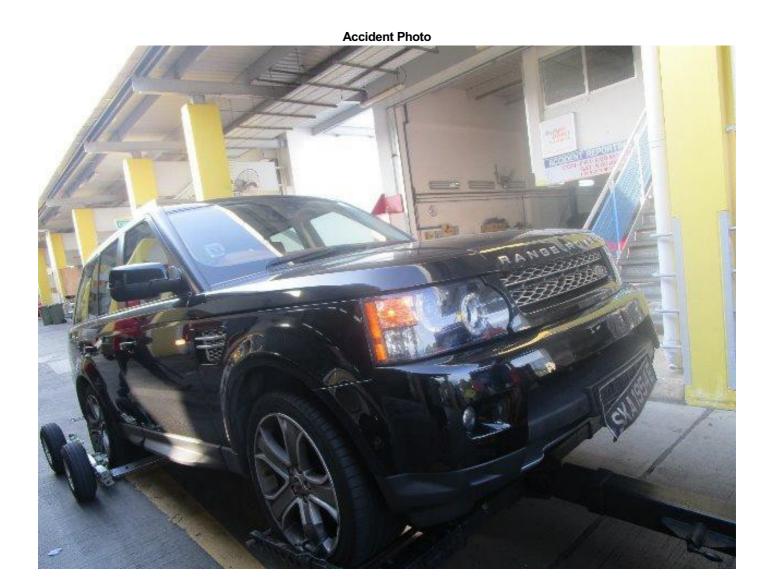
Accident Photo











Accident Photo

