

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	14/03/2019 16:36
Date Of Accident	12/03/2019 07:45
Exact Location Of Accident	CHOA CHU KANG NORTH 6
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX3794D
Insured/Policyholder	
Name Of Registered Owner	HASBULLAH BIN MOHAMED YA'AKOB
NRIC No	S8943628A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83792344
Alternative Phone No	OTHERS-83792344

Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT 1.5 AT
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	VPA/P2118943
Cover Note Number	

Driver

Name of Driver	HASBULLAH BIN MOHAMED YA'AKOB
NRIC No	S8943628A
Date Of Birth	01/12/1989
Occupation	INDOOR
Date Of Driving Pass	30/04/2013
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83792344
Fax Number	
Contact Number	OTHERS-83792344
Email Address	NOEMAIL

Address	689B CHOA CHU KANG DRIVE #03-308 SPORE 682689
Postcode	
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	SIDE SWIPE
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)	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

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	SLU8425C
Vehicle Make/Model/Colour	TOYOTA C-HR HYBRID 1.8G CVT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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:



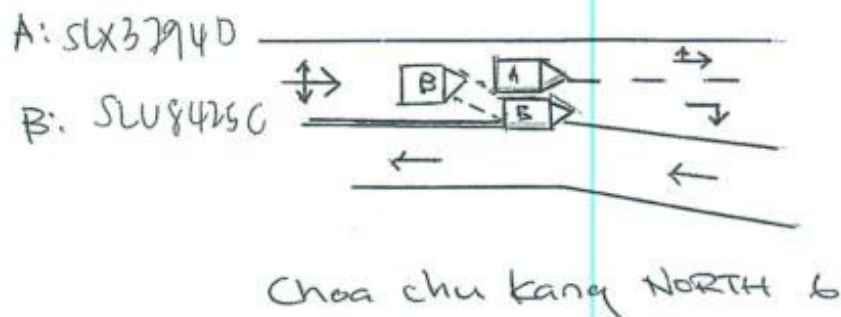
Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name: Su Kuan
NRIC/FIN No.: S20407771

Sketch Plan #2

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


I WAS DRIVING ALONG CHOA CHU KANG NORTH 6
WHILE ENTER INTO A SPLIT LANE, I CAME TO
A STOP CAUSE HEAVY TRAFFIC IN FRONT ME.
SUDDENLY VEH B CAME FROM BEHIND AND
SQUEEZE ME TO MY RIGHT. VEH B
GRADE INTO MY FRONT RIGHT PORTION OF MY CAR.

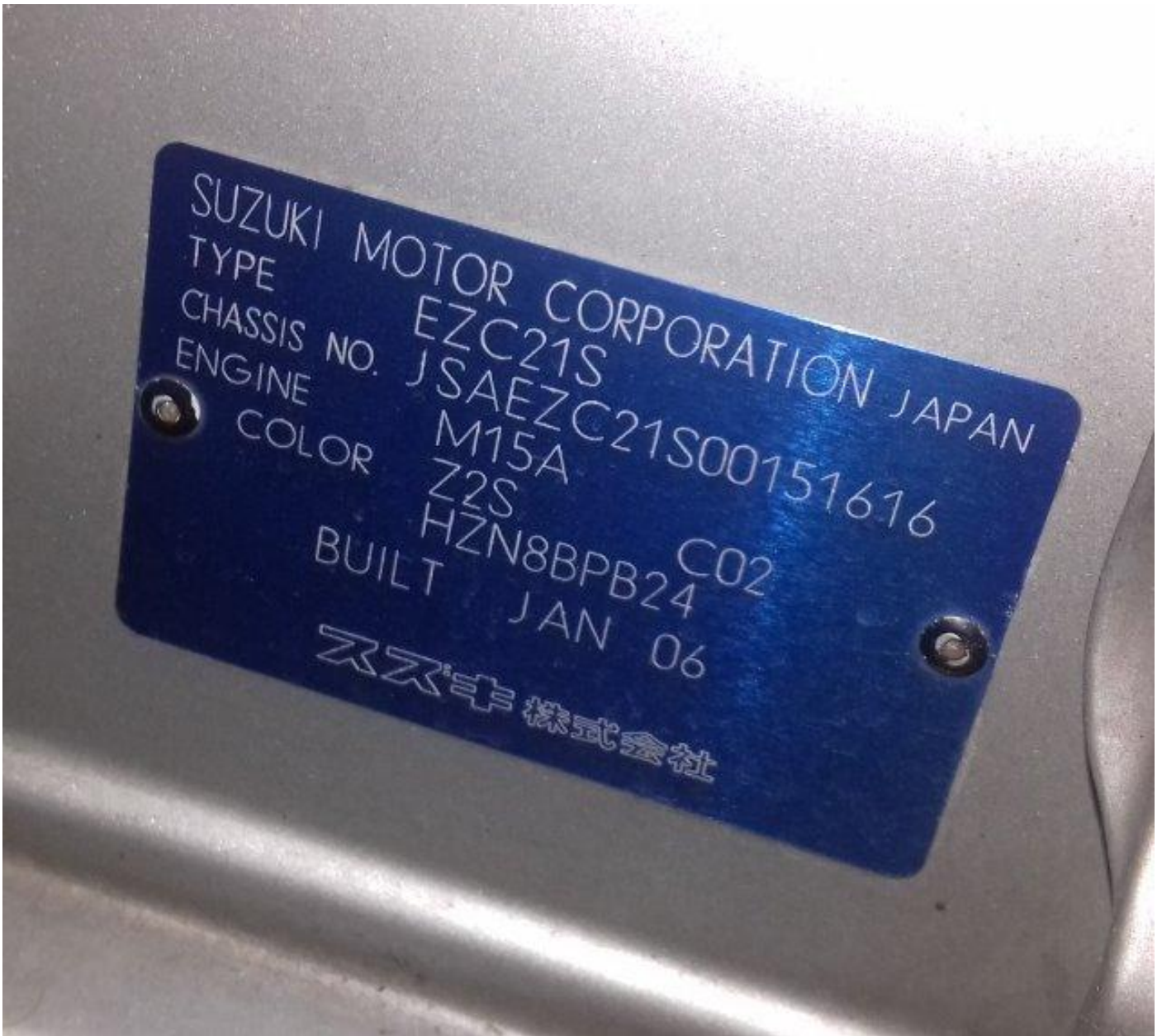
DECLARATION

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: S. K. A. I.
NRIC/FIN No.: S8040277A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



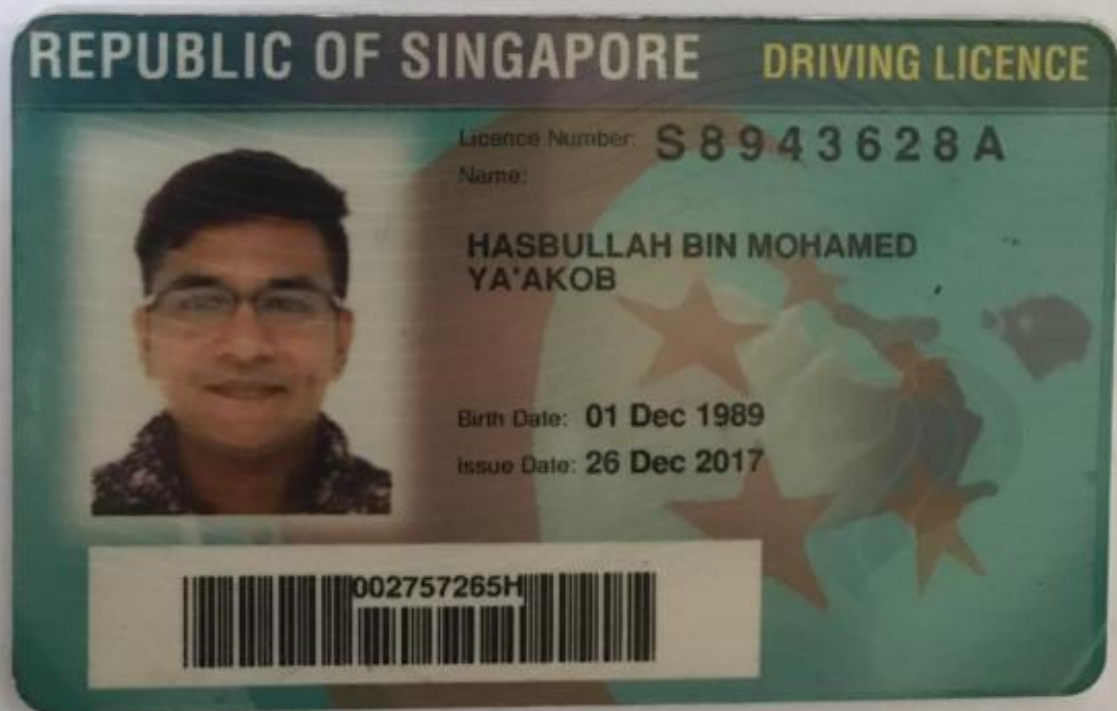
Accident Photo



Accident Photo



Driving License



Driving License

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

EFFECTIVE DATE

30 Apr 2013

Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg



ence No:S8943628A



NP 428A

Insurance policy

Insurance policy

AXA INSURANCE PTE LTD
8 Shenton Way, #24 01
AXA Tower, Singapore 068811
Customer Service Centre #B1 01
Tel: 65 63387288 Fax: 65 63382522
Website: www.axa.com.sg
GST Registration Number: 1959035124
customer.service@axa.com.sg



CERTIFICATE OF INSURANCE

Motor Vehicles Third Party Risks and Compensation Act Chapter 189 Motor Vehicles Third Party Risks and Compensation Rules 1966 Road Transport Act 1987 Malaysia Motor Vehicle Third Party Risks Rules, 1959 Malaysia		Chapter 189 Motor Vehicles Third Party Risks and Compensation Rules 1966 Road Transport Act 1987 Malaysia Motor Vehicle Third Party Risks Rules, 1959 Malaysia	
CERTIFICATE NO.	VPA/P2118943	Account No.	06198
Coverage	Comprehensive		
Sum Insured	Market Value At The Time Of Loss		
Name of Policy Holder	HASBULLAH BIN MOHAMMED YA'AKOB		
Vehicle Registration No.	SLX3794D		
Period of Insurance	From 18/04/2018 To 17/04/2019 (Both Dates Inclusive)		
PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*			
(a) The Policyholder The Policyholder may also drive a Motor Car not belonging to or not used under a hire purchase agreement or otherwise to him or his employer or his partner; (b) Any other person who is driving on the Policyholder's order or with his permission provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle. It 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 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, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with such trader 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 but are typically used for racing, pace making or such similar purposes.			
Basic Own Damage Excess	SGD 500.00	1011	
Windscreen Excess	SGD 100.00		
An Additional Excess is Applicable as follows: \$5500.00 For Unnamed Authorized Driver 1/yr Incurred From A (Professional) Driver. \$15,000.00 For Unnamed Young and Inexperienced Driver. (Please refer to your policy on the terms & conditions)			
* Limitations contained inoperative by Section 4 of the Motor Vehicles Third Party Risks and Compensation Act, Chapter 189 and Section 45 of the Road Transport Act, 1987 Malaysia, are not to be included under these headings			
We hereby certify that the policy to which this Certificate relating is issued is accordance with the provisions 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 Signatures

Issued by: BROKER on 16/05/2018

WARRANT

Policyholder has agreed that on the date of a motor vehicle accident, the policyholder will indemnify the insurer for the amount of the loss or damage to the vehicle or property of the insured or any third party, as the case may be, up to the limit of the sum insured, less the excess, and the policyholder will be liable for the cost of the excess. The policyholder has agreed to indemnify the insurer for the amount of the loss or damage to the vehicle or property of the insured or any third party, as the case may be, up to the limit of the sum insured, less the excess, and the policyholder will be liable for the cost of the excess.