

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	13/04/2019 16:07
Date Of Accident	13/04/2019 09:10
Exact Location Of Accident	UPPER SERANGOON ROAD NEAR NEX
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP6160E
Insured/Policyholder	
Name Of Registered Owner	KOMOCO CAR RENTALS PTE LTD
Co Reg No	199500095K
Email Address	YUNOSSAMAD@KOMOCO.COM.SG
Mobile Phone No	(LOCAL) +65-98793040
Alternative Phone No	OFFICE-64758888

Vehicle Particulars

Manufacturer	HYUNDAI
Model	IONIQ HYBRID-1.6 GLS DCT (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? 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	VFX/P1305555
Cover Note Number	

Driver

Name of Driver	ONG KANG SHENG
NRIC No	S8315041F
Date Of Birth	22/05/1983
Occupation	INDOOR
Date Of Driving Pass	11/12/2017
Driving Experience	1 YEAR AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-95272885
Fax Number	
Contact Number	
Email Address	KSONG@KOMOCO.COM.SG

Address	BLK 475A UPPER SERANGOON CRESCENT S13-509 SINGAPORE
Postcode	531475
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - KOMOCO STAFF
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	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

SEE ATTACH SKETCH PLAN & STATEMENT

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	SLE5808K
Vehicle Make/Model/Colour	MAZDA 5
Details Of Properties	REAR LEFT SCRATCH
Vehicle Category	PRIVATE CAR
Name of Driver	WONG WAI HON
NRIC/Passport Number	S7319317F
Contact Number	91516086
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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 willful misrepresentation or withholding of material facts may allow insurance companies to reputate 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 G.A. Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will be 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 situated 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 (a) 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.

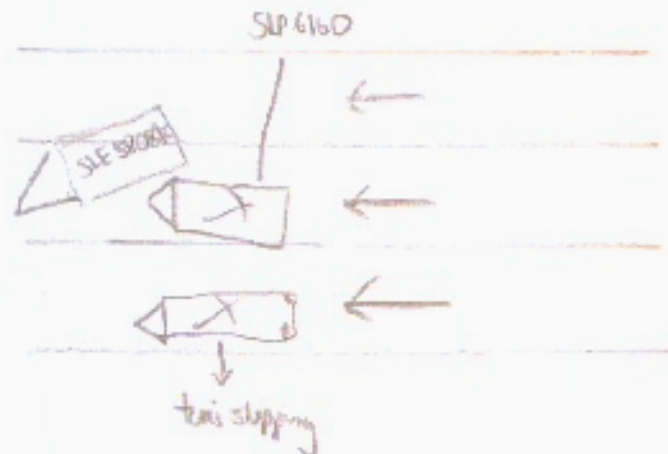
Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)

Reporting Centre Personnel's Signature
Name:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on the left lane. There was a train stopping on the left. When I was driving, I ~~felt~~ stopped and there was no car. Then I hit the car. As I pass the train, then was stopping, I was driving in my lane during straight, suddenly, SLP 5800K hit into my lane and it hit the front right of my car.

DECLARATION

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

1/13/13 12:40pm



CERTIFICATE OF INSURANCE

■ 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)

CERTIFICATE NO. : VPX/PL305555 Account No. : 16418
Coverage : Comprehensive
Sum Insured : Market Value At The Time Of Loss
Name of Policy Holder : KOMOCO CAR RENTALS PTE LTD
Vehicle Registration No. : SLP6160E
Period of Insurance : From 01/01/2019 To 31/12/2019 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

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.

LIMITATIONS AS TO USE*

- (a) Use for the carriage of passengers or goods in connection with the Policyholder's business
- (b) Use for social, domestic and pleasure purposes and business purpose of any person to whom the vehicle is hired

The Policy does not cover

- (a) Use for racing, pace making, reliability trial or speed-testing
- (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle
- (c) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

(04)

EXCESS :

Sect I - Used In S'pore Only : SGD 350.00
Sect I - Used Outside S'pore : SGD 350.00

* 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.

I/We hereby certify that the policy to which this Certificate relates is issued in 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 Signature

Issued by - SGOKEER2 on 19/03/2019

IMPORTANT :

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).

FOR INDIVIDUAL CUSTOMERS : Cover Under the policy is valid only upon the payment of the full premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS : Please refer to the Premium/Bargaining/Commission/GST policy

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

License No: **S8315041F**

NAME

ONG KANG SHENG
(WANG KANGSHENG)

Date of Birth: **22 May 1983**

Expiry Date: **11 Dec 2017**

0027526810

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8315041F**

NAME

ONG KANG SHENG
(WANG KANGSHENG)

王康生

Race

CHINESE

Date of birth

22-05-1983

Country/Place of birth

SINGAPORE

Sex

M

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2600\text{kg}$ 11 Dec 2017

MP 425A



9385983

S8315041F

9385983

S8315041F

Date of issue

22-11-2014

APT 9LK 475A UPPER SERANGOON CRESCENT 413-809
SINGAPORE 531475

NRIC No: **S8315041F** Date: **15/08/2015**

Date: 15 April 2019

AXA Insurance Singapore Pte Ltd

Attn: Motor Claims Dept. /

Vehicle number : **SLP 6160 E**
 Make and model : Ioniq 1.6 5DR DCT S/R Hybrid
 Registration Date : 13 June 2017
 Chassis number : KMHC851CVHU028152
 Engine number : G4LEHU361290

Invoice No. :
 Job No. : 2019012937
 Policy Holder : Komoco Car Rentals
 :Pte Ltd
 Date of Acc. : 13 April 2019
 Policy number: VFX/P1305555
 Claim Type : **O.D - Excess TBC**

Front Items:

1	PANEL-FENDER,RH	66321-G2000	\$ 588.80
2	COVER-FR BUMPER	86511-G2000	\$ 430.90
3	BRACKET-FR BUMPER SIDE SUPT,RH	86556-G2000	\$ 12.00
4	DUCT ASSY-AIR CURTAIN,RH	86568-G2000	\$ 13.90
5	ABSORBER-FRONT BUMPER ENERGY	86520-G2000	\$ 86.90
6	WIRING HARNESS-FWS EXT	91890-G2512	\$ 203.90
7	STIFFNER-FR BPR LWR	86571-G2000	\$ 85.10
8	LAMP ASSY-HEAD,RH	92102-G2040MBL	\$ 1,198.80
9	SUNDRIES		\$ 100.00
			\$ 2,720.30
			\$ 544.06
			\$ 2,176.24

Less 20% Discount

Material Total

Body & Paint Repair:

1	To carry out accident body repair	\$ 1,280.00
2	Complete putty and spray paint affected area	\$ 1,120.00

Labour Charges:

3	Refocus both front headlamp assy (S.nett)	\$ 40.00
		\$ 4,616.24

Total

Excess Nil

Sub Total

Add GST 7%

Grand Total

*** Estimation are base on visual inspection, should there be furthur damages found during process of repair, you will be inform prior before carry out***