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 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.

By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	10/05/2019 17:54
Date Of Accident	10/05/2019 08:15
Exact Location Of Accident	BLK 303 PUNGGOL CENTRE CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	PC5681X
Insured/Policyholder	
Name Of Registered Owner	MZ EXPRESS
Co Reg No	53257612L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-94599369
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number GA435362

Cover Note Number

Driver

Name of Driver JUNAIDI BIN ISMAIL

NRIC No S7529875G Date Of Birth 17/10/1975 Occupation **OUTDOOR Date Of Driving Pass** 19/01/2012

Driving Experience 7 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84506208

Fax Number

Contact Number

EMail Address NOEMAIL Address BLK 334D YISHUN ST 31 #02-129

Postcode 764334

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 COLLISION - HEAD TO REAR

Weather Conditions RAINING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

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2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NAME:

: UNKNOWN GENDER: UNKNOWN

GENDER: : MALE

Passenger 2

Passenger 1

NAME: : UNKNOWN GENDER: UNKNOWN

GENDER: : MALE

Passenger 3

NAME: : UNKNOWN GENDER: UNKNOWN

GENDER: : MALE

Passenger 4

NAME: : UNKNOWN GENDER: UNKNOWN

GENDER: : MALE

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

I WAS EXITING THE CARPARK OF BLK 303 PUNGGOL CENTRE ON 10/05/2019 AT 0815HRS. VEHICLE B STOP SUDDENLY ANDI CANNOT STOP IN TIME AND SLIGHTLY TOUCHED THE REAR PORTION OF VEHICLE B. MY VEHICLE NO DAMAGES AT ALL.

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

SMD6770X

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B

Page 2 of 14

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR SOH SONG HUANG S7024077G

Sketch Plan Pg. 1

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 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
- 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)

Lunderstand, acknowledge, agree and consent that:

- 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:
 - 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
- (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.
- 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 Signatu (If driver is not the policyholder)

Date & Time:

Name:

NRIC/FIN No .:

Half averion

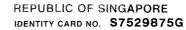
Reporting Centre Personnel's Signature

Sketch Plan #2 Pg. 1

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centre on 10-	05. 2019 @ 0815 hu. Vehicle !
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My vehicle	no damages at all.
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ECLARATION	
We declare the foregoine and culars are tr	ue in every respect.
ECLARATION We declare the foregoing culars are tr	rue in every respect.

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JUNAIDI BIN ISMAIL

جونيدي بن اسمايل

Date of birth 17-10-1975

9752**987**5G

Country/Place of birth SINGAPORE



Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

NP 428A





09-03-2019

APT BLK 334D YISHUN STREET 31 #02-129

SINGAPORE 764334





AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

4 (65) 6880 4740

☑ customer.care@axa.com.sg

www.axa.com.sg

date

11/01/2019

policy number CB1 / GA435362

Certificate of Insurance

-Commercial Vehicles (Third-Party Risks and Compensation) Act. (Chapter 1.89) - Commercial Vehicles (Third-Party Risks and Compensation) Rules, 1960 -Road Transport Act. 1987 (Malaysia) -Commercial Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy détails

Policyholder name

MZ EXPRESS

Certificate numbe

GA435362 / 1

Cover Engine number Comprehensive 1KD2665750 NCD Chassis number

KDH2230030205

Vehicle Registration numbe Period of Insurance PC5681X

from 13/01/2019 to 12/01/2020 (both dates inclusive)

Market Value at The Time of Loss

Finance Loan Company

Sum Insured

TATCO CREDIT PTE LTD

Persons or classes of persons entitled to drive

Any person provided he is in the Policyholder's employ and/or is driving on their 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 only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
- (b) Use only in the Republic of Singapore.

The Policy does not cover

- (a) Use for racing, pace-making, reliability trail or speed testing
- (b) Use whilst drawing a trailer except the towing (other than for reward) of anyone disabled mechanically propelled vehicle
- * Limitations rendered inoperative by Section 8 of the Commercial 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



An additional excess is applicable as follows:

Additional All Claims Excess of S\$2,000 is applicable for any named/unnamed drivers who:

a) is 18 years old to 26 years old and/or

b) is 66 years old and above and/or

c) with driving experience of less than 1 year on the relevant classes of driving license

Additional clauses & endorsements to your policy

Nil

1 of 3











