MSME19064211 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 17/05/2019 13:29 SUBMITTED BY: Chia Pei Ying

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.
- 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.	a nereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	17/05/2019 13:29
Date Of Accident	11/05/2019 15:30
Exact Location Of Accident	538 BEDOK NORTH ST 3 CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKA43R
Insured/Policyholder	
Name Of Registered Owner	DLE M&E PTE LTD
Co Reg No	198001575K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67478633
Vehicle Particulars	
Manufacturer	MASERATI
Model	LEVANTE DIESEL-3.0 V6 (A)
Exact Purpose for which vehicle was being	ng used at

=xact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No. Please state action to be taken REPORTING ONLY Vehicle Category PRIVATE CAR

Insurance Company

AXA INSURANCE PTE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

Policy Number P2263195

Cover Note Number

Driver

Name of Driver **GOH GWEK SOON**

NRIC No S1068649J Date Of Birth 15/03/1950 Occupation **INDOOR Date Of Driving Pass** 25/05/1968

Driving Experience 50 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96661892

Fax Number

Contact Number

EMail Address NOEMAIL

507 CHANGI ROAD Address

419970 Postcode

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 **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?

Passenger 1

NO

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 2

> NAME: : ONG AH KIO

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes.Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

I WAS DOING A REVERSE. I DID NOT NOTICE VEHICLE B WAS CLOSE TO MY VEHICLE AND SLIGHTLY HIT ONTO THE FRONT PORTION OF VEHICLE B

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

SLS4937T Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B 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 Pg. 1

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 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. 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)

Lunderstand, 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 (all 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.:

DESCRIBE CIRCUMSTANO	CES OF THE ACCIDENT	
T	11 60 0000	ce I did not:
notice in and shi	Jehicle B was clightly hit on the	se. I did not. ose to my vehicle front portion of
·		
DECLARATION	timless are true in every respect	
I/We declare the foregoing pa	orticulars are true in every respect.	
Policyhol Wigneture Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Date & Time:

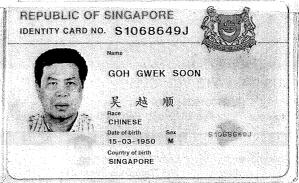
Sketch Plan #3 Pg. 1

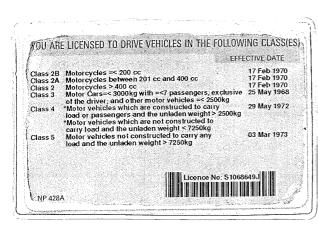
LETTER OF UNDERTAKING

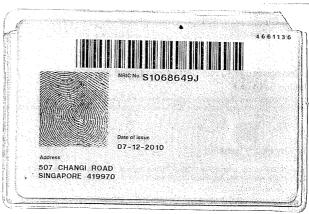
I/We, DLE MLE PIE CID	, the owner of vel	nicle no. Ska 73R
My/Our Insurance is under M/s AXA I claim under my/our Policy or against the such a claim to M/s AXA Insurance Ptewithin 14(fourteen) days of occurrence of the such a claim to M/s AXA Insurance Ptewithin 14(fourteen) days of occurrence of the such as the suc	I to with all relevant for	former shall submit
My/Our Third Party claim is handle by	my/our preferred worksł	nop,
Signed and Acknowledge by:		
Nric no. & signature of policyholder	Company stamp	17(05/3029 Date

Sketch Plan #4 Pg. 1









AXA INSURANCE PTE LTD

8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Fax:-Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@axa.com.sg



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/P2263195

Account No.: 15489

Coverage

: Comprehensive

Sum Insured

: SGD 460,000.00

Name of Policy Holder

: DLE M&E PTE. LTD.

Vehicle Registration No. : SKA43R

Period of Insurance

: From 30/11/2018 To 29/11/2019 (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 hired (under a hire purchase agreement or otherwise) to him or his employer or his partner

(b) Any Named Driver as stated in the Policy

1. GOH GWEK SOON

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*

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 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 reaching are making or gush girllar purposes. used for racing, pace-making or such similar purposes.

(01)

EXCESS :

Sect I - Used In S'pore Only : SGD 8,000.00 Sect I - Used Outside S'pore : SGD 16,000.00 Fire&Theft - Outside Singapore : SGD 16,000.00 Windscreen Excess : SGD 500.00

* 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 - SGOVGBP

on 04/04/2019

IMPORTANT :

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)

The Premium Warranty Clause requires the premium to be epaide in if will swithin a respectful period control failing which there would be no liability under the policy of rehewal accretificate, scoverhote and the endorsement at a control of the c



















