

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	27/05/2019 20:30
Date Of Accident	25/05/2019 18:00
Exact Location Of Accident	DRIVING ON RIVER VALLEY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML3919M
Insured/Policyholder	
Name Of Registered Owner	ASMAA PANDIT
NRIC No	S8284061C
Email Address	ASMAA.PANDIT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92975075
Alternative Phone No	OFFICE-92975075
Vehicle Particulars	
Manufacturer	SKODA
Model	KODIAQ L&K 2.0 L TSI 132KW DSG
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	CN045824
Cover Note Number	

Driver

Name of Driver	CHAWLA SAMEER
NRIC No	S7788301J
Date Of Birth	29/08/1977
Occupation	INDOOR
Date Of Driving Pass	13/12/2011
Driving Experience	7 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91003915
Fax Number	(LOCAL) +65-91003915
Contact Number	
Email Address	SAMEERINBOX77@GMAIL.COM

Address	3 GRANGE GARDEN #18-01
Postcode	249633
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO MOTORCYCLIST
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)	3
Passenger 1	NAME: : ASMAA PANDIT GENDER: : FEMALE
Passenger 2	NAME: : VEER CHAWLA 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

ORE DETAILS PLEASE 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	FBN5335D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	LEE WEE KIAT
NRIC/Passport Number	S9608776D
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

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:



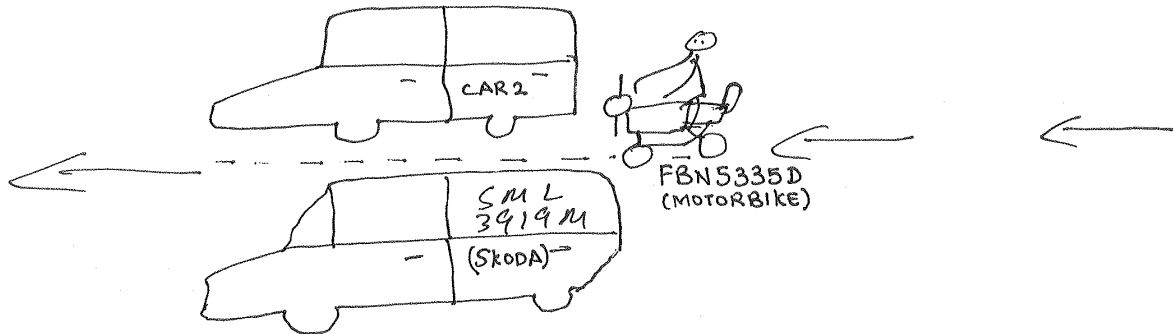
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN

RIVER VALLEY ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 25th MAY 2019 I WAS DRIVING ON RIVER VALLEY ROAD AROUND 6PM. I WAS AT 50 KM PER HOUR. SUDDENLY A DELIVEROO RIDER CAME AT A HIGH SPEED TO MY RIGHT AND TRIED TO SQUEEZE BETWEEN MY CAR WHICH WAS IN LEFT MOST LANE & OTHER CAR IN MIDDLE LANE. THE RIDER WAS AT SPEED & HIT MY SIDE MIRROR & LOST BALANCE. HE DAMAGED MY SIDE MIRROR & THE TYRE WHICH GOT CUT. THE DRIVER SAID SORRY AND SAID THAT HE WILL GET HIS INSURANCE TO COMPENSATE AND ADMITTED HIS FAULT.

DECLARATION

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

Asmaa Pandit

Policyholder's Signature
Date & Time:

Shamir

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

M. J.

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

AXA INSURANCE PTE LTD

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



Original

Agent Code: 16720

Policy No. (if any):

New Business

SmartDrive Quote Ref:

MOTOR COVER NOTE

No. **CN045824**

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) - Republic of Singapore; or
 - The Road Transport Act 1987 of Malaysia; or
 - The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
 - The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
 - And any subsequent revisions to the above Acts and Agreements
- The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	ASMAA PANDIT
MAKE AND DESCRIPTION OF VEHICLE	SKODA KODIAQ L R 2.0 TSI
VEHICLE REGISTRATION NO.	
YEAR OF MANUFACTURE	2018
ENGINE NO	CZP191633
CHASSIS NO	TMBMD9NS8K8029819
ENGINE CAPACITY/TONNAGE	1984CC
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	DBS BANK LTD
VALUE (\$S)	AS PER MARKET VALUE
PERIOD OF INSURANCE	FROM: 17/05/2019 TO: 16/05/2021
EXCESS (\$S)	\$5900
AXA PREMIUM WORKSHOP?	NO

(I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA)

AXA INSURANCE PTE LTD

Issued by AXA (AP) PTE LTD (SKODA) on: 15/05/2019 11:05 am

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum of \$553.50 (inclusive of GST), if the policy is cancelled after the inception date.
- An administrative fee of \$526.75 (inclusive of GST) will be charged :
 - Cover note issued and cancelled before inception.
 - Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

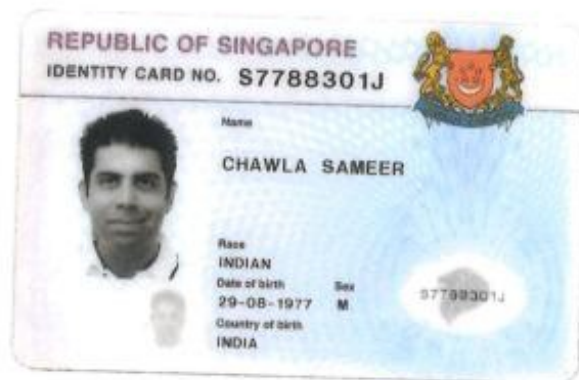
Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

MIRRORED/REVISED

Driving License



SAMEERINBOX@77@GMAIL.COM

91003915

ASMAN.PANDIT@GMAIL.COM

92975075



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





REPUBLIC OF SINGAPORE

DRIVING LICENCE

Licence Number:

S9608776D

Name:

LEE WEE KIAT



Birth Date: 12 Mar 1996

Issue Date: 09 Oct 2015



002481410E

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

Class 2B
Class 3

Motorcycles \leq 200 CC
Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the
driver; and motor tractors/vehicles \leq 2500 kg

EFFECTIVE DATE

09 Oct 2015
07 Aug 2018

S9608776D

S / No. 9000308544

NP 428A



Licence No: S9608776D