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 <u>truthful and accurate</u> 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	28/05/2019 15:09
Date Of Accident	28/05/2019 14:00
Exact Location Of Accident	EUNOS LINK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLX9849R
Insured/Policyholder	
Name Of Registered Owner	ANNE TAN LAY KHENG
NRIC No	S7223629G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84991949
Alternative Phone No	OFFICE-84991949
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HARRIER-2.0 (A)
Exact Purpose for which vehicle was being used a time of accident	t NORMAL USAGE
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

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number CN887481

Cover Note Number

Driver

Name of Driver ANNE TAN LAY KHENG

 NRIC No
 \$7223629G

 Date Of Birth
 07/07/1972

 Occupation
 INDOOR

 Date Of Driving Pass
 24/12/1999

Driving Experience 19 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-84991949

Fax Number

Contact Number OFFICE-84991949

EMail Address NOEMAIL

BLK 269 PASIR RIS ST 21 #06-442 Address

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

2

Was any other material or property damaged? NO

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 1

Details of Police Action

NO Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED SKETCH PLAN AND 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

SLR625K Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number S7925915B

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

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- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

lunderstand, acknowledge, agree and consent that:

- (a) My insurer , my w orkshop 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purpose

Witnessed by Reporting Centre Driver's Signature (If driver is not the policyholder) / Date Policyholder's Signature / Date & Personnel Sketch Plan

Sketch Plan #2 Pg. 1

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cyholder's Signature / Date &	Driver's Signatu	re (If driver is not the p	olicyholder) / Da	te Witness	ed by Reporting Centre

AXA INSURANCE PTE LTD

8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Service Centre #B1-01 Tel: 6338 7288 Fax: 6338 2522 Website: www.axa.com.sg GST Registration Number: 199903512M



Original

Agent Code: 14885

Policy No.(if any): BSTU015 BRANDON

New Business

SmartDrive Quote Ref: 最 3921・0日

MOTOR COVER NOTE

No. CN887481

- 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 be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which case the insurance will be company by notice in writing in which will be 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	ANNE TAN LAY KHENG
MAKE AND DESCRIPTION OF VEHICLE	TOYOTA HARRIER 2.0
VEHICLE REGISTRATION NO.	
YEAR OF MANUFACTURE	2018
ENGINE NO.	8ARZ118156
CHASSIS NO.	JTEKB3GH80J001869
ENGINE CAPACITY/TONNAGE	1998
COVER TYPE	COMPREHENSIVE .
HIRE PURCHASE	HONG LEONG FINANCE LIMITED
VALUE (S\$)	AS PER MARKET VALUE
PERIOD OF INSURANCE	FROM: 16/04/2018 TO: 15/04/2020
EXCESS (S\$)	500
AXA PREMIUM WORKSHOP?	NO BO: NEO MOTORS (S) PTE LTD

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

AISINCHCAPE4

on

16/04/2018 11:06am

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 S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
- · An administrative fee of S\$26.75 (inclusive of GST) will be charged:
 - o 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 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 please note that where the period of cover is for more than 60 days, the premium in full should be paid before inception. cases, the premium in full should be paid before inception.

MTR/C/NOTE/V01/03

Identification Card Pg. 1

REPUBLIC OF SINGAPORE IDENTITY CARD NO. 87223629G



ANNE TAN LAY KHENG



陈丽琼

Reca CHINESE Date of Birth Se 07-07-1972 F Country of Birth SINGAPORE

\$7223629**G**



INTERNACIONAL DE LA CONTRACTOR DE LA CON

NRICNA \$7223629G

Blood Group Cate of leave AB+ 12-06-1999

APT BLK 288 PASIR RIS STREET 21 #08-442 SINGAPORE 510289 NRIC No:S7223829G Date: 07/06/2015

/2015

3084282

YOU ARE LICENSED TO DRIVE VEHICLES WITHE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

of 24 Dec 1999

NP 428A

Licence No: S72236296













