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.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	31/05/2019 10:31
Date Of Accident	30/05/2019 18:00
Exact Location Of Accident	EXIT KPE TO (PIE) @EXIT 6
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKF5542H
Insured/Policyholder	
Name Of Registered Owner	OVERSEAS FAMILY SCHOOL LIMITED
Co Reg No	199104269R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96646345
Vehicle Particulars	
Manufacturer	TOYOTA
Model	CAMRY-2.0 (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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA111836/1
Cover Note Number	
Driver	

Name of Driver HO HIE WU
NRIC No S1522441Z
Date Of Birth 28/05/1962
Occupation INDOOR
Date Of Driving Pass 27/09/1982

Driving Experience 36 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96646345

Fax Number

Contact Number

EMail Address DAVID HO@OFS.EDU.SG

Address 26 JALAN KEBAYA

Postcode 278315

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 **CHAIN COLLISION**

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

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? 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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO NO

Circumstances of Accident

REFER TO REPORT ATTACHED

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 SKA8392E

VOLKSWAGEN Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category Name of Driver TAN CHIEN WEI NRIC/Passport Number S6906793Z 82180800 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJG4724M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

HONDA AIRWAVE

PRIVATE CAR

CHEE TET SHIN

S1686694F

Sketch Plan Pg. 1

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ECLARATION		81 Pasir Ris Hei Singapore 5192	gats 92	-	
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te & Time:	(If driver is not the	policyholder)	Name:		
4.	Date & Time:		NRIC/FIN N	o.:	

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Sketch Plan Pg. 2

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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

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.

Overseas Family School Limited

81 Pasir Ris Heights Singapore 519292

6738-0211 Fax: 6733-8825

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Policyholder's Signature Date & Time:



Certificate of Insurance

account number

GA111836 / 1

1AZE140170

MR053BK4107046700

08504

-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 number

Chassis number

Engine number

Policy details

Policyholder name Cover

OVERSEAS FAMILY SCHOOL LIMITED Comprehensive Private Plan name NCD applicable 50%

Vehicle registration number

Finance loan company

Period of Insurance

SKF5542H

from 30/07/2018 to 29/07/2019 (both dates inclusive)

Persons or classes of persons entitled to drive*

(a) Any Named Driver as stated in the Policy:

1. ANY AUTHORISED DRIVER

(b) 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 Venicle.

Limitation 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, speed testing, 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 racing, pace-making or such similar purposes.

* Limitations rendered inoporative by Section & of the Motor vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transfort Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Basic Own Damage Excess

Windscreen Excess

SGD AOD OO SGD 100:00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium

Additional clauses & endorsements to your policy

Additional Clause 1 ADDITIONAL AUTHORISED DRIVER

Ho Hie Wu David S1522441Z 29 May 1962

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

Authorised signature

Important note

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01

1 of 4

Sketch Plan Pg. 4



POLICYHOLDER ACKNOWLEDGEMENT FORM							
Date:							
To: Owner of Vehicle Number: SKFSY42F							
The following has been advised to you via your workshop, through their staff							
·							
Please tick the applicable bex if you had been advised on any of the following:							
You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.							
() You had been advised by the workshop on the liability and merits of the case accordingly.							
 You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident. 							
() There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.							
There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.							
The estimated waiting time for the spare parts to arrive is The estimated arrival time does not include the repair period.							
() You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.							
() For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.							
For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using any combination of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.							
() You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs or workmanship related to the accident.							
() For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.							
() Others							
Signed and acknowledged by:							
DAVID FOR THE WM							
Name and signature of policyholder/ authorized driver* and company stamp (where applicable)							
*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles permitted drivers who are permitted to drive the insured Vehicle.							

Name and signature of workshop personnel including company stamp

Overseas Family School Limited

81 Pasir Ris Heights Singapore 519292 Tel: (65) 6738 0211 Fax: (65) 6733 8825 Website: www.ofs.edu.sg

Co. Reg: 199104269R GST Reg: M2-0101652-5

31 May 2019

Dear Sir/Mdm,

Overseas Family School Limited hereby authorized Mr Ho Hie Wu, our staff and driver of vehicle number SKF5542H to provide the full account and details of the rear car collision to his car SKF5542H that occurred on 30 May 2019 approximately 6pm along the slip road exit coming out of KPE tunnel to PIE in the direction of Tuas.

Your faithfully,

Irene Wong Chief Executive

Overseas Family School Limited

Overseas Family School Limited 81 Pasir Ris Heights

Singapore 519292 Tel: 6738-0211 Fax: 6733-8825 OVERSEAS FAMILY SCHOOL

#0704 P.001/001

Overseas Family School Limited

81 Pasir Ris Heights Singapore 519292 Tel (65) 6738 0211 Fax (65) 6733 8825 Website: www.ofs.edu.sg

Co. Reg: 199104269R GST Reg: M2-0101652-:

TO WHOM IT MAY CONCERN

This is to confirm that Mr David Ho Hie Wu NRIC No. S7241771B is the driver of Vehicle No. SKF5542H and he is authorized to file the accident report on behalf of the company.

Die

Overseas Family School Limited Irene Wong (Ms) Chief Executive S0139686B

Dated: 31st May 2019



























