SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

ENTRY DATE & TIME: 25/06/2019 11:31 SUBMITTED BY: Vo Yung Khong

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed</u> 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.

	ACCIDENT STATEMENT		
Date Of Report	25/06/2019 11:31		
Date Of Accident	22/06/2019 20:00		
Exact Location Of Accident	BKE TOWARDS SLE AFTER MANDAI		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SLH4247U		
Insured/Policyholder			
Name Of Registered Owner	KOH ZHI SHENG ,SHANE		
NRIC No	S8531654J		
Email Address	SHAYYNE@LIVE.COM		
Mobile Phone No	(LOCAL) +65-91124330		
Alternative Phone No	OFFICE-NOPHONE		
Vehicle Particulars			
Manufacturer	SUBARU		
Model	IMPREZA-2.0 5D (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			
Insurance Company			
Name of Insurance Company	AXA INSURANCE PTE LTD		
Type Of Coverage	REPORTING ONLY PRIVATE CAR AXA INSURANCE PTE LTD COMPREHENSIVE NO		
Fleet Policy	NO		
Policy Number	GA416061/1		
Cover Note Number			
Driver			
Name of Driver	KOH ZHI SHENG ,SHANE		

NRIC No S8531654J Date Of Birth 29/10/1985 Occupation **INDOOR** Date Of Driving Pass 26/09/2005

Driving Experience 13 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91124330

Fax Number

OFFICE-NOPHONE Contact Number **EMail Address** SHAYYNE@LIVE.COM Address BLK 518 CHOA CHU KANG ST 51

#13-10

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 CHAIN COLLISION
Weather Conditions AFTER RAIN
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

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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)

Passenger 1

NAME: : KOH JIE YU TEO

GENDER: : MALE

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 ATTACH 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 SLR423B

Vehicle Make/Model/Colour HONDA/VEZEL/WHITE

Details Of Properties REAR

Vehicle Category PRIVATE CAR

Name of Driver THANA LETCHUMI D/0 RAJAGOPAL

NRIC/Passport Number S9128846Z Contact Number 93621304

Address Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHA8278M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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- Please report gornand; the details of the accident to speed up the claims process.
- 2. This Form must be complished by the Politic holder and/or the Authorised Oriver.
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- This report will be forwarded by the insurers to the GIA Records Mangement Centre establised by the General Insurers e 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 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/faw 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 detention, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insureres and/or any other third parties that assist in evaluating, investigating, controlling or managing freud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirments under any regulations, laws or court orders.

Policyholder's Signature

11 25

Driver's Signature

(# Griver is not the policyholder)

Date & Time

COMPORTDELONG ENGINEERING PTE LTD EXTERNAL BUSINESS DV. PANDANJERANCH

MANE & SIGNATURE: OPENING STATES S

Percenting Centre Personnel's Signature Hame:

TIRIC / Fin file.:

Sketch Plan #2

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ESCRIBE CIRCUMSTANCES OF THE ACCIDENT	******* *** *** ** ** ** *** ** ** ***	COLUMN TO A STATE OF THE STATE
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was unable to ste	o in time	and sens
ended SLR 423B.	The tirge o	will recir
CIUROI SUN 4230.		
PORTANT NOTE		
der General Condition - Conduct of Claim of the Motor Policy	, you have to decide within 21 da	vs of occurrence
iscovery of damage whether or not to claim under the policy. P	lease check your policy for more in	formation.
CLARATION		
declare the foregoing particulars are true in every respect.		
and the state of t	COMFORTDELC	RO ENGMEERING PTE LTD
. [1		SECS DIE MINDEN BRANCH
CRL IN	MANE ESTERA	19/1/
1-	DESIGNATIONS	DATE: 1/6/14
holder's Signature 25/6/101 Driver's Signature 2	dilla Barrilla	antre Personnal's Signature
Time (if driver is not the policyholder)	S/0/19 Itame:	The state of the s
Osta & Tinte	1177	

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CERTIFICATION OF INSURANCE Pg. 1







AXA Insurance Pte Ltd

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

(65) 6880 4740

customer.care@axa.com.sg

www.axa.com.sg

account number

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)

Policy details

Policyholder name KOH ZHI SHENG SHANE (XU ZHISHENG)
Cover Comprehensive
Plan name Peace

NCD applicable 0%
Vehicle registration number SLH4247U

Period of lisurance from 12/11/2018 to 12/11/2019 (both dates inclusive)
Finance loan company TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

 Certificate number
 GA416061/1

 Chassis number
 JF1GH7KS58G006134

 Engine number
 EJ20D243014

Persons or classes of persons entitled to drive*

(a) The Policyholder

(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 Vehicle

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 iracing pace-making reliability trial is peed 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 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

windscreen Excess

Basic Own Damage Excess Windscreen Excess SGD 900 00 SGD 100 00

90D 10

An Additional Excess is applicable as follows

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

Additional clauses & endorsements to your policy

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EXCESS

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

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Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle the, must surrende, 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. Particle to comply with this obligation is an offence under the Motor Vehicle (Third Party Pisks and Compensation 4ct (Cap. 129).

Panty make and comparisonal recorded acce.
The Promition Warranty Clause requires the premium to be paid in full within a specific parconailing which the execute being healthly under the policy renewal certificate endorsement etc.

1 of 3

ANA Insurance Pte Ltd (199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811 Customer Centre #81-01



















