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.

By the lodgement of this report to the insurers, yo aforesaid.	u hereby consent to the archiving of this report at the centre and to copies of the report being made available			
	ACCIDENT STATEMENT			
Date Of Report	27/06/2019 10:58			
Date Of Accident	26/06/2019 13:00			
Exact Location Of Accident	CTE TOWARDS SLE BEFORE PIE EXIT			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SKP3458D			
Insured/Policyholder				
Name Of Registered Owner	MAH WENG KONG			
NRIC No	S2558787A			
Email Address	NOEMAIL			
Mobile Phone No	(LOCAL) +65-98185089			
Alternative Phone No	OFFICE-98185089			

Vehicle Particulars

MERCEDES-BENZ Manufacturer

Model E250

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?

THIRD PARTY If No, Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number GA273816/1

Cover Note Number

Driver

Name of Driver MAH WENG KONG

NRIC No S2558787A Date Of Birth 02/10/1959 Occupation INDOOR **Date Of Driving Pass** 19/03/1983

Driving Experience 36 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98185089

Fax Number

OFFICE-98185089 Contact Number

EMail Address NOEMAIL Address 109 BUKIT PURMEI ROAD

#12-163

Postcode S090109

Was driver an employee of the Insured's Company NC

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

_

3

NO

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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) 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? NO

If Yes, against whom?

Circumstances of Accident

AT THE SAID LOCATION AND TIMING, DUE TO HEAVY TRAFFIC, VEHICLE C SLOWED DOWN AND I FOLLOWED SUIT. OUT OF A SUDDEN, I FELT A STRONG IMPACT FROM MY REAR AND IT RESULTED IN MY VEHICLE MOVING FORWARD AND HIT ONTO VEHICLE C. I THEN REALISED THAT VEHICLE B HAVE HIT ONTO ME. WE EXCHANGED PARTICULARS AND LEFT.

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 EJ638Z

Vehicle Make/Model/Colour

Details Of Properties

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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHD5343L

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

	The second secon	nyanan ya i
		11
CTE towards SLE before		
PIE exit		1.
		1-1-
	17141111	111
Veh A → SKP3458D	8 1 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		+-
Vell D 77 E 7 638 Z		1-1-
veh C → SHD5343L	// 50	ΙΤ
	81-5-4	<u> </u>
	6 0 B	1
	2 5	Territoria de
		1.
		1
		1
	ang kanang kanang kan da kanang ka	1

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At the Said location and timing, due to heavy traffic, vehicle
C Slowed down and I followed suit. Out of a Sudden, I felt
a Strong impact from my rear, and it resulted in my vehicle
moving forward and hit onto vehicle C. I then realised that vehicle
B have hit onto me. we exchanged particulars and left.
DECLADATION

DECLARATION

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

X

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

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)

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")
- 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
- 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.
- 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 Signa Date & Time:

Driver's Signature

(If driver is not the bolicyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AUTHORISE LETTER Pg. 1

AUTHORISATION

Name of owner of vehicle: Mah Weng Kong
Name of driver of vehicle: Mah Weng Kong
Vehicle Number: SKP3458D
Date of Accident: 261061 2019
Location: Along CTE towards SLE before PIE exit

I/We hereby authorize <u>Lee Brothers Automotive Pte Ltd</u> to submit my accident report on my behalf. I will not be available to be around during the submission of report. Thank you.

Signed: Owner/Driver of vehicle: Mah weng Kong

Nric No.: \$2558787A Date: 26/06/2019





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 15277

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

MAH WENG KONG

Certificate number

GA273816 / 1

Cover Plan name Comprehensive Essential+

Chassis number Engine number

WDD21204724509087 27186030326970

NCD applicable Vehicle registration number 50% SKP3458D

Period of Insurance

from 01/11/2018 to 31/10/2019 (both dates inclusive)

Finance loan company

Persons or classes of persons entitled to drive*

(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, 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 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.

EXCESS

Windscreen Excess

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

Nil

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

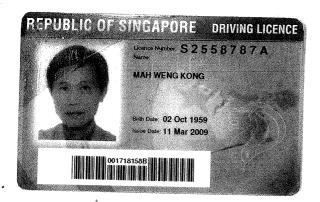
Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-

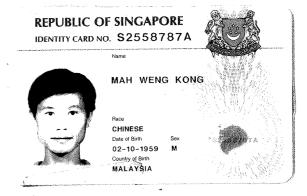
Party Risks and Compensation Act (Cap. 189).

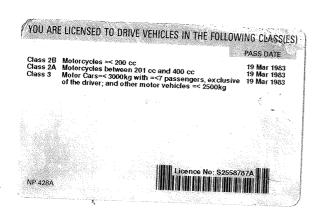
The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate. endorsement etc.

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

1 of 2









LETTER OF UNDERTAKING

I/We, Mah Weng Kong	
involving in an accident with vehicle no. (TP) EJ638Z on 26/06/2019	SKP3458D
CTE towards SLE before PIE exit	along
	•
My/Our Insurance is under M/s A Y A Insurance G	
My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we sh to claim under my/our Policy or against the Third Party and if the former s claim to M/s AXA Insurance Singapore Pte Ltd with all release to	all decide whether
claim to M/s AXA Insurance Singapore Pto Lead 1 and if the former s	shall submit such a
claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and of 14(fourteen) days of occurrence or discovery of damage.	documents within
anage.	
My/Our Third Party claim is handle by my/our preferred workshop,	
Lee Brothers Automotive Pte Ltd	
Signed and Acknowledge by:	
,	,
7000	
Name and signature of policyholder Company Stamp Dat	••••••
Company Stamp Dat	te





















