#### 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	06/08/2019 13:58
Date Of Accident	06/08/2019 13:00
Exact Location Of Accident	ALONG JURONG EAST ST 11
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJY853E
Insured/Policyholder	
Name Of Registered Owner	CRONIMET SINGAPORE PTE LTD
Co Reg No	201307444C
Email Address	PATEL.MAHIAR@CRONIMET.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62254640
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	S350L-3.5 (A)
Exact Purpose for which vehicle was being used at time of accident	TRANSPORTATION TO MEET CLIENT
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
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA117014

Driver	

Cover Note Number

Name of Driver MAHIAR RUSTOM PATEL

 NRIC No
 \$7268766C

 Date Of Birth
 04/10/1972

 Occupation
 INDOOR

 Date Of Driving Pass
 21/05/2003

Driving Experience 16 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97699669

Fax Number
Contact Number

EMail Address PATEL.MAHIAR@CRONIMET.SG

Address 27 JALAN BUROH SINGAPORE

Postcode 619483

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 Registration Number of Driver's Own

-

Insurance Company of Driver's Own Vehicle

-

#### **General Information of the Accident**

Type Of Accident COLLISION - HEAD TO REAR

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?

Was any injured conveyed to hospital by

ambulance?

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

s) NO

1

NO

Number of Passengers (Including Driver)

#### **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**

#### REFER TO ATTACHED 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 GBF9810P

 Vehicle Make/Model/Colour
 TOYOTA / HIACE VAN / WHITE

 Details Of Properties
 REAR PORTION OF VEHICLE

Vehicle Category COMMERCIAL VEHICLE

Name of Driver KHOO YONG HWA

Name of Driver KHOO YONG I NRIC/Passport Number S7931928G

NRIC/Passport Number S79319280 Contact Number 97585670

Address Postcode

Insurance Company Name

Nature Of Damage TAIL GATE ,REAR BUMPER DENT

1

No. Of Passenger (Including Driver)

Protected by Symantec

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
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- 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, oy
  - (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)

06 th Ang 2019 2.07 pm COMPONIDEL CRO ENGINEERING PTE LTD
EXTERNAL DUSINESS ON FANOAN BRANCH
NAME & SIGNATURE:
DESIGNATION:
DESIGNATION:
DESIGNATION:

Reporting Centre Personnel's Signature Name: WONG CHEE WEI NRIC/FIN No. ATT/8c994

Date & Time:





Certificate number

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

# Certificate of Insurance

account number 04456

GA117014 / 1

WDD2211562A181712

27296530774472

-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 Cover

Vehicle registration number Period of Insurance

Plan name

NCD applicable

CRONIMET SINGAPORE PTE LTD Comprehensive Private

50%

Chassis number Engine number

SJY853E from 13/08/2018 to 12/08/2019 (both dates inclusive)

Finance loan company GE MONEY PTE LTD

#### Persons or classes of persons entitled to drive\*

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

1. MAHIAR RUSTOM PATEL

(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** 

Basic Own Damage Excess Windscreen Excess

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 Workshops.

#### Additional clauses & endorsements to your policy

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 3

# Sketch Plan Pg. 4

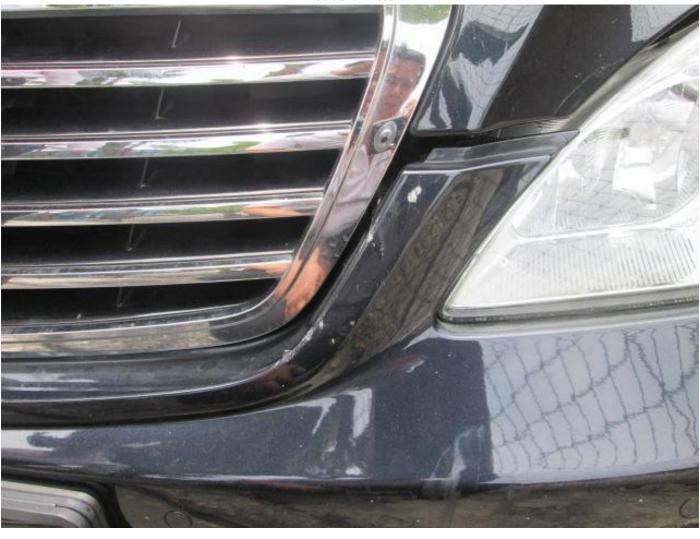
Date:	6/8/2019		
To: O	To: Owner of Vehicle Number:		
The fo	The following has been advised to you via your workshop, <u>Comfort Delgado Engreering</u> through their staff, <u>WONG CHEE WEI</u> .		
Please tick the applicable box if you had been advice on the content as seen below:			
(V)	You had been advised by the workshop that in the event 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.		
W	You had been advised by the workshop on the liability and merits of the case accordingly.		
(V)	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.		
EX	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.		
( )	The Estimation waiting time for the spare parts to arrive is $\overline{\mathcal{T}}$ . $\mathcal{B}$ . The estimated arrival time does not include the repair period.		
M	You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.		
(义)	For vehicles below Three (3) years old, your insurance company will use only genuine original parts to repair your vehicle.		
	For vehicles above Three (3) years old, your insurance company will be carrying out repairs using <i>any combination</i> of genuine original parts and/or original equipment manufacturer (OEM) parts.		
W	You had been advised by the workshop of the Twelve (12) months warranty for $\underline{\text{Own Damage}}$ repairs on workmanship related to the accident.		
(≪)	For vehicles below Five (5) years old, you had been advised by the workshop to check with the local distributor on your warranty status. $ \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left( \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left( \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left( \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \int_{-\infty}^{\infty}$		
( )	Others		
Signed and acknowledge by:  PATEL MAHIAL RUSTON  REPORT OF THE PATEL MAHIAL RUSTON  RE			
Name and signature of policyholder authorised driver			
WONG CHEE WEI			
Mame a	Name and signature of workshop personnel including company stamp		



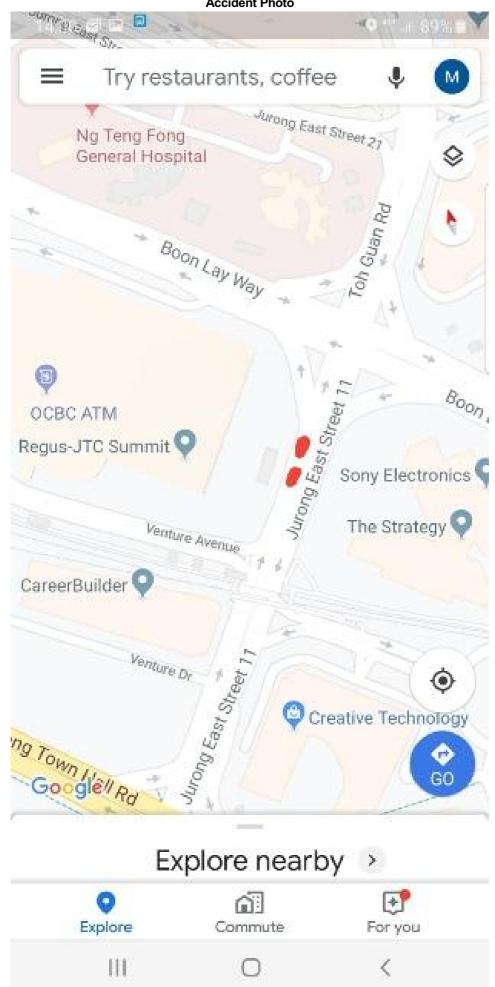






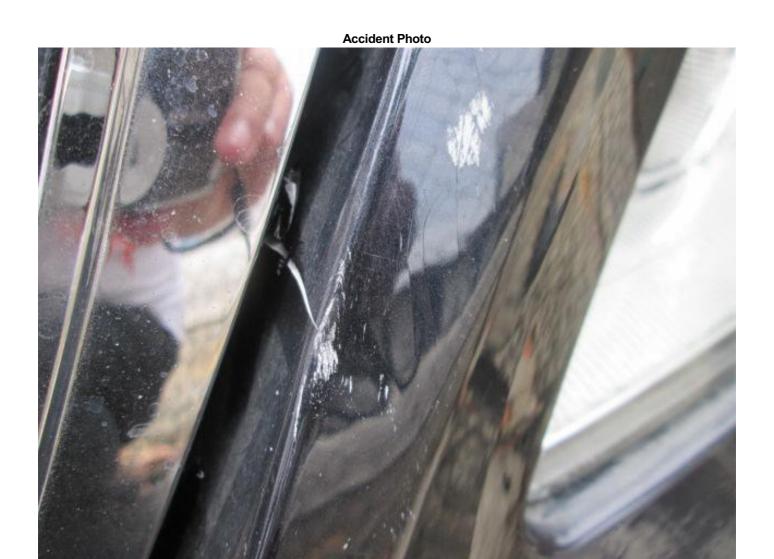












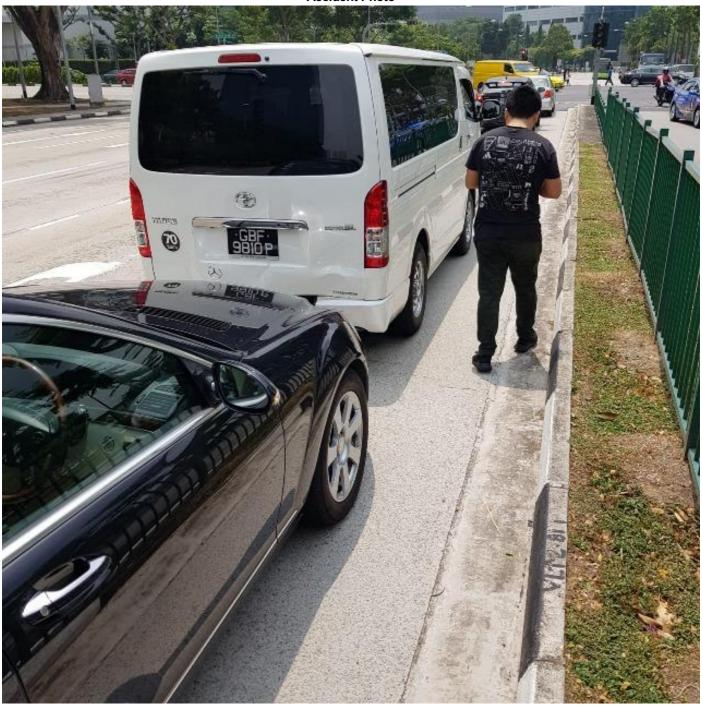


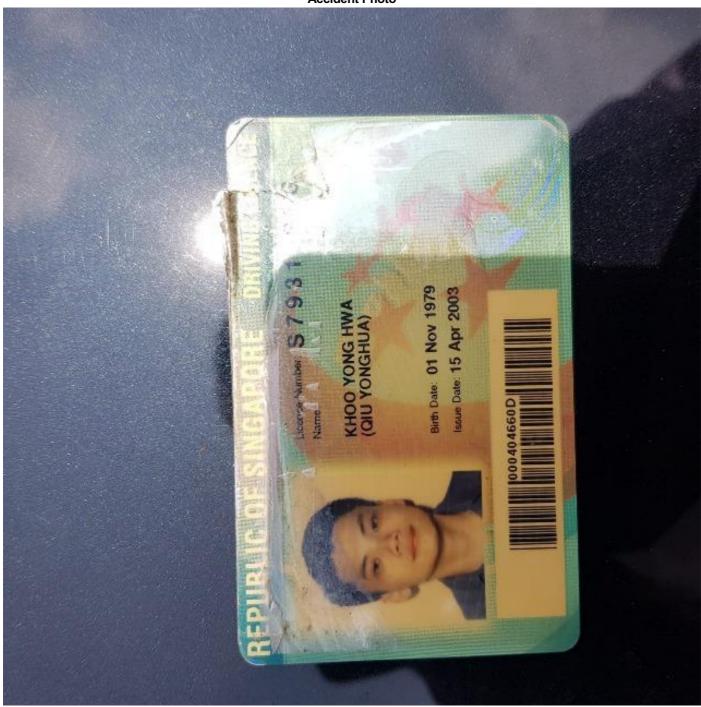




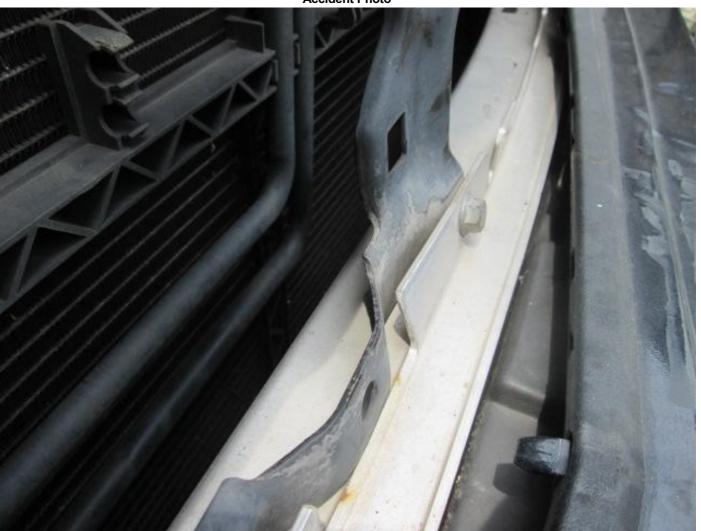
















**Driving License** 

