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

| ACCIDENT STATEMENT |
|---------------------------------------|
| 13/08/2019 16:31 |
| 11/08/2019 14:30 |
| PIE (BEFORE STEVEN RD) TO JURONG |
| SINGAPORE |
| DETAILS OF OWN VEHICLE |
| SJY1655D |
| |
| URBAN CAR RENTAL & LIMOUSINE SERVICES |
| 53328390J |
| |

AUGUSTIN_LIM@HOTMAIL.COM

Email Address

Mobile Phone No

Alternative Phone No OFFICE-91447228

Vehicle Particulars

Manufacturer HONDA Model FREED

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?

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 GA409493

Cover Note Number

Driver

Name of Driver MUHAMMAD AFIQ BIN SANI

NRIC No S8637816G

Date Of Birth 26/12/1986

Occupation INDOOR

Date Of Driving Pass 08/06/2006

Driving Experience 13 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98267204

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 234A SUMANG LANE #04-285

Postcode 821234

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 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 NO

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: : IDAH MARIYANI

GENDER: : FEMALE

Passenger 2 NAME: : MUHD NUZAYH IRTIZA

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

2

NO

3

Circumstances of Accident

VEHICLE B SUDDENLY JAM BRAKE. I COULDN'T STOP IN TIME AND HIT ONTO VEHICLE B REAR. **I AM WORKING FOR URBAN CAR RENTAL & LIMOUSINE SERVICE AND USING THE VEHICLE FOR WORK AT THE TIME OF ACCIDENT.

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 SKQ1012P

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B
Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Page 2 of 16

Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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
- 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
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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)
 - (i) processing, handling and/or dealing with my daims including the settlement of the claims and any necessary
 - (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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my daims.(collectively the
- (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
- 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.
- 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.

| URBAN | CAR | RENTAL | 8 | LIMOUSINE | SERVICES |
|-------|-----|--------|---|-----------|----------|
| | | | | | |

533283901

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 .:

| A A |
|--|
| |
| DESCRIBE CIRCUMSTANCES OF THE ACCIDENT |
| DESCRIBE CIRCUIVISTATECES |
| VEHICLE B SUDDANCY JAM BANKE, J COLON/ SIOP IN TIME AND HIS DISTO VEHICLE B REAR. |
| * I AM WORKING FOR URBAN CAR RENTAL / LIMOUSINE SERVICES AND WIND THE VEHICLE FOR WORK AT THE TIME OF ACCORD. |
| White THE VEHICLE POR WOUNT |
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| |
| DECLARATION I/We declare the foregoing particulars are true in every respect. |
| |
| radaga and the store |
| Policyholder's Signature Policyholder's Signature (If driver is not the policyholder) Date & Time: Date & Time: NRIC/FIN No.: |
| Narc a |

Sketch Plan #3 Pg. 1



POLICYHOLDER ACKNOWLEDGEMENT FORM The following has been advised to you via your workshop, Please tick the applicable box 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 _ 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 on 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: **URBAN CAR RENTAL & LIMOUSINE SERVICES** 533293 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,

Name and signature of workshop personnel including company stamp

permitted drivers who are permitted to drive the insured Vehicle.

Driving License









AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore) (65) 6880 4863 (International)

(65) 6880 4740

☑ customer.care@axa.com.eg

Rww.axa.com.sg

Certificate of Insurance

account number 00830

Addor Validos (Third Party Risks and Compensation) Act (Chapter 189) - More Validos (Third Party Historian Compensation) Collegi 1980 - Good Tempor Act, 1987 (Malayara) - Addorr Vehicles (Third Party Risks) - Halloy, 1989 (Malayara)

Policy details

Policyholder same

URBANICAR SENTAL & LIMOUSINE SERVICES

Certificate number

GA409403/1

Cover Plan name Comprehensien Pence

Chosals number Frigina number

GB31023348 L15A2323635

RCD appileable Yekiele registration number 0% SW16556

from 30/10/2018 to 29/10/2019 (point dates inclusive)

Period of Insurance Finance loan comment

Persons or classes of persons entitled to drive*

(a) Any Named Drivet as stated in the Policy

1 LIMIENG KCONG AUGUSTINE

(0) Any 201801 who is driving on the Policyhalder's order of with their permission.

Provided that the person driving is bennified in accordance with the licensing or other aws or regulations to drive the Motor Volheld or has been so pormitted and is not discussified by cropy of a Court of Law or by mason of any ensurners or regulation in that behalf from criving the Motor Veniors

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy door not cover use to third or reveal, raping page-making reliability that, speed testing the parriage of goods other than samples in connection with any trade of publicess or use for any purpose in connection with monor trade; or when the Meser Car, whether a stripping in use or ethorway is in or or. a sering track, cross tracks, course or any other roads by whatever name called that are typically used for racing, cade making or such similar composes.

* Limitations rendered inoperative by Section 2 of the Matter White ex ("I in Party Niets and Comparisotiony Act. (Chapter 189) and Gettion 5 of the Read Transport Act. 1997 (Maraysia), are not to be included under these headings

EXCESS

Recia Own Domago Expess

SGD 500,00

Windscreen Excess

SCD 100 00

An Additional Excess is applicable as tollows.

- 1 39300 for unnamed Authorised Eviver
- 2, 9\$500 for doclared Young and Inexperienced Driver
- 3 \$85,000 for uncodared Young and Inequalienced Drivers. This accidional coccas is reduced to 3\$2,500 if You have chosen 4X4 Premium

Additional clauses & endorsements to your policy

Mi

We hereby certify that the policy to which this Contitionte relates its issued in accordance with the armis on of the Motor Votor Voticies (third Party Risks and Componestion) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd.

Authorized a ground

Important note

Foliagnations are wained that on the sare of a major yell plut they must summarise the Settificate of Inguismos and the Foliagnetic forthe insurance employing the Certificate of Insurance has been lost or descriped a Country Destruction to the effect must be made, no lure to comply with this obligation is an offer or to deliberation to the effect must be made. Party Ricks and Compensation Act (Cap. 189)

The Preform Varienty Cause requires the profiler to be paid in full within a specific period failing which there would be no liability uncer the policy renewal certificate. programment etc.

AXA insurance Pto Ltd (199908512M). 8 Sharter Way, #24-01, AXA Towar, Singapore 068811 Customer Contre. #81-91

1013















