#### 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	30/08/2019 11:14
Date Of Accident	22/08/2019 19:30
Exact Location Of Accident	PIE TUAS AFTER ENG NEO FLYOVER
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBF9326X
Insured/Policyholder	
Name Of Registered Owner	SEE YEE NAM
NRIC No	S7767658I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91344811
Alternative Phone No	OTHERS-91344811
Vehicle Particulars	
Manufacturer	YAMAHA
Model	FZ 16
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	AN3171441
Cover Note Number	
Driver	
Name of Driver	SEE YEE NAM

 Name of Driver
 SEE YEE NAM

 NRIC No
 \$7767658I

 Date Of Birth
 25/02/1977

 Occupation
 INDOOR

 Date Of Driving Pass
 01/11/2008

Driving Experience 10 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91344811

Fax Number

Contact Number OTHERS-91344811

EMail Address NOEMAIL

360C ADMIRALTY DRIVE #09-44 SPORE 753360 Address

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** 

**COLLISION - HEAD TO REAR** Type Of Accident

Weather Conditions **CLEAR** DRY Road Surface

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?

NO

NO

2

YES Was any other material or property damaged?

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?

If Yes, against whom?

NO

NO

**Circumstances of Accident** 

REFER TO 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

TOYOTA / VELLFIRE ELEGANCE MOONROOF (AUTO)

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SMF7088R

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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#### Sketch Plan

#### SKETCH PLAN

### **IMPORTANT NOTICE**

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  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 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)

Lunderstand, 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:
  - 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.
  - 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 Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

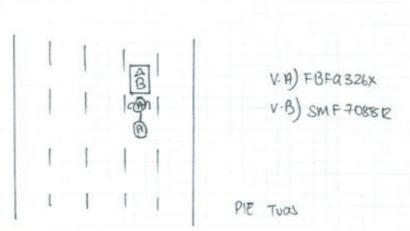
Reporting Centre Personnel's Signature

1

Name: School

### Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I	Was	s travelling	IN	my lane	e along	PIE	Tuas	adter	Eng N	Jeo
Flyove	٧,	suddenly	the	vehicle	# SMF7	1088R	James	rad bri	nke, a	2
Such	I	applied	my	brakes,	however	Mab	ok to	stop 1	n time	,
ny veh	rele	accident	y het	onto	SMF-708	8R 1	rear f	portion.		
As the	s 15	the Anst	time	accelent,	I una	ware	ot ·	the proc	edure,	
hence	I	reported	late	to my	(NSV rai	nce,				
	0-50									

DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Signature (if driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name: گرامس NRIC/FIN No.:

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# **Accident Photo**



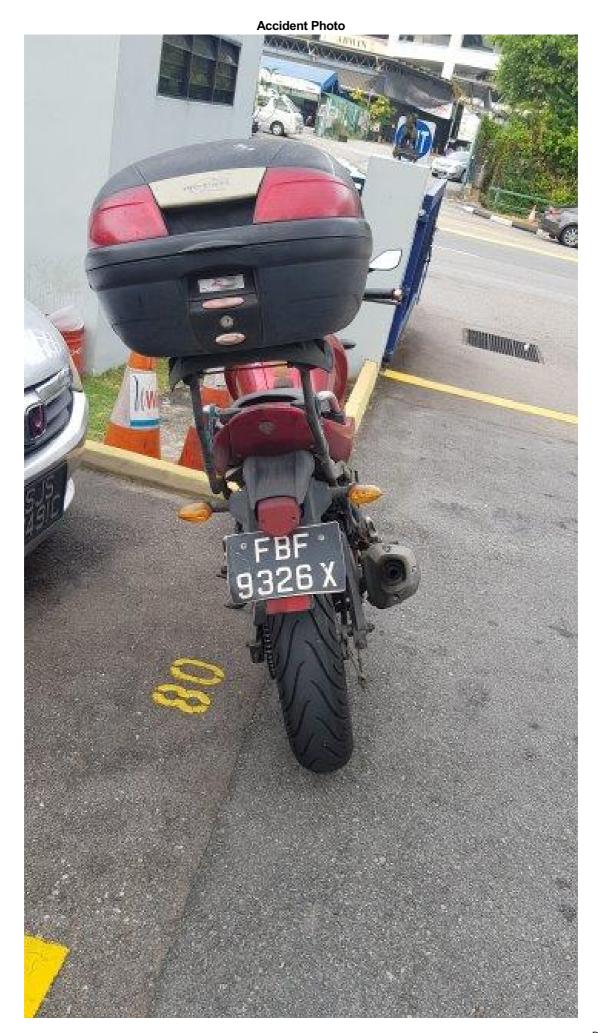






# **Accident Photo**





# **Accident Photo**



#### **Driving License**



# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Motorcycles =< 200 cc 01 Nov 2008
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 01 Nov 2008
of the driver; and other motor vehicles =< 2500kg

Licence No: S7767658I

NP 428A

#### Insurance policy

rage 1 of 1 EF 9206 x

AXA INSURANCE PTE LTD Matter Control of Cont



Original \* No 03375 Policy No. 1st at Renewal SmartDrive Quote Ref.

# MOTOR COVER NOTE

No. AN3171441 ()

- The Forticle (Third Starty Risks and Compressions) Act (Cas 189) Republic of Singapore, or The Forticle (1897) of Malaysia, and Compagnus and the Motor Insurery. Brusan of Singapore stoted 22 Fabrians, 1975, or The Forticle Detween the Motor for Lamport (Malaysia) and the Motor Insurery. Brusan of West Malaysia dated 30 March 1992, or sufficient trevisions to the above Acts and Agreements.

The county of the Schedule has my proposed for integrated in papers at the Marin Vehicle described in the Schedule is hereby (DEC) as VEHCLI under the terms of the Company a main final of Manur Policy applicable thereto for the period mentioned in the proposed care and a proposed in the cover be terminated by the Company is nearly in other in setting in which case the assuming will therefore care and a proposed of the assuming premium otherwise passible for such amorance will be charged for the torne the Company has been an risk.

SCHEDULF

AXA PREMIUM WORKSHOP?	Yes
EXT F 65 (S6)	300
PERSON DE SINSURANCE	FROM: 19-Jan-2019 TO: 18-Jan-2020
With (St)	MARKET VALUE
HORE IN ACHASE	N/A
COVER TYPE	THIRD PARTY, FIRE & THEFT
ENLINE CAPACITY/TONNAGE	15)
CHASSISNO.	ME171C07982018252
English NO.	21C701H243
YEAR OF MANUFACTURE	2011
VEHICLE REGISTRATION NO.	FBF932UX
MAKE AND DESCRIPTION OF VEHICLE	YAMAHA EZIG
They is 1.13	SEE YEE NAM
THE UMPANY	AXA INSURANCE PTE LTD

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BAN HON BROTHERS (AGENCIES) PTE, LTD.

BLK 5022, ANG MO KIO PK 2 #01-19, SINGAPORE 569525 TEL: 6481 7277, 6481 4277 FAX: 8482 4077

AXA INSURANCE PTE LTD

Authorised Signature

Issued by UNDA INSTRANCE AGENCIES PL. 01 Schrödige to 22 23 AM

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