SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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.

7. By the lodgement of this report to the insurers, you hereby conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	27/05/2019 12:01
Date Of Accident	26/05/2019 12:00
Exact Location Of Accident	CHINESE CEMETERY PATH 21 & CHINESE CEMETERY PATH34
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	XD7806R
Insured/Policyholder	
Name Of Registered Owner	GG WASTE MANAGEMENT PTE LTD
Co Reg No	201625537K
Email Address	EVERGREEN_WASTE@LIVE.COM.SG
Mobile Phone No	
Alternative Phone No	Office-68624898
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FV51JJD4RDEA-12.9 D (M)
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA314636
Cover Note Number	
Driver	
Name of Driver	NG TONG KEONG
NRIC No	S8268141H
Date Of Birth	04/02/1982

OUTDOOR

18/05/2012

7 YEARS AND 0 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-98945026

Fax Number

Contact Number

EMail Address NOEMAIL

Address 760 CHOA CHU KANG NORTH 5 #03-161

Postcode 680760

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 - CROSS JUNCTION**

NO

2

NO

NO

YES

NO

1

NO

NO

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

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?

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)

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?

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 NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

GBB6324S Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category Name of Driver TAN ENG WHAT S0716045C NRIC/Passport Number

Contact Number

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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
- 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

with requirements under any regulations, laws or court orders.

Policyholder's Signature

Reg. No.: 201625537K

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

TAM AWARED THAT MY IN SURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

KETCH PLAN	est specimen accounts now of a 1 2 7	
Charere (Magan)	E Horth de >	29a. 00 XD7606P.
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DECLARATION NAGO DE PARTI	culars are true in every respect.	Claim own policy Claim third party Claim OD / FBat other works hop For record purpose Policy No. Insurer HAA Veh.No.

Reg. No.: 201625537K

Policyholder Signature Date & Time:

GBREAK SAMOUSPRACE OF JUST

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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and chinese co	metery path sit. Vachicle involve
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GG WASTE MANAGEMENT PTE LTD 28 TUAS AVENUE 10 SINGAPORE 639148

AXA Insurance Pte Ltd \$\frac{1800 880 4888 (Within Singapore)}{(65) 6880 4888 (International)}\$ (65) 6880 4740 ☑ customer.care@axa.com.sg www.axa.com.sg

Renewal

date 28/03/2019

policy number CV1 / GA314636

your servicing distributor DAGLEN PTE LTD / 00630

your servicing distributor contact 6837 0010

Policy Schedule

Your SmartDrive Commercial Comprehensive

Your policy snapshot

Policyholder name Cover Period of Insurance Business/Profession GG WASTE MANAGEMENT PTE LTD Comprehensive

Policy number ACRA code/UEN no. from 10/04/2019 to 09/04/2020 (both dates inclusive)

CV1/GA314636 201625537K

WASTE MANAGEMENT & RECYCLING

In the business or profession as declared and no other for the purpose of this insurance

Premium breakdown

Gross Premium after 10% NCD SGD 7% GST SGD Final Premium SGD 3,734.58 261.42 3,996.00

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartOrive Commercial Comprehensive Benefits

- Windscreen Repair with Excess
- Loss or Damage
- Legal Liability
- Repairs to be done at a workshop assigned by AXA Insurance Pte Ltd

Coverage for Third Party Working Risk for a limit of \$100,000

Vehicle details

Make & Model of vehicle Vehicle registration number Body type Tonnage

MITSUBISHI FV51JJD4RDEA XD7806R GARBAGE TRUCK 16.18

Year of manufacture Engine number Chassis number

2013 6M70457796 FV51JJA10181

Estimated Market Value Limitation to use Geographical area Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts)

As per Certificate of Insurance Refer to Policy Wordings UNITED OVERSEAS BANK LIMITED

Excess

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



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8268141H





NG TONG KEONG

方 忠 強 CHINESE



Date of birth 04-02-1982

Country/Place of birth

992881415

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

NP 428A

Class 2B Motorcycles =< 200 cc 26 Jan 2007
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 26 Jan 2007
of the driver; and other motor vehicles =< 2500kg
load or vehicles which are constructed to carry
load or passengers and the unladen weight > 2500kg
'Motor vehicles which are not constructed to
carry load and the unladen weight < 7250kg

Licence No: \$8263141H

NUCNA S8268141H

Nationality MALAYSIAN

05-09-2014

APT BLK 760 CHOA CHU KANG NORTH 5 #03-161 SINGAPORE 680760

S8268141H Date: 30(06/2018

9343257































Accident Photo























