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
Date Of Report	29/10/2019 15:15
Date Of Accident	27/10/2019 11:30
Exact Location Of Accident	BISHAN STREET 13
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK4032T
Insured/Policyholder	
Name Of Registered Owner	RANUKA D/O PONNUSWAMY
NRIC No	S1604831C
Email Address	P.RANUKA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97836109
Alternative Phone No	OFFICE-97836109
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	ALTIS
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VA1/GA368681
Cover Note Number	
Driver	

Driver

Name of Driver RANUKA D/O PONNUSWAMY

NRIC No S1604831C

Date Of Birth 22/01/1963

Occupation INDOOR

Date Of Driving Pass 09/03/1993

Driving Experience 26 YEARS AND 7 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-97836109

Fax Number

Contact Number OFFICE-97836109

EMail Address P.RANUKA@GMAIL.COM

BLK 186 YISHUN ST 13 #04337 Address

Postcode 570186 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

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)

2 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?

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

2 Number of Passengers (Including Driver)

Passenger 1 NAME: : NITHYA

> GENDER: : FEMALE

NO

YES

NO

Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN 2

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

Vehicle Registration Number SKX619J

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)

SKETCH PLAN

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- 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:

- 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, or

(ii) for complying with requirements under any regulations, laws or court orders

Policyholder's Signature
Date & Time:

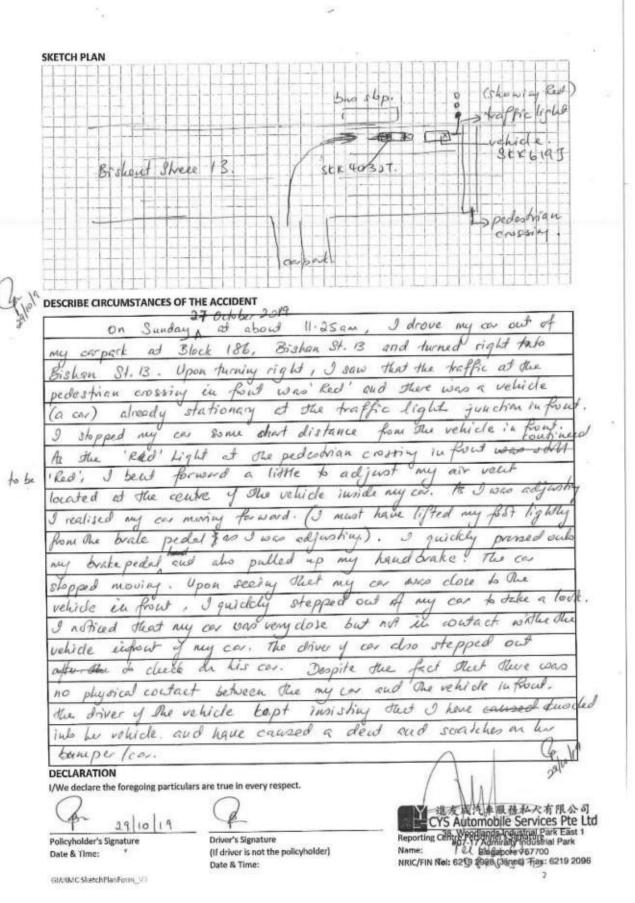
Driver's Signature
(If driver is not the policyholder)
Date & Time:

29/WK

Reporting Centre Singapore 757700 Name: Tel The College Singapore 219 2096 NRIC/FIN No.:

Automobile Services Pte Ltd Woodlands Industrial Park East 1 #07-17 Admirally Industrial Park

GIARMC SketchPlanForm_V3





POLICYHOLDER ACKNOWLEDGEMENT FORM

Da	te:	29/10/19.	To: Owner	of Vehicle	e Number	SKK	4032T	
E	e to	illowing has been advised to	you via your workshop,	CUS	Auto	omobile	through their staff,	
						CIO		
Ple	ase	tick the applicable box if you h						
1	5	You had been advised by the is a Fourteen (14) days claus of occurrence.	workshop that in the ca se whereby the claim mu	se that y	ou wish to de within	claim against the stipulated t	your own policy, there imeframe from the day	
()	You had been advised by the	workshop on the liabilit	y and me	rits of the	case accordin	gly.	
)	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.						
		 if fire damage a However, there if fire damage 	and you claim under you will be <u>no recovery pro</u> and you are claiming a ecovery is not quarant	spect an gainst the	d NCD w Third P	ill be affected. arty, your NC	D will not be affected.	
)	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 farrival time does not include		ive is	-		The estimated	
()	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) company will be carrying ou part that needs to be repla equipment manufacturer (Of	t repairs where any dam ced will be replaced us	aged par ing any	t that can combina	be repaired w	vill be repaired and any	
()	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						
Si	onec	d and acknowledged by:						
	36 6	Ranuke 4 29/10	119					
N:		and signature of policyholde		nd compa	any stam	p (where appl	icable)	
P	Y	orized driver to either the name ted drivers who are permitted in the state of the	நக்குச்சிhe insured Vehic Pte Ltd	de.		r in the case o	of commercial vehicles,	
N	amo	Tel: 6219 2098 (3lines) Fax: 6	personnel including col 219 2396	mpany s	tamp			





AXA Insurance Pte Ltd

2 1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

☑ customer.care@axa.com.sg

www.axa.com.sg

22/06/2018

policy number VA1 / GA368681

account number 14888

Certificate of Insurance

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Read Transport Act. 1987 (Malaysia) -Motor Vehicles (Third Party Risks) Rules, 1950 (Malaysin)

Policy details

Policyhelder namu

Cover

Comprehensive

RANUKA D/O PONNUSWAMY Toyota Prestige

Certificate numbe Chassis number Engine number

GA368681 / 1 MR053REE104154997 1ZRX249038

Plan name NCD applicable Vehicle registration number

30% SKK4032T

Period of Insurance

Finance loan company

from 19/97/2018 to 99/97/2020 (both dates inclusive)

Authorized Drivers

(a) The Policyholder

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

(c) 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 of the motor vehicle is connected to the Policyholder's business
- Use for the carriage of passengers (besides commercial hire or reward) in connection with the Policyholder's business
- Use for social, domestic, and personal purposes

The Policy does not cover:

- Use for commercial hire or reward, or for racing, pace-making, reliability trail, or speed testing
- Use while drawing a trailer, except for the towing of a disabled person's mechanically propelled vehicle

* Limitations rundered inoperative by Section 8 of the Motor Vehicles (Thire-Party Risks and Compossution) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysis), are not to be included under these headings.

EXCESS

Basic Own Damage Excess

Windscreen Excess

SGD 500.00 Not Applicable

Young/Inexperienced driver excess An additional excess of \$2500 (to be added to any excess imposed under the Policy) whilst the Insured MotorCar is being driven by any driver aged below 23 years old and /or has been issued a valid driving license to drive in Singapore for the relevant class of vehicle for less than one year

Young and/ or Inexperienced driver shall mean any person who:

- Is less than 23 years old , and/or

- Has been issued with a valid driving license to drive in Singapore for the relevant class of vehicle for less than 1 year

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

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #81-01

1 of 3

Accident Photo





Accident Photo



Accident Photo











