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 | 09/12/2019 12:21 | | | |
| Date Of Accident | 06/12/2019 16:45 | | | |
| Exact Location Of Accident | ALONG BKE EXIT 8 | | | |
| Country/State of Loss | SINGAPORE | | | |
| DETAILS OF OWN VEHICLE | | | | |
| Vehicle Registration Number | SJA4906L | | | |
| Insured/Policyholder | | | | |
| Name Of Registered Owner | HAFEZ BIN HARON ALJUNIED | | | |
| NRIC No | S7614263G | | | |
| Email Address | NOEMAIL | | | |
| Mobile Phone No | (LOCAL) +65-91052027 | | | |
| Alternative Phone No | OFFICE-91052027 | | | |
| Vehicle Particulars | | | | |
| Manufacturer | TOYOTA | | | |
| Model | AXIO | | | |
| 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 | PRIVATE CAR | | | |
| Insurance Company | | | | |
| Name of Insurance Company | AXA INSURANCE PTE LTD | | | |
| Type Of Coverage | COMPREHENSIVE | | | |
| Fleet Policy | NO | | | |
| Policy Number | GA416866 | | | |
| Cover Note Number | | | | |
| | | | | |

Driver

Name of Driver SHARIFAH SYIFAK BINTE SYED TAHA ALBAR

 NRIC No
 \$8242692B

 Date Of Birth
 16/12/1982

 Occupation
 INDOOR

 Date Of Driving Pass
 04/09/2007

Driving Experience 12 YEARS AND 3 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-81388108

Fax Number
Contact Number

EMail Address NOEMAIL

Address BLK 496B TAMPINES ST 43 #12-231

Postcode 525496

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - -

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident CHAIN COLLISION

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

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

Number of Passengers (Including Driver)

ambulance?

NO

NO

2

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NAME: : SHARIFAH AISHA BTE SYED ABU BAKAR AIKAFF

GENDER: : FEMALE

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

WHILE DRIVING ALONG BKE TOWARDS WOODLANDS AT EXIT 8. VEHICLE C (SKD7990R) IN FRONT OF ME STOPPED, I FOLLOWED SUIT. AFTER A FEW SECONDS, VEHICLE B (PC5745X) HIT THE REAR OF MY VEHICLE. MY CAR SURGED FORWARD RESULTING IN ME HITTING VEHICLE C. THE REAR OF MY VEHICLE IS DAMAGED BADLY.

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 PC5745X

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B

Vehicle Category COMMERCIAL VEHICLE

Name of Driver MOHAMED TAUFIK THANA BIN ABDULLAH

NRIC/Passport Number

Contact Number 87131287

Address Postcode

Insurance Company Name

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number S

Vehicle Make/Model/Colour

Details Of Properties VEHICLE C
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

IMPORTANT NOTICE

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- 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

| Policyholder's Signature / Date & Time | Driver's Signature (If driver is not the policyholder) / Date & Time | Witnessed by Reporting Centre Personnel | |
|--|--|--|--|
| Sketch Plan | · . | | |
| | | | |
| Page 100 Control of the Control of t | | A: SJA 4906L | |
| | B D A.D.C. | > A= SJA 4906L B=PC 5745X | |
| The second secon | | opthogram state in Columbia Columbia Columbia Columbia | |
| | | C = SKD 79901 | |
| | | | |
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Sketch Plan #2 Pg. 1

| Describe Circumstances of the Accident |
|---|
| While driving along BKE towards Woodlands at Exit 8. Vehicle C SKD 7990R, in front of me Stopped. I followed suit. After a few seconds, Vehicle B, PC 5745x, hit the rear of my vehicle. My car surged toward resulting in me hitting Vehicle C. The rear of my vehicle is damaged badly. |
| SKD 7990R, in front of me Stopped. I followed suit. After a |
| few seconds, vehicle B, PC 5745x, hit the rear of my |
| vehicle. My car surged toward resulting in me hitting |
| vehicle C. The rear of my vehicle is damaged badly. |
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| Declaration |
| 1881- de alexa the formating particulars are true in overer respect |
| IWe declare the foregoing particulars are true in every respect. |
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| A |
| Hah/ mixer. |
| (Myror) |
| Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre |
| Time & Time Personnel |
| |
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| |
| AXA |
| Insurance Co. |
| Vehicle NO. 17A 4906 L Date Of Accident 06, (2,17) |
| |
| Reporting Only |
| Own Damage Claim |
| Own Daniege Class |
| Third Party Claim |

ane/T

dirmo fradino

LETTER OF UNDERTAKING

| I/We, HATEZ BINI HARON ALJUNIE | , the owner of vehi | cle no. 54 4906 L | | | | |
|--|-------------------------|-------------------|--|--|--|--|
| My/Our Insurance is under M/s AXA Insurance Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage. | | | | | | |
| My/Our Third Party claim is handle by r | ny/our preferred worksh | op, HANCEP AUTO | | | | |
| | | | | | | |
| Signed and Acknowledge by: | | | | | | |

Identification Card Pg. 1

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$7614263G





HAFEZ BIN HAROON ALJUNIED

Race ARAB

Date of birth 15-05-1976

Country of birth SINGAPORE



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8242692B





SHARIFAH SYIFAK BINTE SYED TAHA ALBAR

شريفه سفاق بنت سيدطه البر

ARAB Date of birth 16-12-1982 Country/Place of birth SINGAPORE



Driving License Pg. 1

Date of lasue
11-08-2006

APT BLK 496B TAMPINES STREET 43 #12-231
SINGAPORE 525498
S7614263G
19/01/2014

Date of Issue
29 -08 - 2013

APT BLK 496B TAMPINES STREET 43 #12 - 231
SINGAPORE 525496
S8242692B

19/01/2014

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

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passangers, exclusive 04 Sep 2007 of the driver; and other motor vehicles =< 2500kg

Licence No: S8242692B





AXA Insurance Pte Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

🖾 customer.care@axe.com.sg

www.axa.com.sg

Certificate of Insurance

07900

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960-Read Transport Act. 1987 (Malaysta -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name Cover

HAFEZ BIN HARDON ALJUNIED Comprehensive

Certificate number Chassis number Engine number

NZE1416054843 1NZC783176

Plan name NCD applicable Vehicle registration number

Period of Insurance

Peace 10%

SJA490SL

from 12,/12/2018 to 11/12/2018 (both dates inclusive)

Finance loan company MAYBANK

Persons or classes of persons entitled to drive*

(a) The Policyholder

(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

FXCESS

Basic Own Damage Excess

SGD 400.00

Windscreen Excess

SGD 100.00

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

Nil

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 Central #B1-01

1 of 3









Accident Photo



Accident Photo







Accident Photo

