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
09/12/2019 12:19
07/12/2019 17:30
TAKASHIMAYA PICK UP POINT
SINGAPORE
DETAILS OF OWN VEHICLE
SMR5555J
WANG DONGFENG
G1855862P
ALVINANG1993@GMAIL.COM
(LOCAL) +65-96475408
OFFICE-88556555
ТОУОТА
VELLFIRE-2.4 DBA-ANH20W (A)
NORMAL USAGE
NO
REPORTING ONLY
PRIVATE CAR
AXA INSURANCE PTE LTD
COMPREHENSIVE
NO
CN013317

Driver

Name of Driver ANG CHUN KIAT ALVIN

NRIC No S9320982F
Date Of Birth 14/06/1993
Occupation INDOOR
Date Of Driving Pass 10/12/2012

Driving Experience 6 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96475408

Fax Number
Contact Number

EMail Address ALVINANG1993@GMAIL.COM

BLK 129A CANBERRA ST #05-644 Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PAID DRIVER

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 **RAINING** Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

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)

2

Passenger 1

NAME: : WANG DONG FENG

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?

NO

NO

Circumstances of Accident

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

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 SLK7707Z

Vehicle Make/Model/Colour MERCEDES E200

Details Of Properties LEFT BUMPER IN BETWEEN LEFT REAR

Vehicle Category PRIVATE CAR KOH YEE WEI Name of Driver NRIC/Passport Number S7929859Z Contact Number 97480547

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

SKETCH PLAN

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- 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 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.
- 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' 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		
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Sketch Plan #2 Pg. 1

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	1/2 99/12/11 11-58 a.	m " //
Policyholder's Signature / Date &	Driver's Signature (if driver is not the policyholder) / Date	
filipyholder's Signature / Dale o	& Time	Personnel

LTA LETTER Pg. 1



10 Sin Ming Drive Singapore 575701 www.lta.gov.sg

29 Nov 2019

Our ref 2911190203N061009732

What You Need To Do:

You must show the new number SMR5555J on your vehicle by 02 Dec 2019.

WANG DONGFENG 50 MARINE PARADE ROAD #14-12 SINGAPORE 449307

Dear Sir/Madam

You Have Successfully Replaced Vehicle Registration No. SME2243Y With SMR5555J

You have successfully replaced your vehicle registration number. The vehicle, whose previous number was SME2243Y, now has the number SMR5555J.

The vehicle details after the transaction are:

Transaction No.

: 20191129150436831106

Vehicle Registration

: SMR5555J (Previously SME2243Y)

No.

Vehicle Make

: TOYOTA

Vehicle Model

: VELLFIRE ELEGANCE

MOONROOF (AUTO)

Chassis No.

: JTNGF3DH208017197

Engine No./ Motor

: 2ARJ116751 / -

No.

Please change the number plates on this vehicle to show SMR5555J by 02 Dec 2019. Otherwise, it is an offence and the penalty is a fine of up to \$2,000 or imprisonment of up to 6 months, or both.

A.INSURANCE PTE LTD

& Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@axa.com.sg



Original

LAURENCE

Agent Code: 14885

Policy No.(if any): BSTU034

New Business

SmartDrive Quote Ref:

\$4986.45

MOTOR COVER NOTE

No. CN013317

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LYD
INSURED	WANG DONGFENG
MAKE AND DESCRIPTION OF VEHICLE	TOYOTA VELLFIRE 2.5
VEHICLE REGISTRATION NO.	SmR SSS J
YEAR OF MANUFACTURE	2018
ENGINE NO.	2ARJ116751
CHASSIS NO.	JTNGF3DH208017197
ENGINE CAPACITY/TONNAGE	2494
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	NIL
VALUE (S\$)	AS PER MARKET VALUE
PERIOD OF INSURANCE	FROM: 13/09/2018 TO: 12/09/2020
EXCESS (S\$)	600.00
AXA PREMIUM WORKSHOP?	NO (BORNEO MOTORS (S) PTE LTD)

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by INCHCAPE AUTOMATIVE SERVICES PTE. LTD. on 12/09/2018 4:51 pm

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum of S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
- An administrative fee of S\$26.75 (inclusive of GST) will be charged:
 - Cover note issued and cancelled before inception.
 - Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid. For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

MTR/C/NOTE/V01/03

Identification Card Pg. 1

























