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	25/02/2020 16:30
Date Of Accident	25/02/2020 08:20
Exact Location Of Accident	TAMPINES ST-23
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBM9751P
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD HAFIZ BIN ARIFFIN
NRIC No	S8602520E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96771666
Alternative Phone No	OFFICE-96771666
Vehicle Particulars	
Manufacturer	HONDA
Model	CB400SF MANUAL
Exact Purpose for which vehicle was being used at time of accident	GOING TO WORK
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	AN3181058
Cover Note Number	
Driver	

Name of Driver MUHAMMAD HAFIZ BIN ARIFFIN

NRIC No S8602520E

Date Of Birth 19/01/1986

Occupation OUTDOOR

Date Of Driving Pass 06/03/2014

Driving Experience 5 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96771666

Fax Number

Contact Number OFFICE-96771666

EMail Address NOEMAIL

Address APT BLK 231 TAMPINES ST-21 #02-661 SINGAPORE

Postcode 521231

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 SIDE SWIPE
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

ambulance?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

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

PLEASE 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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties CAR 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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SGA5855D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

SKETCH PLAN

IMPORTANT NOTICE

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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:

- (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
- (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: 25/2/

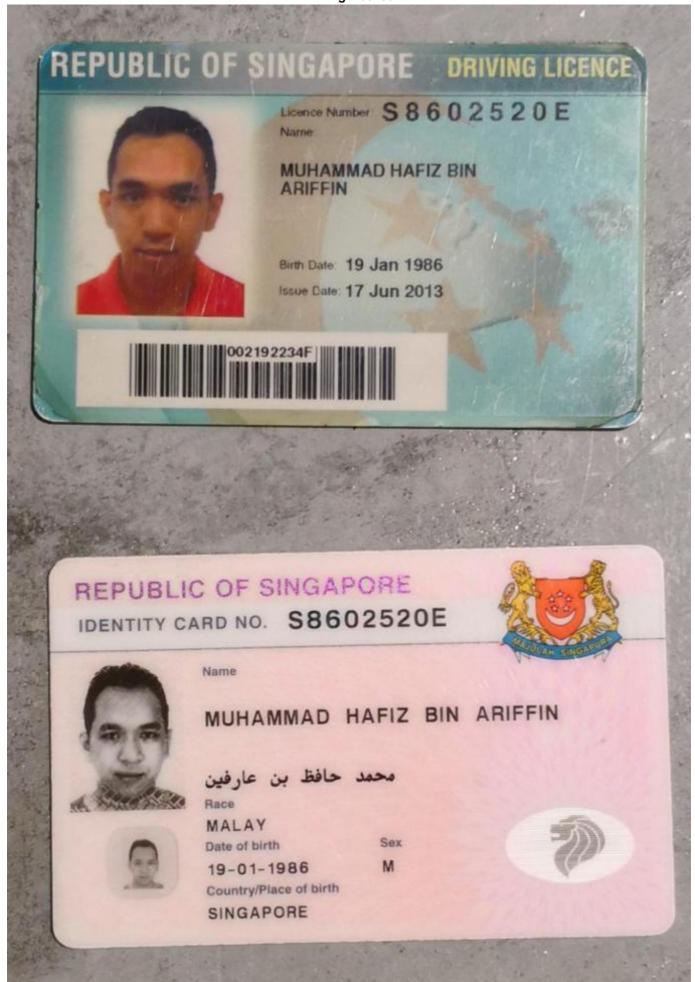
Driver's Signature
(If driver is not the policyholder)
Date & Time: 25/2/20

Reporting Centre Personnel's Signature Name: LILIAN CHIA

1EL: 6744 7753

NRIC/FIN No.: 58001094Z

KETCH PLAN	THE CHARLES	
		1 5am 97510
		A-FBC 11311
	-	4-FBM9751P B-SGA 58551
		0 2
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SCRIBE CIRCUMSTAN	CES OF THE ACCIDENT	
W. acht	1 2022 1 2	I want man be 4 insting
on the 25/2/20	ter in between car B and carCb.	To work hear the spectron
was at the cen	ter in between car B and carCb.	WARN THE REPORT OF
he Car Cyside	Swipe me and I lost my balance o	and hit the Car B.
		10T0A A
ECLARATION	particulars are true in every respect.	(30)
		(2) TEL: \2\ U
		Z (6744 7753) m
	/r	(15 L 15) m
No declare the foregoing	Driver's Signature	Reporting Centre Personnel's Signature
ECLARATION We declare the foregoing slicyholder's Signatur ate & Time: 25/2/20	Driver's Signature	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES) EFFECTIVE DATE 17 Dec 2019 Motorcycles between 201 CC and 400 CC 05 Mar 2014 Class 2A Motorcycles =< 200 CC Motor cars =< 3000 kg with =< 7 passengers, exclusive 17 Jun 2013 Class 2B of the driver; and motor tractors/vehicles =< 2500 kg Class 3 16 Dec 2016 Omnibuses Class 4A S / No.9000346227 S8602520E Licence No: S8602520E NP 428A 5994012 NRIC No. S8602520E Date of issue 18-07-2018 Address APT BLK 231 TAMPINES STREET 21 #02-661 SINGAPORE 521231

AXA Insurance Motor Cover Notes System

AXA INSURANCE PTE LTD Way, #24-01 AXA Tower Singapore 068811 Castomer Service Centre #B1-01 Tel: 6338 7288 Fax: 6338 2522 Website: www.axa.com.sg GST Registration Number: 199903512M



Original

A/c No: 03375

Policy No (If any):

New Business

SmartDrive Quote Ref.

MOTOR COVER NOTE

No. AN3181058 ()

- 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 LTD
INSURED	MUHAMMAD HAFIZ BIN ARIFFIN
MAKE AND DESCRIPTION OF VEHICLE	HONDA CB400 SUPERF
VEHICLE REGISTRATION NO.	FBM9751P
YEAR OF MANUFACTURE	2018
ENGINE NO.	NC42E1400482
CHASSIS NO.	NC421900483
ENGINE CAPACITY/TONNAGE	399
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	WING FUAT PTE LTD
VALUE (S\$)	MARKET VALUE
PERIOD OF INSURANCE	FROM: 6-Jan-2020 TO: 5-Jan-2021
EXCESS (S\$)	500
AXA PREMIUM WORKSHOP?	Yes

JUNE FERRENY 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

ANDA INSURANCE AGENCIES PL on 6-Jan-2020 12:53:08 PM Issued by

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

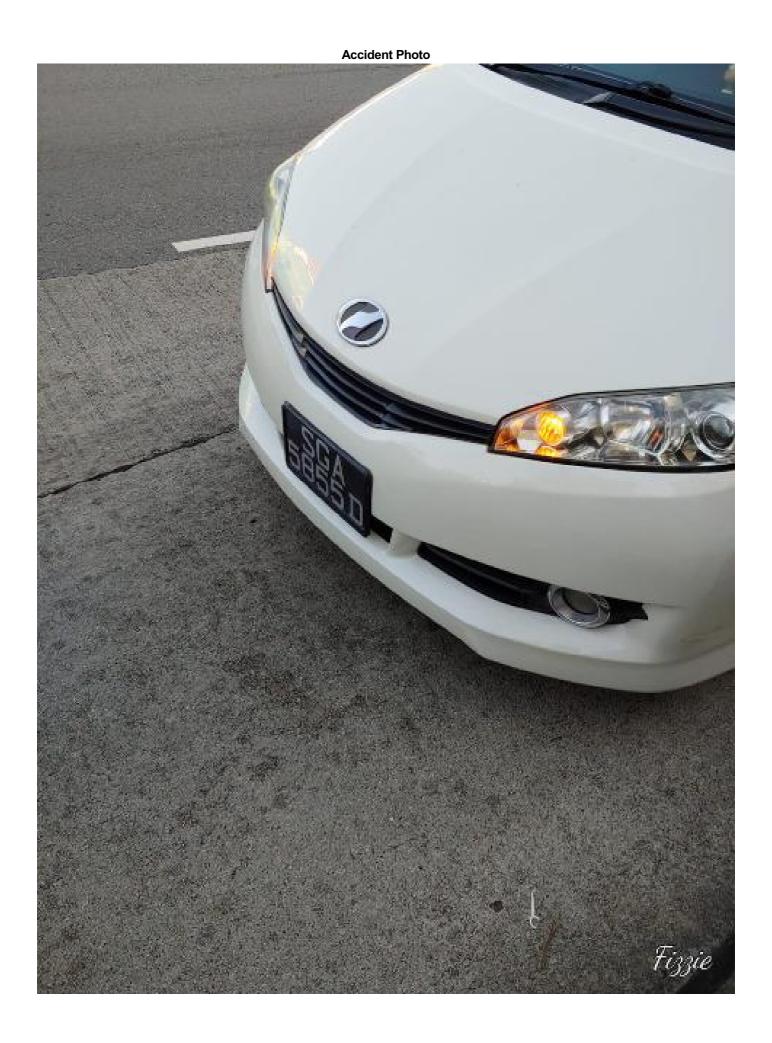
- Premium for time on risk will be charged subject to minimum S\$53.50 (inclusive of GST)
- if the policy is cancelled after the inception date.
- An administrative fee of \$26.75 (inclusive of GST) will be charged:
 - Cover note issued and cancelled before inception.
 - Retaining the old registration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

PREMIUM WARRANTY

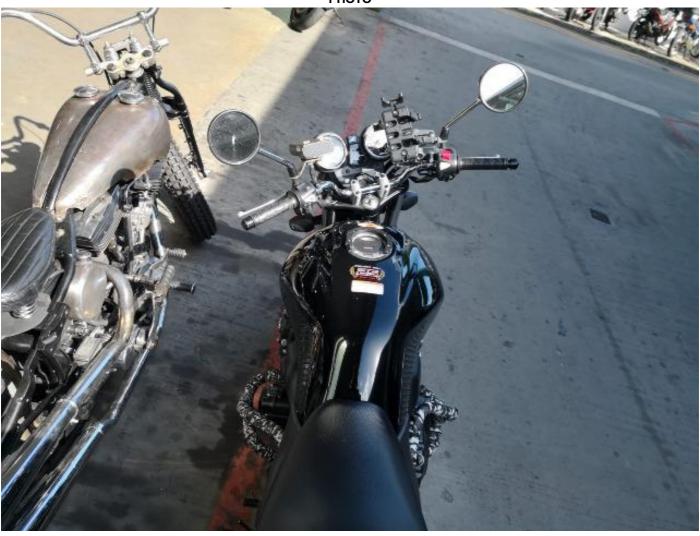
For Individual Customers: Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

For Non-Individual Customers.

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



РНОТО





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