

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability
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 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	19/06/2015 09:16
Date Of Accident	20/01/2015 16:30
Exact Location Of Accident	TECK WHYE LANE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ1493J
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Insured/Policyholder

Name Of Registered Owner	PACIFIC VAN & TRUCK RENTAL LLP
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-63450805

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
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	Commercial Vehicle

Insurance Company

Name of Insurance Company	AXA Insurance Singapore Pte Ltd
Type Of Coverage	Third Party
Fleet Policy	No
Policy Number	P1560685
Cover Note Number	

Driver

Name of Driver	MOHMAD BIN HASSAN
NRIC No	S1773732E
Date Of Birth	12/11/1966
Occupation	Indoor
Date Of Driving Pass	18/02/2008
Driving Experience	6 Years And 11 Months
Gender	Male
Mobile Number	(Local) +65-83030137
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	17B LORONG BUANGKOK
Postcode	547564
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	Side Swipe- Same Direction
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	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

VEHICLE B IN FRONT SUDDENLY JAM BRAKE. I TRY TO AVOID BY SWERVING MY VEHICLE TO THE RIGHT. WHEN I OVERTAKE VEHICLE B. THE DRIVER HONK AT ME. SO, I STOP. THE DRIVER OF VEHICLE B SAID I HAD HIT ONTO IT'S REAR RH PORTION. I CANNOT REMEMBER WHETHER I HAD HIT ONTO HIS VEHICLE. THERE ARE SLIGHT DAMAGES ON VEHICLE B REAR RH AND MY FRONT LH. BUT IT IS OLD DAMAGE.

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKP3515Y
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan

SKETCH PLAN

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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.

Pacific Van & Truck Rental LLP

Co. Reg. No: T14LL2713H

No. 52 Joo Chiat Road

Singapore 427374

Tel: 6440 4428 Fax: 6345 8516

Email: panoac@leasing22@yahoo.com.sg

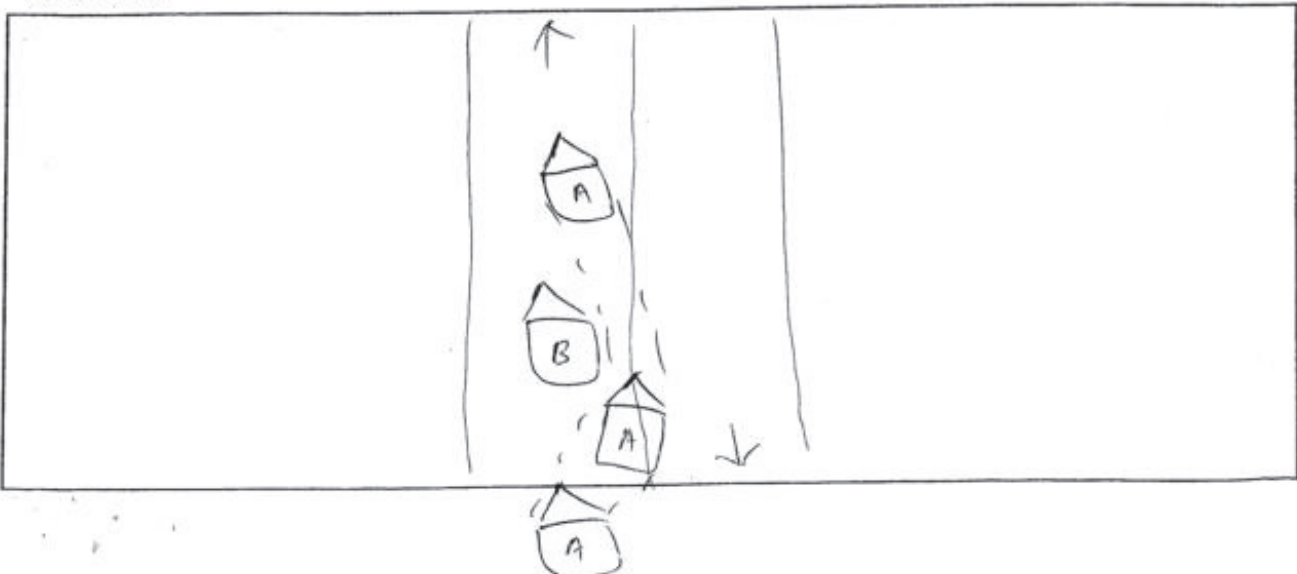
Handwritten signature

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Sketch Plan #2

Describe Circumstances of the Accident

Vehicle B in front suddenly jam brake, I try to avoid by steering my vehicle to the right, when I overtake vehicle B, the driver looks at me, so I stop. The driver of vehicle B said I had hit onto it rear RH portion. I cannot remember whether I had hit onto his vehicle. There are slight damages on of vehicle B rear RH and my front LH. But it is old damages.

Declaration

We declare the foregoing particulars are true in every respect.

PACIFIC VAN & TRUCK RENTAL LLP

Co. Reg. No: T14LL2713H

No. 52 Joo Chiat Road

Singapore 427374

Tel: 6440 4428 Fax: 6345 8516

Policyholder's Signature / Date &

Time

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

Witnessed by Reporting Centre
Personnel

Insurance Co. AXA

Vehicle NO. 92 1493J Date Of Accident 20, 01, 2015

☒ Reporting Only

☐ Own Damage Claim

☐ Third Party Claim

Sketch Plan #3



Date: 19/06/2015

To: Owner of Vehicle Number: 9721493J

The following has been advised to you via your workshop, _____ through their staff, _____.

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☒ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☒ 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.
- ☐ 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.
- ☐ The Estimation waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☐ 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, your Insurance company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your insurance company will be carrying out repairs using any combination of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.

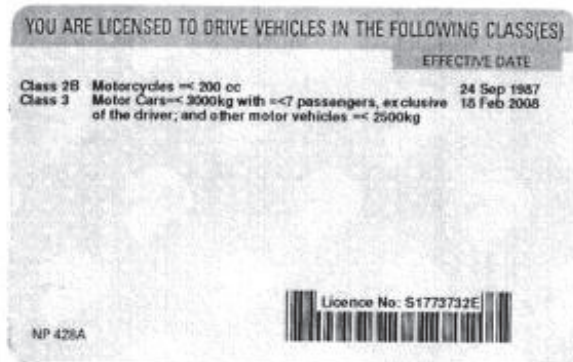
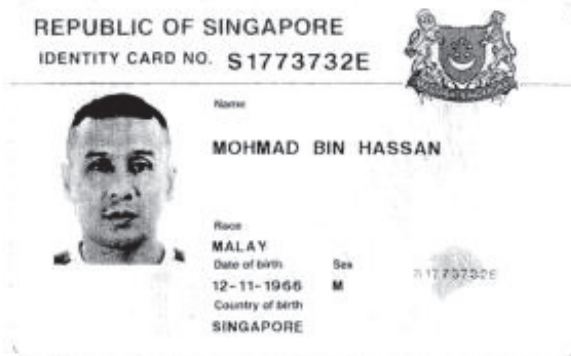
Signed and acknowledge by:

Heow

Name and signature of policyholder/ authorised driver

_____ame and signature of workshop personnel including company stamp.

Sketch Plan #4



Sketch Plan #5

AXA INSURANCE SINGAPORE PTE LTD
 100, Robinson Road, #27-01
 Raffles Service Centre #B1-01
 Tel: (65) 63387288 Fax: (65) 63382522
 Website: www.axa.com.sg
 ST Registration Number: M2-0009922-2
 customer.service@axa.com.sg



CERTIFICATE OF INSURANCE

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

CERTIFICATE NO. : VFX/P1560685 Account No. : 05185
 Coverage : Third Party Only
 Sum Insured : NIL
 Name of Policy Holder : PACIFIC VAN & TRUCK RENTAL LLP
 Vehicle Registration No. : GZ1493J
 Period of Insurance : From 13/12/2014 To 13/11/2015 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the hirer'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.

LIMITATIONS AS TO USE*

- (a) Use for the carriage of passengers or goods in connection with the hirer's business.
 - (b) Use for social domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
- The Policy does not cover
- (a) Use for racing, pace making, reliability trial or speed-testing
 - (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle
 - (c) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

(09)

EXCESS :

Sect II-Any Authorised Driver : SGD 2,000.00

* 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.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA INSURANCE SINGAPORE PTE LTD

Authorized Signature

Issued by - SGPAGPH on 15/12/2014

IMPORTANT :

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).

FOR INDIVIDUAL CUSTOMERS : Cover Under the policy is valid only upon the payment of the full premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS : Please refer to the Premium Warranty Clause on the policy

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

