SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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.	ionic to the dronving of the report action control and to copied of the report boing made available
	ACCIDENT STATEMENT
Date Of Report	01/06/2020 11:36
Date Of Accident	30/05/2020 15:15
Exact Location Of Accident	CAR PARK OF BLK 601-602 HOUGANG AVE 4
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJY3925L
Insured/Policyholder	
Name Of Registered Owner	ENRICH AUTO LEASING
Co Reg No	53366937E
Email Address	ADMIN@CRAFTLEASING.COM
Mobile Phone No	(LOCAL) +65-91063529
Alternative Phone No	OFFICE-64695545
Vehicle Particulars	
Manufacturer	SUZUKI
Model	SX4 HATCHBACK 1.6 AT
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
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 HIRE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	P2194500
Cover Note Number	09/10/2019 - 08/10/2020
Driver	
Name of Driver	DORAY CHRISTIAN JEEVAN
NRIC No	S1516122A
Date Of Birth	21/12/1961
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2001
Driving Experience	18 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91063529
Fax Number	

DORAYCJ21@GMAIL.COM

BLK 602 HOUGANG AVE 4 #05-239 Address

Postcode

Was driver an employee of the Insured's Company NO

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

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident **COLLIDED INTO PROPERTY**

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

2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

YES 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)

Passenger 1

NAME: : TAMIL MANI

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?

NO

NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

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 SH9126U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

LIM WAN TIONG Name of Driver NRIC/Passport Number S1397601E

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 21

Sketch Plan Pg. 1

Date of accident: 30 50 50 50 50 50 50 50	Date of accident: 30/05/2027 Time: 15/15/1 Location	ion: Capat of BIE GOI - GOD Howgay Avel
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 30 5 2020 at about 1515 hrs, 1 drove into the carpark of my house at 1316 602 Howsons Are 4, while at the band a Taxk (PSH 91264) driving on the opposite Land a Taxk (PSH 91264) driving on the opposite Land had and my vehicle (SSY 3725 L) Front Right Portion Claim ODTP at Ah Lim Motor © Claim ODTP to other workshop Reporting Only Remarks: Please forward a copy of my office acident report to: My workshop: Opposite Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.		Vehicle C:
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you own policy. Kindly check with your own insurer for more information. DECLARATION	Email address : V	
I/We declare the foregoing particulars are true in every respect.	DECLARATION	
and the second of the second o	I/We design the foregoing particulars are true in every respect.	(v) P
(E(TEL: 0AGOF545)))	(I (TEL:)))) ((AGO) 5545)) ((AGO) 5545) (
Policy orders Signature Driver's Signature Reporting Centre Personnel's Signature	2 640300	Reporting Centre Personnel's Signature
Date & Time: (If driver is not the policyholder) Name: Date & Time: NRIC/FIN No.:	Date & Time: (If driver is not the policyholder)	Name:

-GIARMC State (PlanForm_V3)

Page 3 of 21

AH LIM MOTOR COMPANY

Sketch Plan Pg. 2

SKETCH PLAN

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 as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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 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:
 - 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:

/ TEL: .64695545

- (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:

Triver's Signature
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

INS CERT Pg. 1

AXA INSURANCE PTE LTD 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Fax:-Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@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/P2194500 Account No. : 05522

Coverage : Third Party Only

Sum Insured : NIL

Name of Policy Holder : ENRICH AUTO LEASING

Vehicle Registration No. : SJY3925L

Period of Insurance : From 09/10/2019 To 08/10/2020 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Named Driver(s) as stated in the Policy

1. ANY AUTHORISED DRIVER

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 ${\tt Policyholder's}$ business.
- (b) Use for social, domestic and pleasure purposes.
- 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

(04)

EXCESS :

Sect II-Used In Singapore Only : SGD 1,500.00

* 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 PTE LTD

Authorized Signature

Issued by - SGOSFBA2 on 30/09/2019

IMPORTANT

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

ENRICH AUTO LEASING

210 TURF CLUB ROAD LOT A3 THE GRANDSTAND SINGAPORE 287995

TEL / FAX : 6469 5545 / 6469 0040 ROC NO : 53366937E

EMAIL : ericler78@hotmail.com

To Whom It May Concern, Accident involving my vehicle no. $\frac{300000}{30000}$ (date) with SH91XU (other vehicle no) along apart of Owner of vehicle no. <u>SJYYJSU</u> am aware of the accident of my vehicle on 30/672000 (Date) while car was driven by Doray Christian Jeevan I hereby, authorise him / her to make the report. Date: To fill in if there is a OD claim I am aware of the circumstances and agreeable to claim my own insurance for the above accident. Name

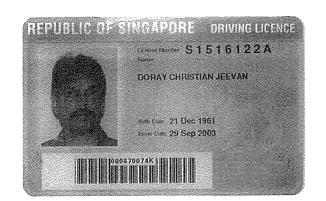
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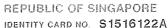


210 Turf Club Road, Lot C15A Car Mall The Grandstand, Singapore 287995 Tel: 6484 4115 Fax: 6468 8156 Email: admin@craftleasing.com

	7	<u>/EHICLE RENTAL AGR</u>	EEMENT		
(Owner)					
Name	: Craft Leasing Pte I	_td	UEN No.	: 2017183	81N
Address		d, Lot C15A Car Mall, The Grandsta c: 6468 8156, Email: admin@craftlea		37995	
(Hirer)					· · · · · · · · · · · · · · · · ·
Name	: DORAY CHRISTIA	N JEEVAN S1516122A	NRIC No.	: S151612	2A
Address	BLK 602 HOUGAN 5 530602	IG AVENUE 4 #05-239 Singapore	Contact No.	: 9106 352	29
Email	:				
Relief Driv	/er)				*
Name	:		NRIC	:	
Address	:		Contact No.	:	
DESCI	RIPTION OF VEHICLE	E ("The Vehicle")			
Make/ N			gistration No.	: SJY3925L SUZ	LIKI SX4
Engine		Chassis No	~	: JSAGYA21S00	
 Peri Ren 	ek (payable in advance) ("Due	to 18-09-2019 Per Day ("the Rental") for pe Date"). Late Payment will be charg the Hirer shall pay The Owner a secur	ed at \$50 for eac	h and every payment	
4. Upo (her		EHICLE (Please tick the foli	owing:)		
4. Upo (her		1	owing :)		
4. Upo (her	OSE OF RENTING VE	1	owing :)		
4. Upo (her	OSE OF RENTING VE	1	owing :)		
4. Upo (her	Personal Usage Private Hire Usage	1	owing :)		
4. Upo (her	Personal Usage Private Hire Usage	1	owing :)	The Hirer's Sign	ature

Driving License Pg. 1









DORAY CHRISTIAN JEEVAN

INDIAN 21-12-1961

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135 86 127 4

Land Transport

Country/Prace of birth SINGAPORE

STRICTLY FOR WORKSHOP USAGE

th: 91063529 Event. doray CJ 21 @ great-COM - Weather Swed

VOCATIONAL LICENCE Y Licence No : \$1516122A Name: DORAY CHRISTIAN JEEVAN

Please visit www.lta.gov.sg to check the status of this vocational licence

STRICTLY FOR WORKSHOP USAGE USE FOR ACCIDENT

6325284

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES, EPORTING INDIVIDUAL PASS DATE Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

NRIC No. S1516122A

APT BLK 602 HOUGANG AVENUE 4 #05-239 SINGAPORE 530602

Date of issue 07-11-2019

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- No violes
- Head Coillanon
- No injury
I Passenger - Tamil Mari
Ferrall

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA 10 Sin Ming Drive, Singapore 575701.

Description PRIVATE HIRE CAR VL BUS VL BUS ATTENDANT 13 03 04

25/06/2018 09/05/2011 09/05/2011

Issue Date

ORKSHOP USAGE THOUNT

usii Rota REPORTING ONLY





