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	18/08/2020 15:10		
Date Of Accident	17/08/2020 11:30		
Exact Location Of Accident	JUNCTION OF WHO THO AVE & JLN KEMBOJA		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	YM6807K		
Insured/Policyholder			
Name Of Registered Owner	FAST FROZEN FOOD		
Co Reg No	51969600W		
Email Address	FONGYEE.CHAN@FFF.SG		
Mobile Phone No			
Alternative Phone No	OFFICE-65587777		
Vehicle Particulars			
Manufacturer	MITSUBISHI		
Model	FE83BE6SRDEA-3.0 D (A)		
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE		
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 PTE LTD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	GA371242		
Cover Note Number			
Driver			
Name of Driver	LVE YON SANG		

 Name of Driver
 LYE YON SANG

 NRIC No
 G7273106P

 Date Of Birth
 27/11/1979

 Occupation
 OUTDOOR

 Date Of Driving Pass
 15/12/2008

Driving Experience 11 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94301168

Fax Number

Contact Number

EMail Address NOEMAIL

Address N/A

Postcode

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 NO COLLISION
Weather Conditions DRIZZLING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

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

ON 17/08/2020 @ 1130 HRS. WHILE I WAS TURNING FROM WAN THO AVE INTO JLN KEMBOJA. THE ROAD SIDE HAVE STATIONARY VEHICLE. I THEN STOPPED AT ALONG THE ROAD AND CHECK FOR THE ON COMING VEHICLE. WHEN THE TRAFFIC IS CLEAR. I WANTED TURN OUT TO THE OPPOSITE ROAD. SUDDENLY VEHICLE B COME FROM BEHIND COLLIDED ONTO MY VEHICLE FRONT RIGHT PORTION. NO ONE WAS INJURED.

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 SJT2138A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver BALACHANDAR S/O THANAGOPAL

NRIC/Passport Number S7503275G Contact Number 91165834

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 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.
- 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:
 - (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.

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

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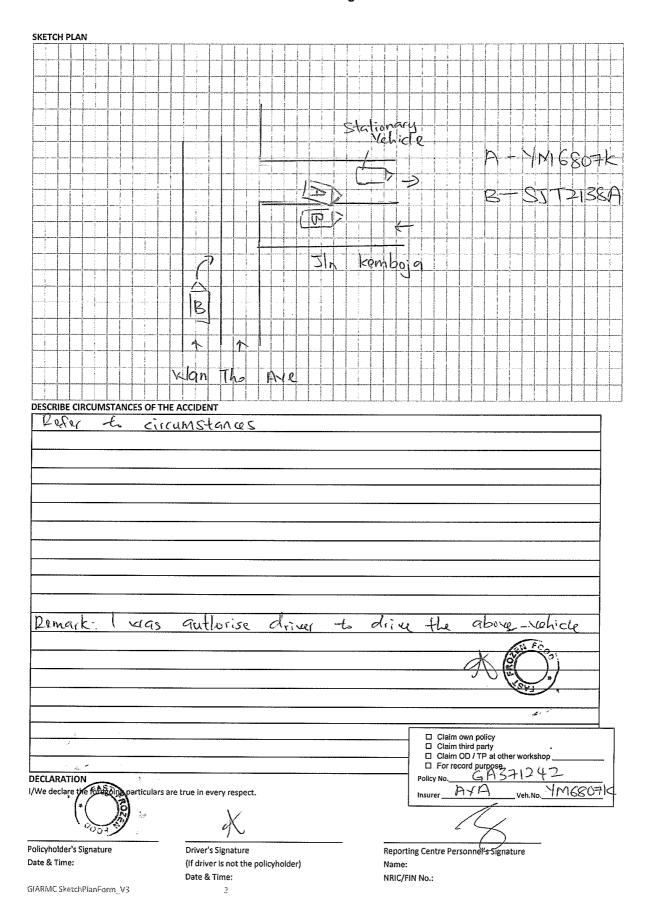
Policyholder's Signature Date & Time: Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Sketch Plan Pg. 2



2. Jul. 2020 10:12

No. 0434 P. 5/9







AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore)
(65) 6860 4888 (International)

(65) 6880 4740

customer.care@axa.com.sg

date 26/06/2020

policy number CV2 / GA371242

Certificate of Insurance

Companial Values: (Third Fairy Walls and Companisation) on (Chapter 1983). Commercial Values: Chird Fairy Sala and Companisation) Rose: 1980. Issued Transport For (Chapter 1984). Commercial Values: 1980. Issued Transport For (Chapter 1984). Lates (Malaysia).

Policy details

Pojojpolderiume Color Color Most	FAST FROZEN FOOD Third Party Only 48442A42492	Continent mumber NGD Chessis our bo	GA371242 / 1 20% FEF3EEA10053
vehicle Registration maker	үм6807К		
Period of insurance	from 10/07/2020 to 05/07/2021 (body date	es (m. 11864)	

Period at the service from 19/ Sum testing Will France Lasa Company Mil

Persons or classes of persons entitled to drive

Any person who is driving our the Policyhoider's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other level or regulations to drive the Motor Vehicle or has been so permitted and is not degreefed by other of a Court of Law or by teason of any appointment or regulations in that benefit from driving the Motor Vehicle.

Limitations as to use?

- (a) Use in connection with the Policyholder's business.
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (c) Use for social, domestic and pleasure purposes.

The Policy does not cover

- (a) Use for the hire or reward or for racing, pace-making, reflability trail or speed testing.
- (b) Use whilst drawing a trailer except the towing of anyone disabled mechanically propelled vehicle.

A Liquiations, residence increasing by Section is of the Commercial National State Barry Notice and Comparation For Chapter List) and Section 94 or the Breat Branspar Act 1980 (Malaysia), are not to be included under these headings.

Excess

7.

An enditional erices is applicable as follows:
Additional All Culius excess of \$2,000,00 is amplicable for any comed/unracised diversiving a) is 18 years old to 21 years old and/for to is 71 years old and above and/or of your driving experience of less than 1 years on the relocant diseases of driving because

1013

Identification Card Pg. 2

