MSME20069673 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 17/08/2020 12:59 SUBMITTED BY: Wen Ying

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	17/08/2020 12:59		
Date Of Accident	16/08/2020 12:45		
Exact Location Of Accident	THE CLEARWATER (CONDO) INSIDE CONDO COMPOUND.		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SJK1125R		
Insured/Policyholder			
Name Of Registered Owner	DEVINDAR SINGH S/O DIDAR SINGH		
NRIC No	SXXXX266F		
Email Address	DEVJOHL71@GMAIL.COM		
Mobile Phone No	(LOCAL) +65-90064609		
Alternative Phone No	OFFICE-90064609		
Vehicle Particulars			
Manufacturer	MERCEDES-BENZ		
Model	GLC250		
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	THIRD PARTY		
Vehicle Category	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	AXA INSURANCE PTE LTD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	GA537040		
Cover Note Number			

Driver

Name of Driver JAGTAR SINGH BAL S/O KHEWAN SINGH

NRIC No SXXXX704J
Date Of Birth 03/07/1957
Occupation INDOOR
Date Of Driving Pass 24/04/2003

Driving Experience 17 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90068451

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 40 TANGLIN HALT RD #06-157

Postcode 143040

Was driver an employee of the Insured's Company NO

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

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident **COLLISION - CHANGE/CROSS LANE**

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

Number of Passengers (Including Driver)

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NO

2

NAME: : DEVINDAR SINGH S/O DIDAR SINGH

GENDER: : MALE

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

I WAS GOING STRAIGHT, VEHICLE B FROM MY LEFT WITHOUT STOP AND GIVE WAY AND HIT MY VEHICLE LEFT CENTRE PORTION, SECURITY GUARD ALSO SEE HIT ACCIDENT AND TAKE PHOTOS.

Attachment(s)

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera? Was there any audio recorded? NO

Details of Witness 1

Name CONDO SECURITY GUARD

Phone Number **Email Address**

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHA3745P

Vehicle Make/Model/Colour

Details Of Properties VEH B Vehicle Category TAXI

NEO HAN TECK Name of Driver

NRIC/Passport Number

Contact Number

Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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 interested parties.
- 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:
 - (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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

der's Signature

Date & Time:

LETTER OF UNDERTAKING

I/We,	Devindar 8	angh Slop	the owner of vehicle n	05]	K 1125K
claim	under my/our Policy	y or against the Insurance Pte L	arance Pte Ltd , I/we shall of Third Party and if the formated with all relevant facts and or discovery of damage.	er snan	Submit
Му/О	ur Third Party clain	n is handle by m	y/our preferred workshop,	Sinte	MOTOR.
Signe	d and Acknowledge	by:			
Nric r	no. & signature of p	olicyholder	Company stamp	Date	

1 JAGTAR SINGH BAL S/O KHEWANSINGIT.

NRIC# S2665704 J, DRIVER OF SJK1125R

ON 16 AUGUST, AMMORIZE TO DEVINDER SINGH

S/O SM. DIDAR SINGH, NRIC#7175266F, THE

THIS ACCIDENT REPORT OF 16th AUGUST 2020

VIEW.

O





DEVINDAR SINGH S/O DIDAR SINGH BLK 2 BEDOK RESERVOIR VIEW #15-02 SINGAPORE 479232

New business

AXA Insurance Pte Ltd

(65) 6880 4740

⊠ customer.care@axa.com.sg www.axa.com.sg

19/03/2020

your servicing distributor SPEEDO CAPITAL PTE LTD / 04139

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

your servicing distributor contact 6684 7757-YUKI

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name Cover

DEVINDAR SINGH S/O DIDAR SINGH Policy number

FIN / NRIC

VA1 / GA537040 S7175266F

Period of Insurance

Comprehensive from 19/03/2020 to 18/03/2021 (both dates inclusive)

Premium breakdown

Gross Premium after 50% NCD Total Discounts

7% GST **Final Premium**

SGD 1.767.01 - SGD 94.20 SGD 117.10

SGD 1,789.91

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Flexi Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Loss or Damage
- Legal Liability
- Workshop of Your Choice
- Medical and dental expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

Claim Protector Pack Benefits

- Basic own damage excess waiver
- No Claim Discount Protector

Add-on Benefits

- Personal accident benefit of up to \$ 50,000.00 for you and your named drivers
- Car Accessories up to \$2,000

Vehicle details

Make & Model of Vehicle Vehicle registration number

Body type

Seating capacity (excl driver) Off-Peak car

MERCEDES GLC250 4MATIC COUPE Year of manufacture

SJK1125R COUPE

No

Type of Use Engine capacity (c.c.) Engine number Chassis number

2018

Private use 1991

27492031597415 WDC25334562F498885

Insured's Estimated Market Value Limitation to use Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts) As per Certificate of Insurance

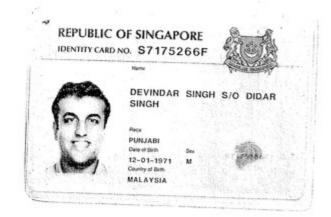
Maybank Singapore Limited

Excess applicable (refer to Policy Wording for other applicable Excesses)

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01

1 of 2

2M vov



16/08/2020 2011 115516



drive



SJK1125 R - DOa on 16/08/2020

