

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 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.

ACCIDENT STATEMENT

Date Of Report	13/07/2020 12:57
Date Of Accident	10/07/2020 22:30
Exact Location Of Accident	JUNCTION BEDOK NORTH AND CHAI CHEE STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE6934J
Insured/Policyholder	
Name Of Registered Owner	HANAFI BIN HANIF
NRIC No	S1178933A
Email Address	1956IFANAH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90265738
Alternative Phone No	OFFICE-90265738

Vehicle Particulars

Manufacturer	CHEVROLET
Model	CRUZE-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1503877
Cover Note Number	

Driver

Name of Driver	HANAFI BIN HANIF
NRIC No	S1178933A
Date Of Birth	22/07/1956
Occupation	INDOOR
Date Of Driving Pass	17/04/1979
Driving Experience	41 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90265738
Fax Number	
Contact Number	OFFICE-90265738
Email Address	1956IFANAH@GMAIL.COM

Address	52 CHAI CHEE ST #08-324
Postcode	460052
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	COLLISION - CROSS JUNCTION
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2448999 - FAX NO: 62446558
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT

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	FBD8818K
Vehicle Make/Model/Colour	YAHAMMA T135
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name FBD8818K

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

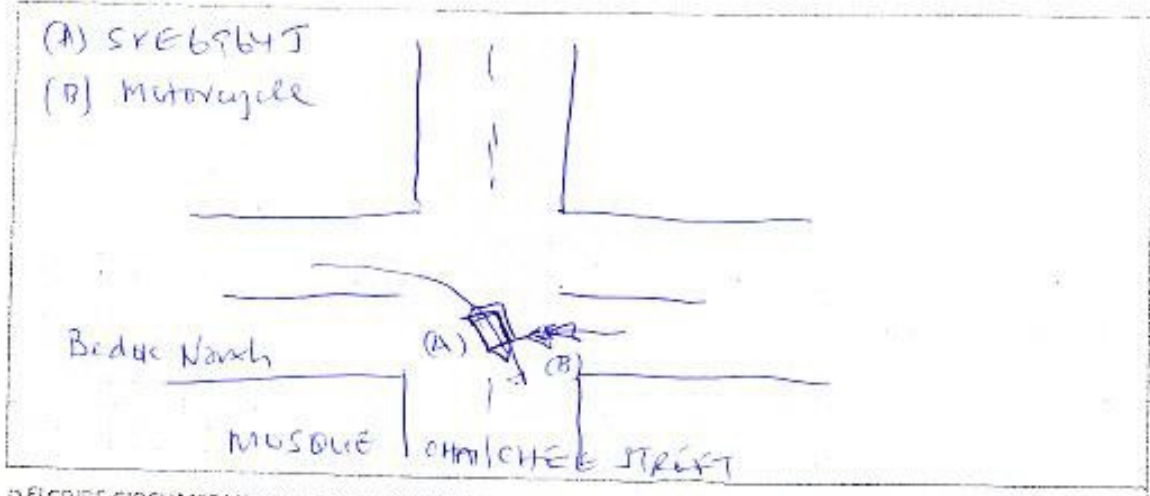
Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per Police Report -

DECLARATION

I hereby declare the foregoing particulars to be true to every request.

[Signature]

Policyholder's Signature
Date & Time

[Signature]

Driver's Signature
If minor is not the policyholder
Date & Time

[Signature]

Approved Centre for some 9.3 months
Name
Date & Time

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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.
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 making 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/not 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 claim 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
NIC/FIN No.



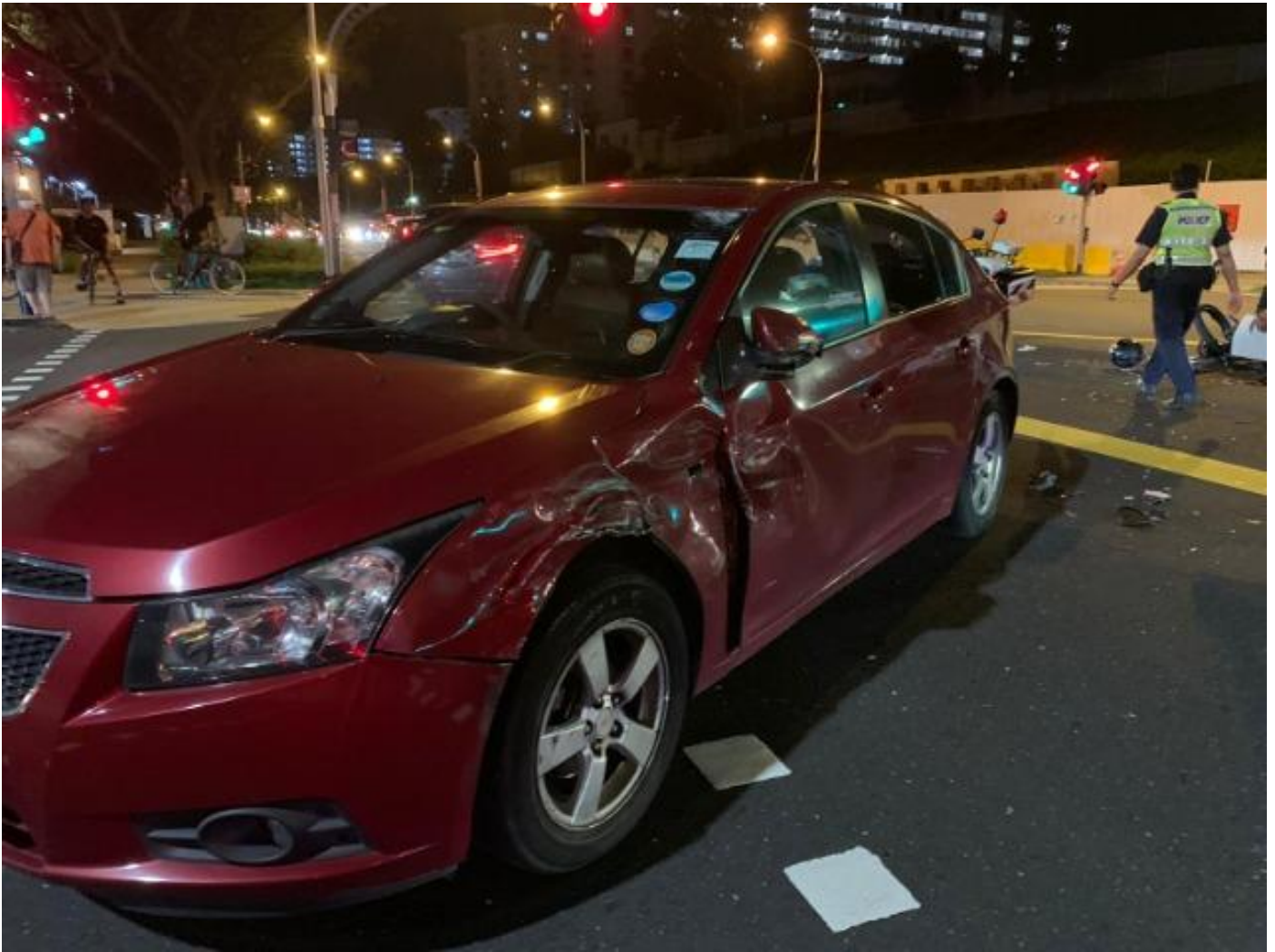
Accident Photo



Accident Photo



Accident Photo



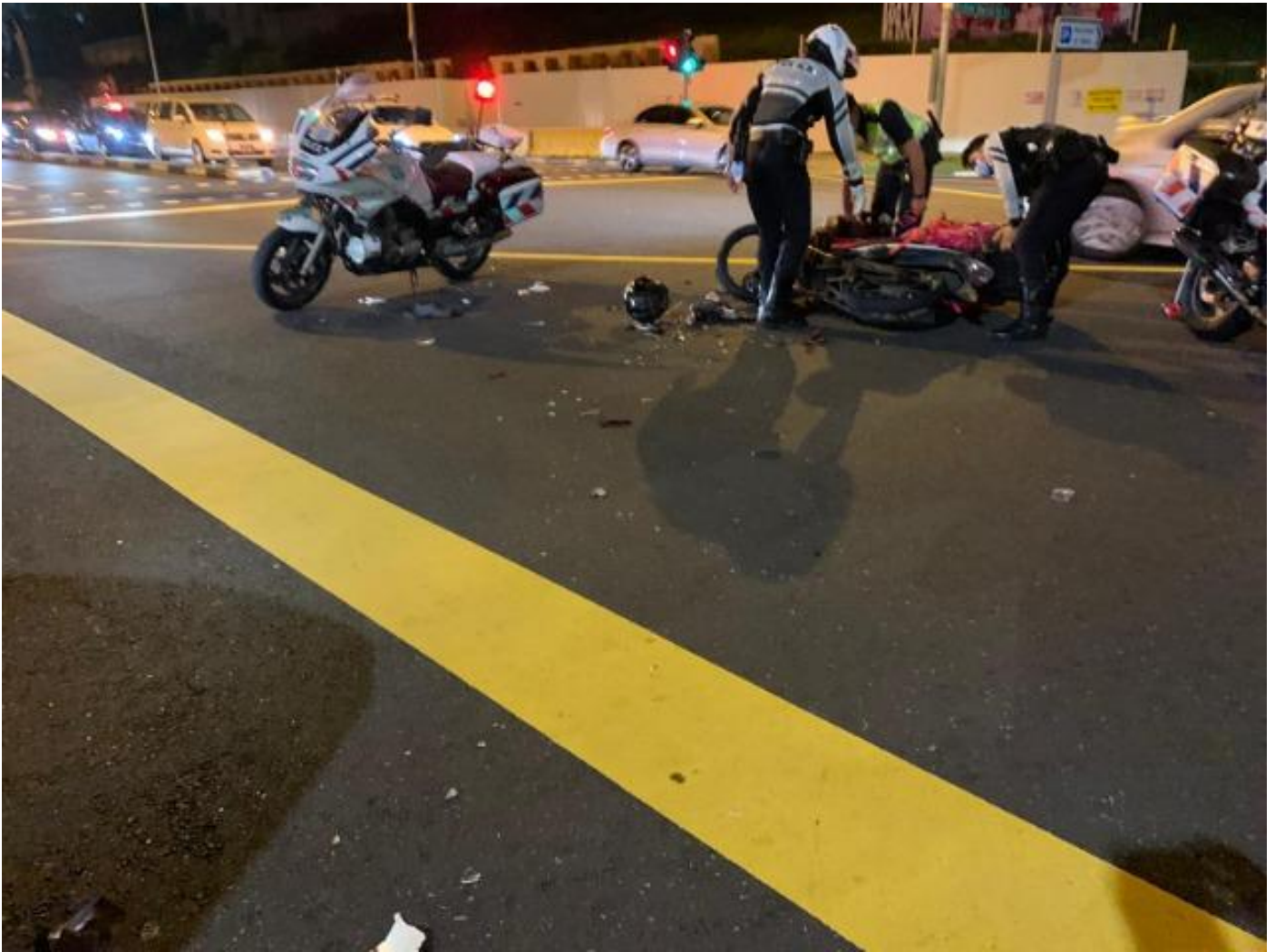
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Accident Photo



Accident Photo



Accident Photo



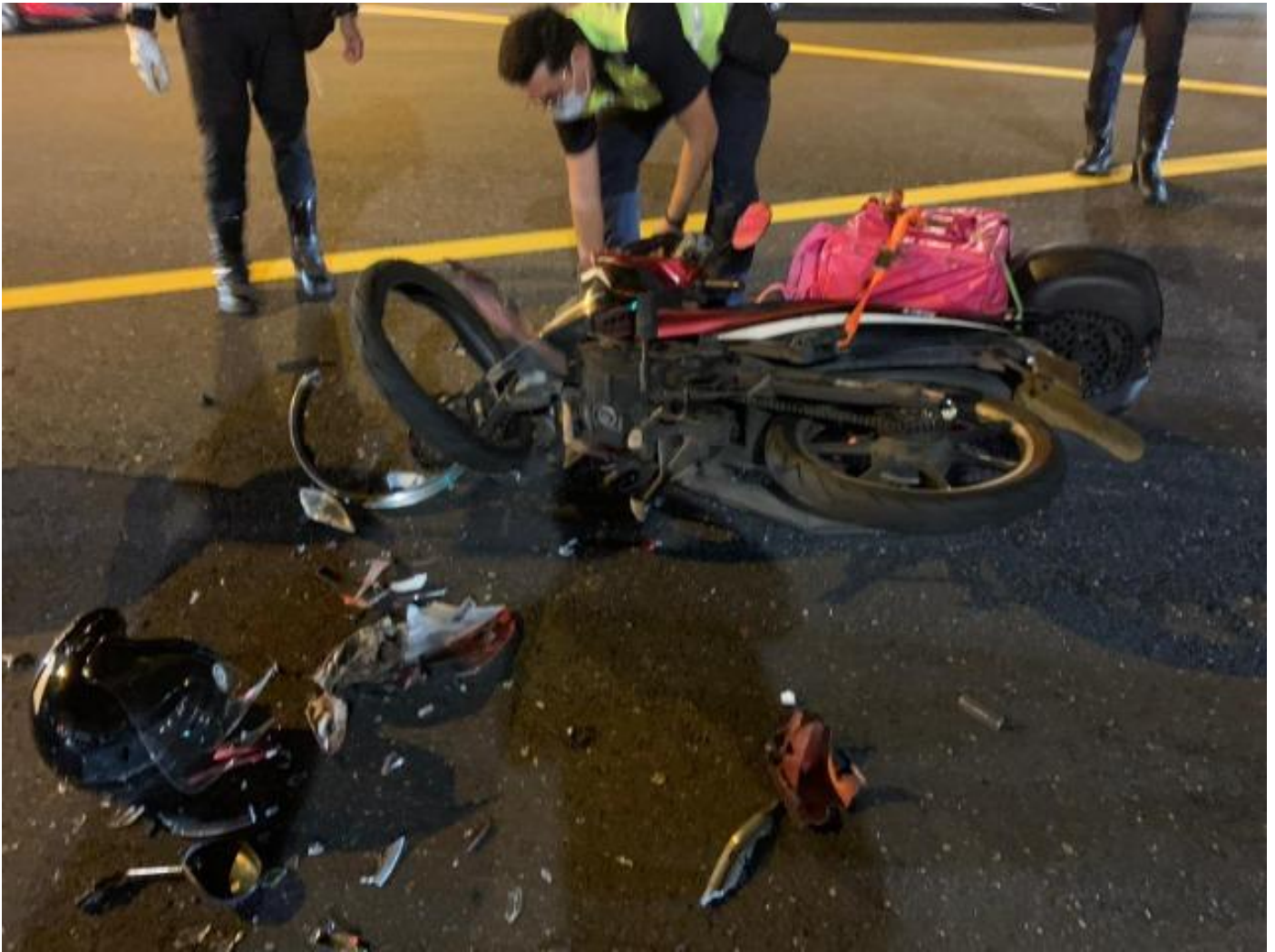
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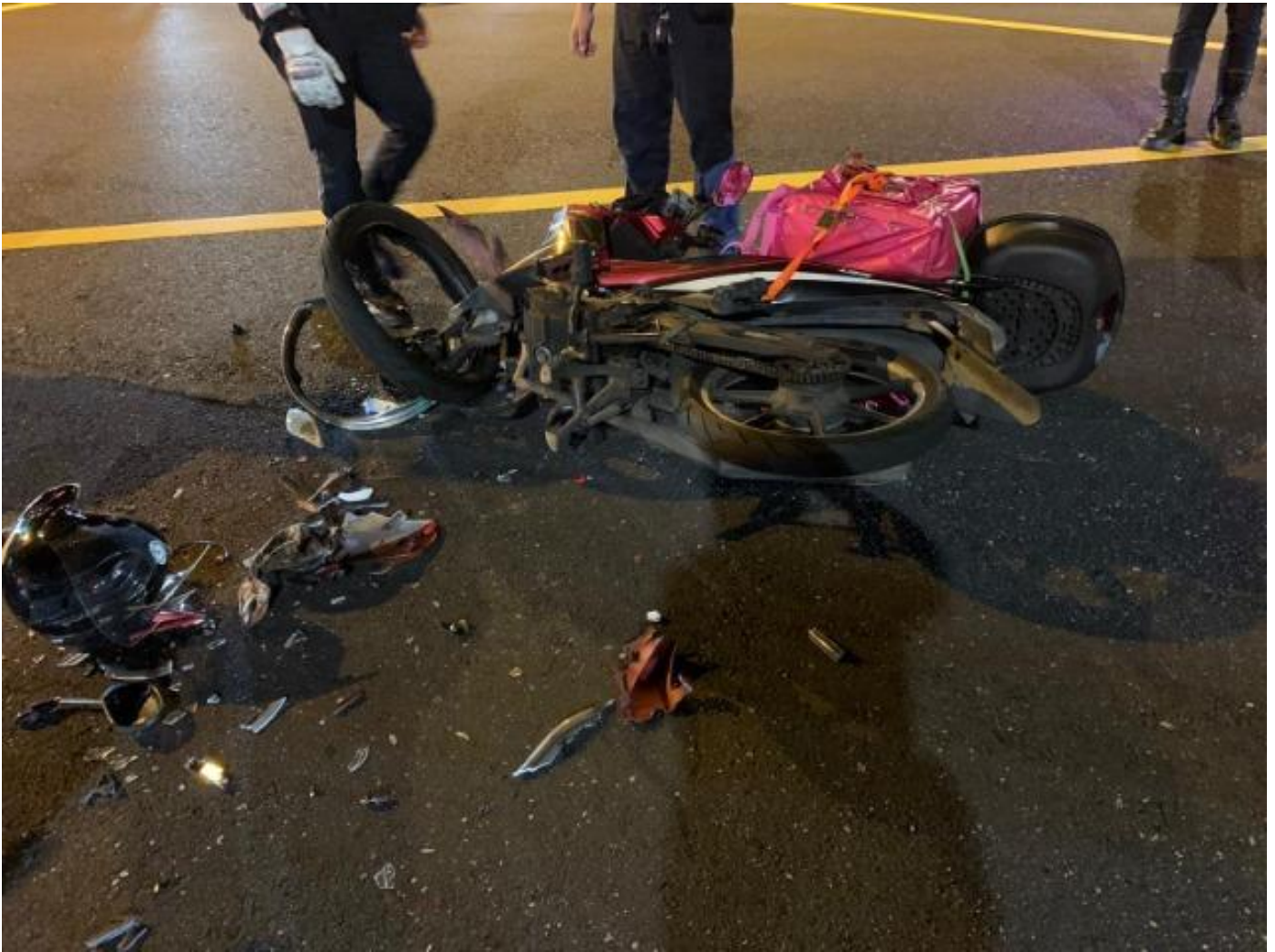
Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20200711/2004

1 of 3

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 408045
Tel No: 1800-2448999

Report No: T/20200711/2004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/07/2020 01:58	Vide Report No. E/20200710/0189	Station Diary No.: 17
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Informant's Particulars

Name of Informant: HANAFI BIN HANIF			Address: APT BLK 52 CHAI CHEE STREET #08-324 SINGAPORE 460052		
ID Type / ID No : NRIC NO / S1178933A			Contact No.:		
Nationality: SINGAPORE CITIZEN			Home/Office: Mobile: 90265738		
			Email:		
Sex: Male	Age: 63	Date of Birth: 22/07/1956	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: SENIOR ENGINEER			Driving Licence Information: Class: 3		
			Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police:	Drink Driver: No	Date/Time of Accident: 10/07/2020 21:30	Type of Location: X-Junction
Location: Along Road 1 BEDOK NORTH ROAD				
JUNCTION BEDOK NORTH RD AND CHAI CHEE ST INFRONT OF MOSQUE				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passengers
FBD8818K	Motorcycle	YAMAHA	T135	Red	Seriously Damaged	0
SKE8934J	Car	CHEVROLET	CRUZE 1.6 AT ABS AIRBAG 2WD 5DR SR	Red	Seriously Damaged	0



Police Report



**SINGAPORE
POLICE FORCE**



T/20200711/2004

2 of 3

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

Report No. T/20200711/2004

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SKE6934J	AXA INSURANCE SINGAPORE PTE LTD	P1503877	28/03/2020	27/03/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	HANAFI BIN HANIF	ID No.	S1178933A
Related Vehicle	SKE6934J (Car)	Contact No.	90265738
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/07/2020 at about 2130hrs, I was driving my vehicle SKE6934J when I was turning right at the junction mentioned above. The traffic light was green however the turn right arrow was not indicated. I followed through with the vehicles in front and did a quick check for any oncoming pedestrian and was just at the pedestrian road marking when I felt an impact from the left front passenger door. I came out to make a check what happened and to my observation a motorcyclist was injured. There was an ambulance nearby and it came to assist the motorcyclist. The motorcyclist was conscious and the paramedic were assisting him to the road side. Subsequently traffic police came and handled the scene. The motorcyclist was eventually conveyed by the ambulance to a hospital. I was not injured.

I do not have any built in car camera. I agree that I am partly at fault and I will bear the medical cost for the motorcyclist.

I was advised by traffic police to lodge a police report.

Police Report



SINGAPORE
POLICE FORCE



T/20200711/2004

3 of 3

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

Report No. T/20200711/2004

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 3 EDWARD TAN CHUN SENG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

11/07/2020 01:58

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt LIM ENG KUAN, CLARENCE

Contact No.: 65476200

Classification Of Case:

Authentication Stamp
NP188



SINGAPORE
POLICE FORCE

SIGNATURE

INS CERT

AXA INSURANCE PTE LTD
 8 Shenton Way, #04-01
 AXA Tower, Singapore 068811
 Customer Centre A01-21
 Tel: 1800 804388 Fax:
 (65) 6339 1111
 GST Registration Number: 1065339124
 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, 1986 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia)

CERTIFICATE NO. : VPA/P150387T Account No. : 04131
 Coverage : Comprehensive
 Sum Insured : Market Value At The Time Of Loss
 Name of Policy Holder : MANAPI BIN HANIF
 Vehicle Registration No. : SKE6934J
 Period of Insurance : From 28/03/2020 To 27/03/2021 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

- (a) The Policyholder
 The Policyholder may also drive a Motor Car not belonging to or not hired under a hire purchase agreement or otherwise to him or his employer or his partner
 (b) Any other person who is driving on the Policyholder's order or with his 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*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

(21)

Basic Own Damage Excess : SGD 900.00

An Additional Excess is applicable as follows:
 S\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver.
 S\$9,900.00 for Undeclared Young and Inexperienced Driver.
 (Please refer to your policy on the terms & conditions)

* Limitations contained inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 15 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).

N.B. : (Private Car Only)

You have signed an Undertaking to use exclusively AXA Premium Workshops for all your accident repairs insured by AXA.

Basic Own Damage Excess for Insured & Named Drivers is reduced as follows:

- 50% NCD - Nil Excess
- 0% - 40% - Excess Halved

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGRAC02 on 17/03/2020

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).

The Freedom Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy. Renewal certificate, endorsements and amendments etc.