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.

	ACCIDENT STATEMENT	
Date Of Report	31/08/2020 16:04	
Date Of Accident	28/08/2020 16:50	
Exact Location Of Accident	PI > TUAS (NEAR KPE EXIT)	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMK5723C	
Insured/Policyholder		

SIA HUNG-MIN, CHRISTABEL

NRIC No S7920766G

Email Address CHRISTABEL@ROCKETDEBTCOLLECTION.SG

Mobile Phone No (LOCAL) +65-82286012
Alternative Phone No OFFICE-82286012

Vehicle Particulars

Name Of Registered Owner

Manufacturer VOLKSWAGEN

Model PASSAT 1.8 TSI AT 3624H7 HID

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?

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 GA466741/1

Cover Note Number 20/06/2020-19/06/2021

Driver

Name of Driver

TAN GUA YUAN

NRIC No

S8429304J

Date Of Birth

Occupation

OUTDOOR

Date Of Driving Pass

26/09/2016

Driving Experience 3 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82286012

Fax Number

Contact Number OFFICE-82286012

EMail Address STABEL@ROCKETDEBTCOLLECTION.SG

Address

BLK 612 SENJA ROAD #04-32

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 **CHAIN COLLISION**

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

4

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

Number of Passengers (Including Driver)

ambulance?

NO

YES

NO

2

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NAME: : PANG YIFENG

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

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

Vehicle Registration Number SJJ6918S Vehicle Make/Model/Colour **TOYOTA**

Details Of Properties

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Category PRIVATE CAR

PEH CHOON CHYE Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJP9298X

Vehicle Make/Model/Colour MERCEDES BENZ

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJT2666S

Vehicle Make/Model/Colour MERCEDES BENZ GLA180

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

MERCEDES BENZ GLA180

SKETCH PLAN

IMPORTANT NOTICE

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- 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)
 - (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.

Policyholder's Signature
Date & Time: 31/08/20

2.20pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 31/01/20

2.20 pm

Reporting Centre Personnel's Signature Name: Rales waran, Anand NRIC/FIN No:

GIARMC SketchPlanForm_V3

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I/WE declare the foregoing particulars are true in every respect.

Policyholder's signature Date & Time

Driver's Signature

(if driver not the policyholder)

Date & Time 3/18/20

Reporting Centre Personnel's Signature

Name: Rokeswaran. Aman2

Nric/Fin No.





Certificate number

Chassis number

Engine number

AXA Insurance Pte Ltd

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

(65) 6880 4740

www.axa.com.sg

Certificate of Insurance

account number 03180

-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)

Policy details

Policyholder name

Cover

Plan name

NCD applicable

SIA HUNG-MIN CHRISTABEL

Comprehensive **Fssential**

10%

Vehicle registration number SMK5723C

from 20/06/2020 to 19/06/2021 (both dates inclusive)

Period of Insurance Finance loan company TOKYO CENTURY LEASING (S) PTE LTD GA466741 / 1

WVWZZZ3CZEE060090 CDA432205

Persons or classes of persons entitled to drive*

(b) Any person who is driving on the Policyholder'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.

Limitation 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, speed testing, 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.

* 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.

EXCESS

Basic Own Damage Excess

Windscreen Excess

SGD 600.00 SGD 100.00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops

Additional clauses & endorsements to your policy

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision 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

Authorised signature

Important note

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 Premium 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, endorsement etc.

1 of 3



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date:	31/08/2020		To: Ours (1/ 1/ 1 / 1 / 1	emic same
The d	-11	100000	Fo: Owner of Vehicle Number:	Sinc 3123C
				ECT PTE LTD through their staff,
Pleas	e tick the applicable box if	you had been advis	ed on any of the following:	
	You had been advised	by the western - "		claim against your own policy, there ne stipulated timeframe from the day
(~)	You had been advised i	by the workshop on	the liability and merits of the c	case accordingly.
()	You had been advised I due to this accident. if fire dame However, the fire dame However, the H	oy the workshop on age and you claim u here will be <u>no recc</u> age and you are cl <u>he recovery is not</u>	the claims procedure for the t inder your own insurance, an overy prospect and NCD will aiming against the Third Par guaranteed, and AXA will no	ype of claim that you will be making y applicable excess will be waived. be affected. ty, your NCD will not be affected. tt be held responsible.
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W)				outor, your insurance company will
	For vehicles above three company will be carrying part that needs to be relequipment manufacturer (placed will be repla	y and aged part that call be	a local distributor, your insurance repaired will be repaired and any of original parts and/or original
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λ	d acknowledged by:			
Name and	signature of policyhold	er/ authorized driv	er* and company stamp (w	here applicable)
authonzeo	d driver to either the nam drivers who are permitted	od delicere		he case of commercial vehicles,
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lame and	signature of workshop	personnel includin	g company stamp	

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Identification Card of Owner Pg. 1

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7920766G





SIA HUNG-MIN, CHRISTABEL

Race CHINESE

Date of birth 23-07-1979 Country of birth



20-07-2012

APT BLK 131B KIM TIAN ROAD #06-173 SINGAPORE 162131 NRIC No: \$79207666 Date: 19/0

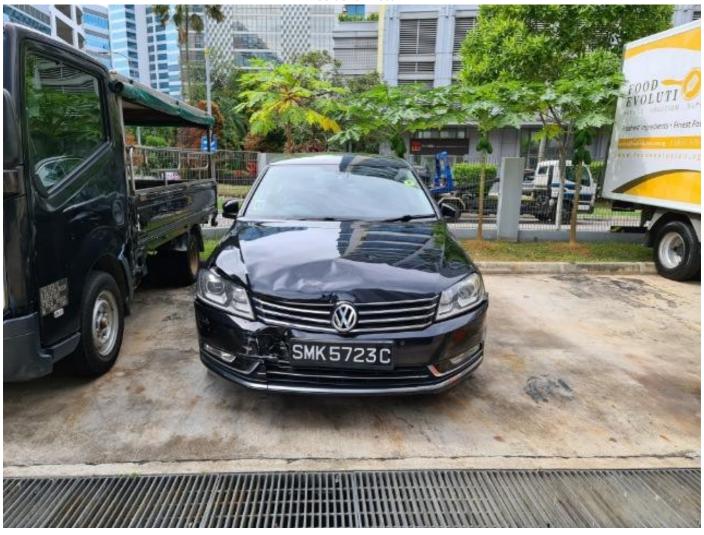
Date: 19/06/2020

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Identification Card & DL of Driver Pg. 1







Accident Photo FOOLUTI FOOLU













