

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 Submission 23/12/2020 13:43 (SGT)
Date of Accident 22/12/2020 11:37 (SGT)
Exact Location of Accident Braddell Rd, Singapore
Additional Location Information BRADDELL ROAD TOWARDS CTE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW2414B

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner HITACHICAPITAL ASIA PACIFIC PTE LTD
Company Reg No 1XXXXX399N
Email Address kelvincm.chang@hcspl.com.sg
Mobile Phone No (Phone) +65-92983192
Alternative Phone No (Office) +65-92983192

VEHICLE PARTICULARS

Manufacturer Opel
Model Grandland
Variant -
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? No - Claiming third party
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage Comprehensive
Fleet Policy No
Policy Number VPA/P2413025
Cover Note Number -

DRIVER

Name of Driver FADHLYANNA CHOO SZILIN BINTE MOHAMMED FAIZAL
NRIC No SXXXXX273D
Date Of Birth 18/06/1992
Occupation Indoor

Date Of Driving Pass	18/01/2013
Driving experience	7 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-92214573
Alt. Phone Number	-
Email Address	fadhlyanna@hotmail.com
Address	140 BISHAN ST 12
Address complement	-
Postcode	570140
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Sibling
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

SIGNAL TO CHANGE LANE , THE OTHER PARTY ALSO CHANGE LANE AND HIT MY REAR

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA968H
Vehicle Manufacturer	Hyundai
Vehicle Model	Elantra
Vehicle Variant	-
Vehicle Colour	Yellow
Vehicle Category	Taxi
Name of Driver	BAHARI
Contact Number	(Phone) +65-90049314
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

IMPORTANT NOTICE

1. Please report (directly the details of the incident & to make up the claim process).
2. This form must be completed by the Policyholder and/or the Authorized Driver.
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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 work/staff 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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the Insurers' lawyers/law firms, the Ministry 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/can be disclosed by one 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.

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

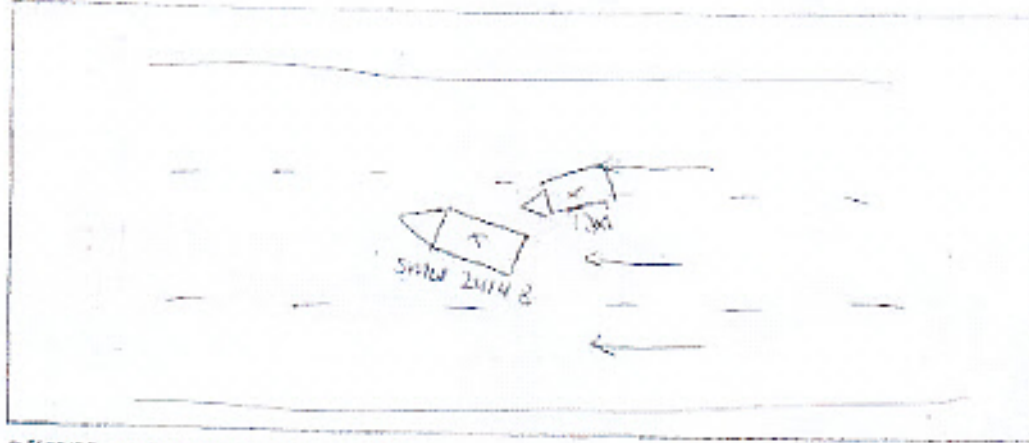
RESUM CHANG
Manager
Vehicle Solutions
Total Vehicle Solutions Department

Signature
Date & Time

Signature
(Driver is not the policyholder)
Date & Time

Signature
Name
Date & Time

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While travelling along Gaddell Rd heading towards CTE, I signalled to change to the centre lane, I checked my blindspot and proceeded to change lane as there was no car behind. Once I was in the lane, I felt a bump on the car and realised that a taxi SHW 968 H had hit me on the back while trying to change lane from the right most lane. This resulted in both our cars sustaining damages.

DECLARATION

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

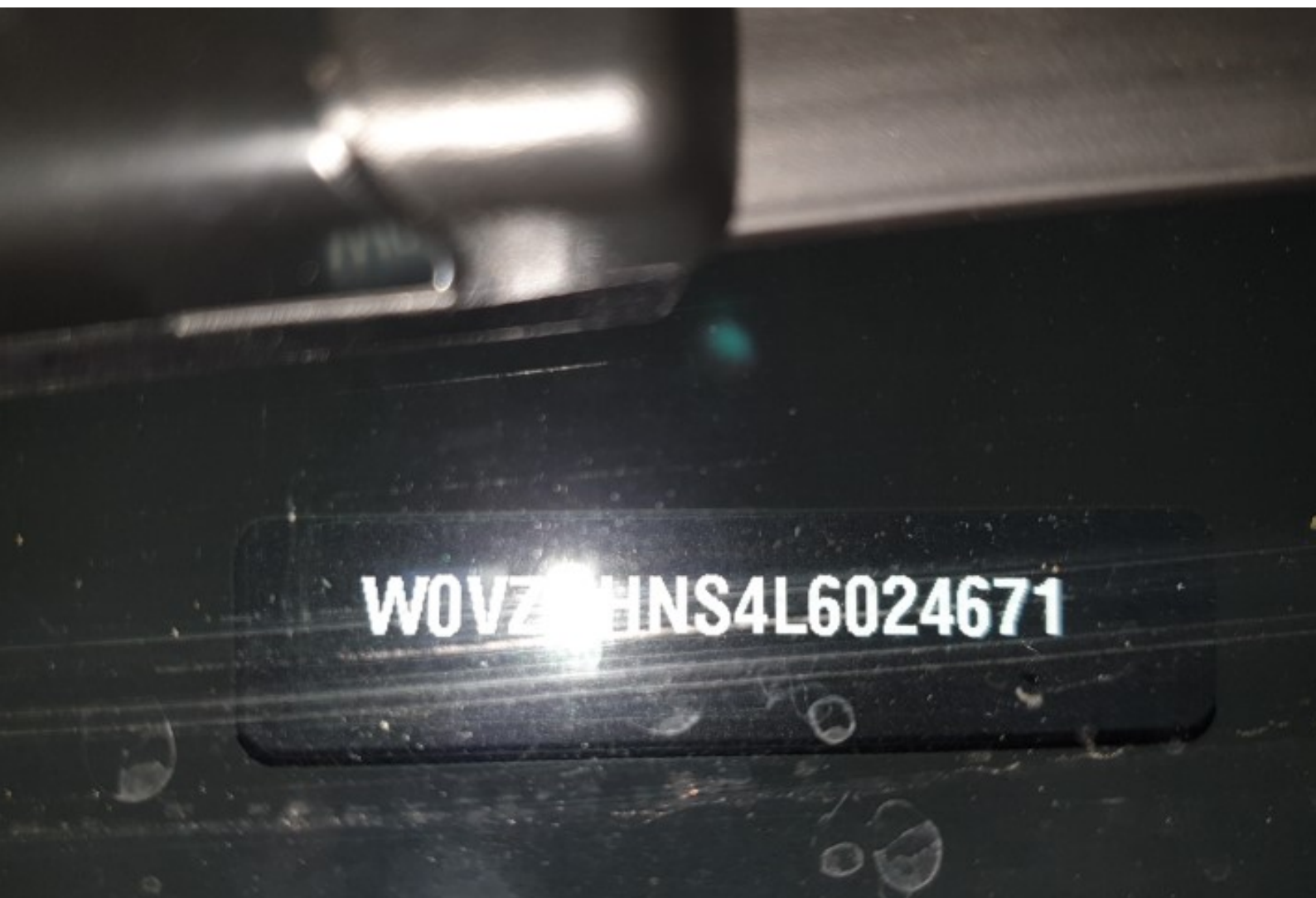
NRACH CAPITAL AND MFG. PTE. LTD.

[Signature]
 Name
 Designation
 Position
 Date & Time

[Signature] 23/12/2015
 Name & Signature
 Position (if not the policyholder)
 Date & Time

[Signature]
 Name
 Designation
 Date & Time































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: 199503512M
customer.care@axa.com.sg



CERTIFICATE OF INSURANCE

• Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 169) • Motor Vehicles (Third-Party Risks and Compensation) Rules, 1969 • Road Transport Act, 1967 (Malaysia) • Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO.	: VPA/P2413025	Account No. :	15038
Coverage	: Comprehensive		
Sum Insured	: Market Value At The Time Of Loss		
Name of Policy Holder	: HITACHI CAPITAL ASIA PACIFIC PTE LTD		
	LESSEE		
	NURMAZIDAH CHOO BINTI MOHAMMED FAIZAL		
Vehicle Registration No.	: 6MM2414B		
Period of Insurance	: From 10/11/2020 To 09/11/2021 (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.

(01)

Basic Own Damage Excess : SGD 750.00

An Additional Excess is applicable as follows:
SG\$500.00 for Unnamed Authorized Driver s/or Declared Young & Inexperienced Driver.
SG\$1,000.00 for Undeclared Young and Inexperienced Driver.
(Please refer to your policy on the terms & conditions)

* Limitations rendered inoperative by Section 4 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 169) and Section 23 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

I/we hereby certify that the policy to which this Certificate relates is issued to accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 169) and Part IV of the Road Transport Act, 1967 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGRAC03 on 12/11/2020

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. 169).

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 and endorsement etc.