SE00212A000C / ETHOZ PROTECT PTE. LTD. [658075] ENTRY DATE & TIME: 10/02/2021 18:46 (SGT) SUBMITTED BY: Jackson Teo VERSION: 1 (10/02/2021 18:46 (SGT))

# 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 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 Submission 10/02/2021 18:46 (SGT) Date of Accident 06/02/2021 12:40 (SGT) Exact Location of Accident 7 Jln Suasa, Singapore 678499 Additional Location Information 7 JALAN SUASA Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SFK2553D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN ENG SENG NRIC No. S1550752G Email Address vincent.chengyie@gmail.com Mobile Phone No (Phone) +65-96238326 Alternative Phone No +65-96238326

VEHICLE PARTICULARS

Manufacturer Mercedes Model S300 Variant 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 - Reporting only Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Comprehensive Fleet Policy Policy Number GA143255/1 Cover Note Number

DRIVER

Name of Driver TAN ENG SENG NRIC No S1550752G Date Of Birth 15/10/1962 Occupation Outdoor

| Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver | 26/01/1980 41 YEARS AND 1 MONTH Male (Phone) +65-96238326 +65-96238326 vincent.chengyie@gmail.com 7 JALAN SUASA - S(678499) Yes - No |
|---|--|
| GENERAL INFORMATION OF THE ACCIDENT   |  |
| Type of Accident Weather Conditions Road Surface  | Side Swipe<br>Clear<br>Dry   |
| OTHER INFORMATION   |  |
| Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged?  Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?     | No 2 No - Yes 1  |
| DETAILS OF POLICE ACTION  |  |
| Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?  | No<br>No<br>-  |
| CIRCUMSTANCES OF ACCIDENT   |  |
| KINDLY REFER TO SKETCH PLAN.  |  |
| ATTACHMENT(S)   |  |
| Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?   | Yes<br>Yes<br>No   |
| DETAILS OF OTHER  | R VEHICLE PROPERTY 1   |
| Vehicle Registration Number Vehicle Manufacturer Vehicle Model  | SKE6843M<br>BMW<br>-   |

| Vehicle Registration Number | SKE6843M             |
|-----------------------------|----------------------|
| Vehicle Manufacturer        | BMW                  |
| Vehicle Model               | -                    |
| Vehicle Variant             | _                    |
| Vehicle Colour              | -                    |
| Vehicle Category            | Private car          |
| Name of Driver              | LINCOLN              |
| Contact Number              | (Phone) +65-98636309 |
| Address                     | -                    |
| Address complement          | -                    |
| Postcode                    | -                    |
| Insurance Company Name      | -                    |

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### 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
- 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)
  - (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
- 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.
- 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

10.07.2

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No .:

| SKETCH PLAN  | o W Lo   |
|--|--|
|  |  |
| SKE 6843 HA  |  |
| Jalan Suasa E.B  |  |
| CAR BIOTKING 7 5   | 24 213 D   |
| DESCRIBE CIRCUMSTANCES OF THE ACCIDENT   |  |
| On 06.00. 21 lot 12.40 pm. 1 was a   | driving my Vehicle   |
| (SFK 2553D) OUT From my house  | Potrana Al then  |
| was a Vehicle blocking on my left,   | hefure I turn outen  |
| [ Moved Stightly out to check for  | my blindenot   |
| Suddenly Vehicle (SKE 6863A) do  |  |
| grazed onto my vehicle front p   | ortion, Both, Marty  |
| grazed onto my vehicle front p<br>alighted to check and exchange.  | Contact number after   |
| that we left the scene as it was a   | Minor Stratched  |
| on the rear right wheel of his eard  | n Hially both party  |
| agreed with private. Settlement &  | ruff cary received   |
| Call from his workshop on 16/02  | (2021 12-12 ph that  |
| he will submit claim through i   | Asurance this  |
| Caused me for late reporting.  | aro injury involved  |
| to both party.   | 0 1  |
|  |  |
| //   |  |
|  |  |
| You had been advised by workshop that in the event that you wish to claim  | Reporting Only   |
| against your own policy (OD claim), there is a Fourteen (14) days clause   | Claim OD   |
| whereby the claim/poust be made within the stipulated timeframe from<br>the day of occurance.  | Claim TP   |
| and part money and part of the | Claim OD / TP at other workshop                                  |
| /We declare the foregoing particulars are true in every respect.   | S  |
| olicyholder's Signature Driver's Signature (If driver is not the policyholder) Date & Time:  | Reporting Centre Personnel's Signature<br>Name:<br>NRIC/FIN No.: |



### POLICYHOLDER ACKNOWLEDGEMENT FORM

| ( | Dat      | te:10/02/2021  | To: Owner of Vehicle Number:   | SFK2553D   |
|---|----------|--|--|--|
| 1 | he<br>JA | e following has been advised to<br>ACKSON TEO Plea   | you via your workshop, ETHOZ PF<br>see tick the applicable box if you had been   | ROTECT PTE LTD <sub>through</sub> their staff, advised on any of the following:  |
| ( | V        | You had been advised by the wo-<br>Fourteen (14) days clause whereby   | rkshop that in the case that you wish to<br>y the claim must be made within the stipula                                      | claim against your own policy, there is a ated timeframe from the day of occurrence.   |
| 6 | 1        | You had been advised by the work   | shop on the liability and merits of the cas  | e accordingly.   |
| ( | )        | if fire damage and you claim to<br>be no recovery prospect and   | NCD will be affected.<br>siming against the Third Party, your NCD v  | excess will be waived. However, there will will not be affected. However, the recovery   |
| ( | )        | If you had been involved in an accident please forward the photos of the fi                                    | dent with a foreign registered vehicle and<br>ront and back of the NRIC and driving lice                                     | wished to attempt recovery with AXA help, nse to motor.doc@axa.com.sg  |
| ( | )        | <ul> <li>S200 off on your Basic Own D</li> <li>\$200 as a benefit if your polic</li> </ul>                     | amage Excess <u>or</u><br>y has \$0 excess and no Loss of Use benefi   |  |
| ( | )        | except to indent it from overseas.   | e repair due to the unavailability of spare<br>The estimated waiting time for<br>The estimated arrival time does not include |  |
| ( | )        | There will be no cancellation/with<br>you wish to cancel/withdraw the c<br>indirectly to the procurement of th | laim, you shall bear all costs, expenses &   | e order of spare parts have been placed. If<br>k/or related charges incurred directly &/or   |
| ( | )        | You will be driving the vehicle out do be road worthy.   | despite being advised by the workshop me   | chanic/ personnel that the vehicle may not   |
| ( | )        |  | ty with a local distributor, you have been a<br>our warranty prior to making this Own Dai                                    | dvised by the workshop to check with your mage claim.  |
| ( | )        | For vehicles below three (3) years original parts to repair your vehicle                                       |  | utor, your insurance company will use only   |
|   |          | will be carrying out repairs where a   | my damaged part that can be repaired will  | local distributor, your insurance company<br>i be repaired and any part that needs to be<br>ginal equipment manufacturer (OEM) parts |
| ( | )        | You had been advised by the works related to the accident.   | shop of the Twelve (12) months warranty  | for Own Damage repairs on workmanship  |

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811 AXA Customer Centre #01-21/22 Telephone: +65 6800 4888 - axa.com.sg



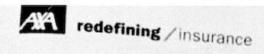
Signed and acknowledged by:

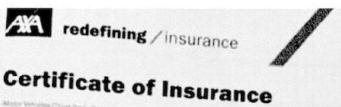
Name and signature of policyholder/ authorized driver\* and company stamp (where applicable)

\*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

Name and signature of workshop personnel including company stamp

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AXA Impurance Pie Ltd. 2 1500 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 El custamer careflexa com sg - www.tca.com.tg

abbooking migmilities

03936 Motor venezion (Tweet-Party Nobel ) Rules, 1959 (Middlews)

#### Policy details

Policyholder name Plan name

TAN ENG SENO Comprehensive Flexi 20% \$FX25530

Certificate number Chassis minimizer

GA143255/1 W002211542A477965 27294632040239

NCD applicable Vehicle registration sumber Period of Insurance Finance less company

from 19/12/2020 to 18/12/2021 (both dates inclusive) THRAW HEND AUTO ISSUPE LTD

# Parsons or classes of persons entitled to drive\*

b) Any penson who is driving on the Policyholder's order or with their permission

Provides that the person driving is perinsted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disquisified 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\*

id pleasure purposes and for the Policyholder's business.

This policy does not cover-use for hire or reward, racing, pace-making, reliability trial, spend testing, the carnage of goods other than samples in on with any trace 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 or, a racing track, circuit, quite, course or any other roads by whatever name called that are typically used for racing, cace-making or such similar purposes.

+ Limitations rendered industrialist by Section B of the Motor Venices (Third-Party Risas and Compensation) Act. (Chapter 199) and Section 95 of the Risas fransport Act. 1987 planeysia, ere not to be included under these headings

FECESS

Basic Own Damage Excess Windscreen Excess Third Party Excess

500 1,400,00 5GD 100.00 500 1.000,00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. 98500 for declared Houng and Inexperienced Driver
- 3. SS5,000 for undeclared Young and inexperienced Drivers, This additional excess is reduced to S\$2,500 if his have chosen AXA Premium.

## Additional clauses & endorsements to your policy

Trivel party excess \$1000

("We hereby certify that the policy to which this Certificate relates is islated 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

VIRTUR WOURANCE AGENCIES FIETIE 192 Washing Street #07 0 Styline Building Singapore 15:150. Tel (PATESSEKIES Fax 1649 633 H. D.S.)

#### Important note

recognitions are warned that or the sale of a motor variable thay must summittee the Certificate of incurance and the Poocy to the insurance company. If the Certificate of incurance had one force or destroyed a Data-tory Decisionarion to the effect must be made. Failure to company with the last gation is an effecte under the Music Version (Times).

of it for part in the world is execute period tening which their secure by no satisfy upper the occup, remember considers.

AXA Incurance Ple Ltd (199903512M) 8 Shenton Way, #24-01, 4XA TOMBY, Singapore OSBRIT Customer Centre, #91-01

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