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 03/04/2021 11:48 (SGT) Date of Accident 01/04/2021 10:30 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS CTE(SLE) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD7660T

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CHYE JOO CONSTRUCTION PTE LTD Company Reg No 198800808K Email Address info@chyejoo.com.sg Mobile Phone No (Phone) +65-81241467 Alternative Phone No +65-81241467

VEHICLE PARTICULARS

Manufacturer lveco Model Trakker Variant Exact purpose for which vehicle was being used at time of accident Employment Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Goods vehicle Transmission Auto 12882

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Yes Policy Number Cover Note Number

DRIVER

Name of Driver THANGARASU SELLA MUTHU Passport No/FIN S7260914Q

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address 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	06/03/1980 Outdoor 17/06/2008 12 YEARS AND 10 MONTHS Male (Phone) +65-81241467 - info@chyejoo.com.sg 19 KIAN TECK ROAD S(628772) No Employee No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface OTHER INFORMATION	Side Swipe Clear Dry
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 No -
CIRCUMSTANCES OF ACCIDENT	
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 No No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	SKL1726P Private car

Name of Driver
Contact Number
Address
Address complement

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

SKETCH PLAN

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- 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.
- 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.
- 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 law yers/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 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

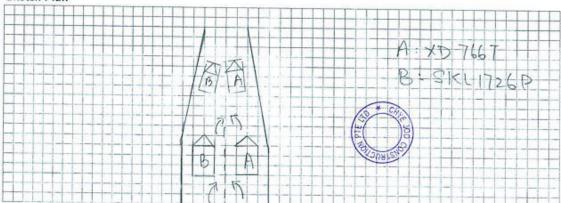


Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident
On 194 April 2021, at about 10:30am, I was travelling along
PIE towards CTE(SLE). I was driving on the right lane of 2 lanes
Upon reaching the merging lanes, while converging into single lane, I felt an impact from
the left. I then realised rehicle B tried to overtake me in the merging lance and
collided auto my vihicle. I alighted and exchanged particulars. Not
lung after, 2 guys from workshop came to scene and approached driver
of vehicle B. They forced me to sign a statement that they have
written. After I signed, they told me that I can leave and I
left the scene. I, THANGARASU SELLA MUTHU am the employee of
Chye Juo Construction PTE LTD. I was driving the verticle for work purpose.
Casin Service Control of the Control

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

















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: 199903512M 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. 1960 # Road Transport Act. 1987 (Malaysia) # Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO.

: VFX/P2411080

Account No.: 03165

Coverage Sum Insured : Comprehensive

: Market Value At The Time Of Loss

Name of Policy Holder : CHYE JOO CONSTRUCTION PTE LTD

Vehicle Registration No. : XD7660T

Period of Insurance

: From 02/11/2020 To 22/10/2021 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Policyholder's order or with their

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*

- (a) Use in connection with the Policyholder's business
 (b) Use for the carriage of passengers (other than for hire or reward)
 in connection with the Policyholder's business
 (c) Use for social, domestic and pleasure purposes
 This Policy does not cover
 (a) Use for hire or reward or for racing, pace-making, reliability
 trial or speed-testing
 (b) Use whilst drawing a trailer except the towing of any one disabled
 mechanically propelled vehicle.

 (05)

Sect I - Used In S'pore Only : SGD 1,000.00 Windscreen Excess : SGD 100.00

* 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.

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).

陳保險經紀私營有限公司 TAN INSURANCE BROKERS PTE LTD 3A/5A Aliwal Street, Chenn Leonn Building Singapore 199896 www.tib.com.sg Tel: (65) 6742 6766 Fax: (65) 6742 6669

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOVKRS2 on 10/11/2020

IMPORTANT :

IMPUNITANT:
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).

:Cover Under the policy is valid only upon the payment of the full premium stated on the policy. FOR INDIVIDUAL CUSTOMERS

FOR MON-INDIVIDUAL CUSTOMERS : Please refer to the Premium Warranty Clause on the policy