

Your Insured's vehicle: **SLP 6489H**
Our client's vehicle: **SKC 4152Y**
Date: **22 June 2021**

Our ref: **CS/1081/21/TAG**
Fax: **6223 7262**
Tel: **3152 0980**

By Email: motor.survey@axa.com.sg only

AXA Insurance Pte Ltd

Dear Sirs,

DATE OF ACCIDENT: 19 JUNE 2021
NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY

We are instructed by Nabil Syukri Bin Norman to notify you of a road traffic accident on 19 June 2021 at about 1.00p.m. along Pan Island Expressway (PIE), involving our client's vehicle registration number SKC 4152Y and vehicle registration number SLP 6489H which was insured by you at the material time. A copy of the Singapore Accident Statement/Traffic Police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within **2 working days excluding any intervening Saturday, Sunday and/or Public Holiday** of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

NB. Any settlement or offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude client's driver/passenger from claiming injury-related damages arising from this accident.

Yours sincerely,



Enc.

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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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 21/06/2021 16:28 (SGT)
Date of Accident 19/06/2021 13:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information PAN ISLAND EXPRESSWAY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKC4152Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner NABIL SYUKRI BIN NORMAN
NRIC No
Email Address
Mobile Phone No (Phone) +65
Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Hyundai
Model ELANTRA 1.6 AT ABS D/AB 2WD 4DR SR
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1591

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2021-V8010869-VAW-E002
Cover Note Number 25/03/2021 TO 24/03/2022

DRIVER

Name of Driver NABIL SYUKRI BIN NORMAN
NRIC No

Date Of Birth	
Occupation	Indoor
Date Of Driving Pass	-
Driving experience	
Gender	male
Mobile Number	(Phone)
Alt. Phone Number	
Email Address	
Address	
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SARAH UMMAIRAH E INTE JOHARI
Gender	Female

PASSENGER 2

Name	NUH MAHREEN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER WITH ATTACHED.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP6489H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NA CHEE SEA
NRIC No	SXXXX117I
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMY 8113U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHAI WEIZHE
NRIC No	SXXXX819J
Contact Number	(Phone) +65-9825896
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	SARAH UMMAIRAH F INTF .IOHARI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	RAFFLES MEDICAL
Injured person in which vehicle?	SKC4152Y
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	NABIL SYUKRI BIN NORMAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKC4152Y
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 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 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 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")

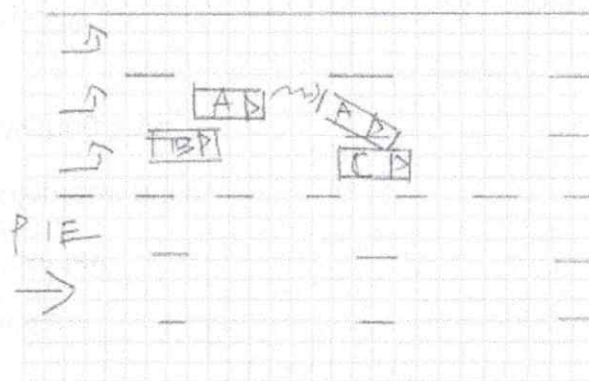
- (a) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law 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



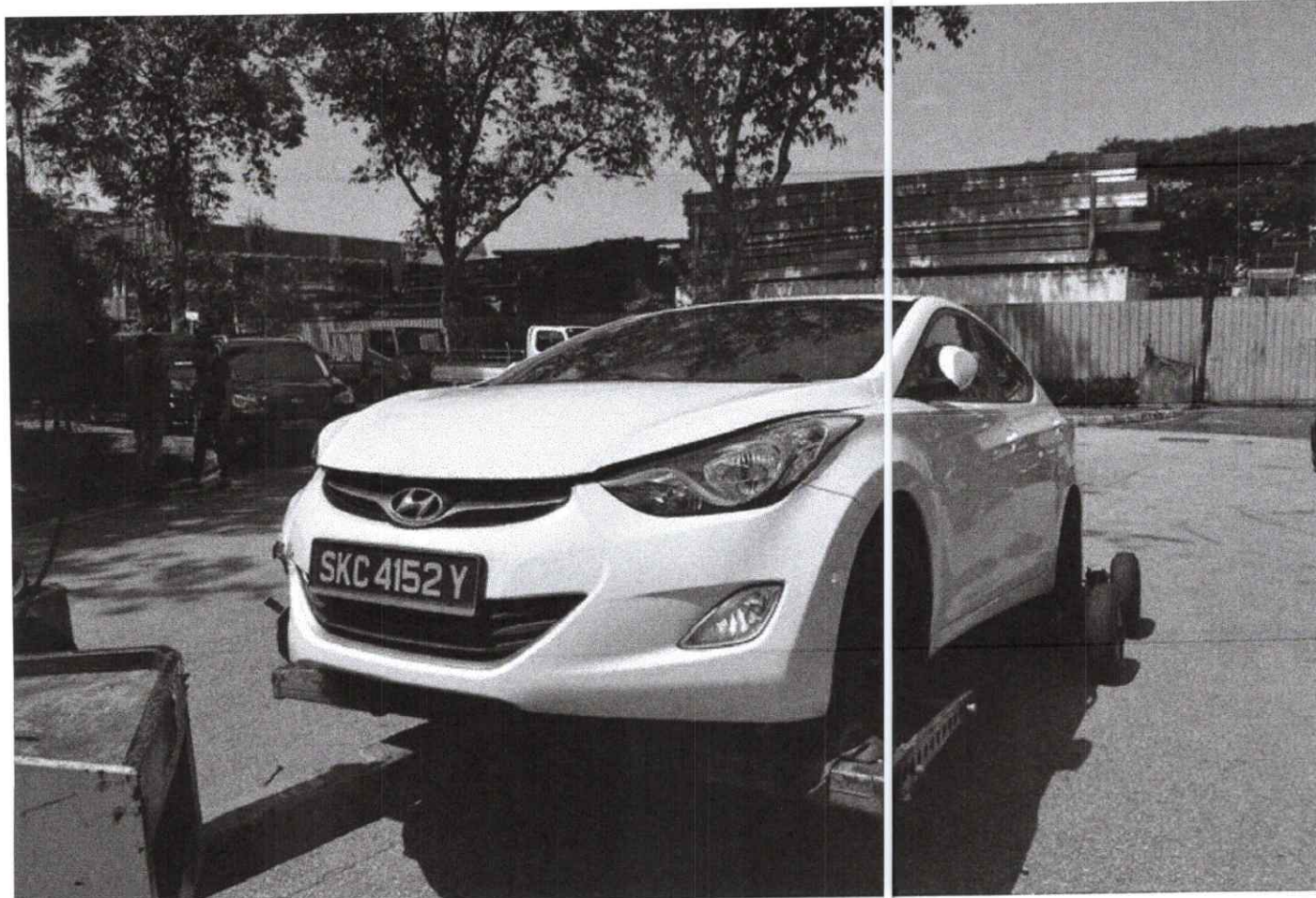
A: SKC H152Y
B: SLP 64 89H
C: SHY 8113U

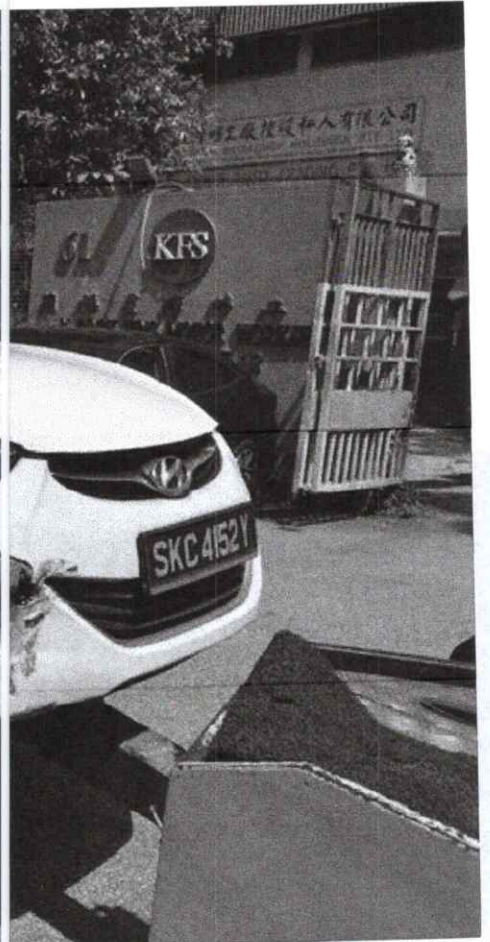
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(We declare the foregoing particulars are true in every respect.

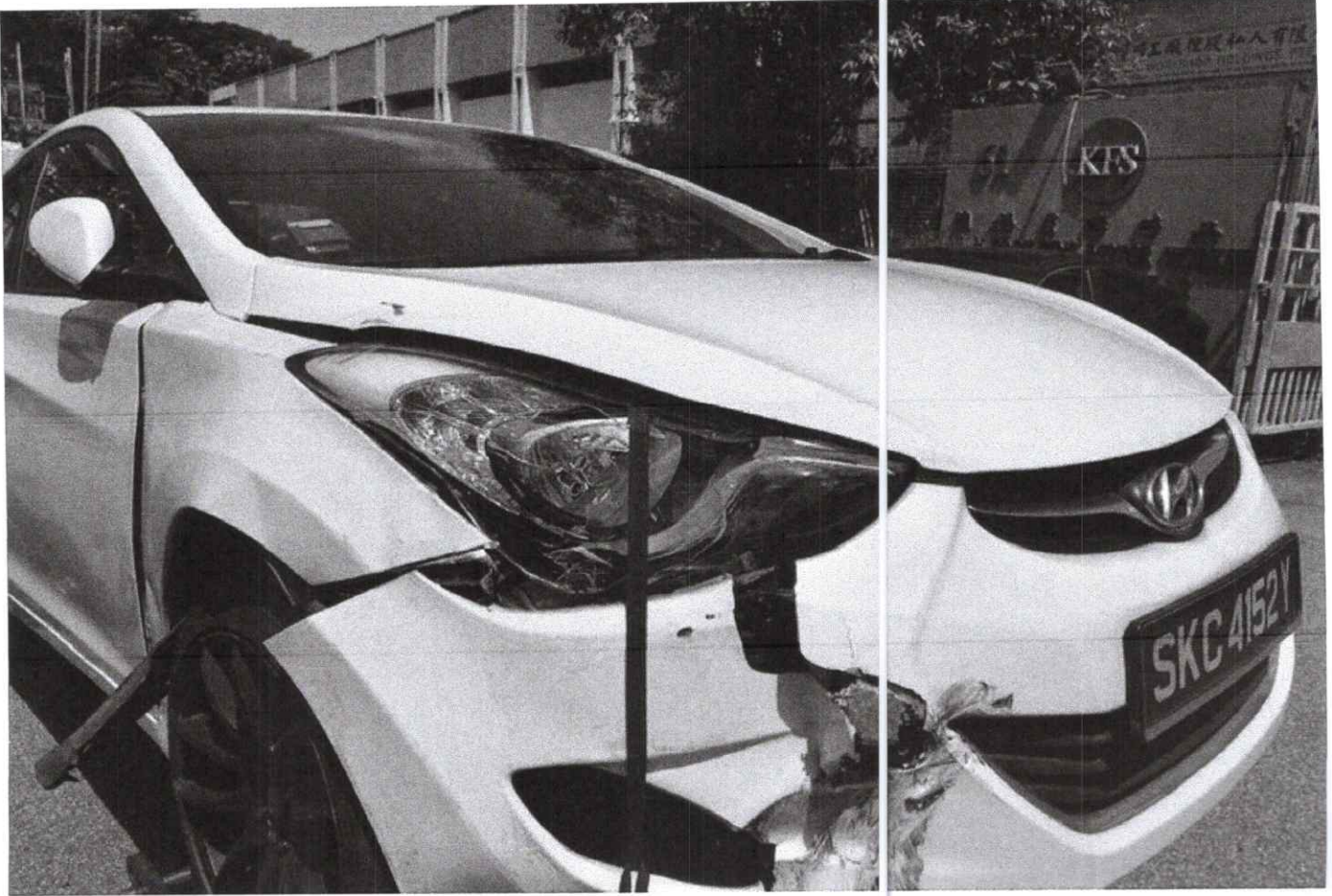
Driver's Signature (If driver is not the policyholder) / Date & Time

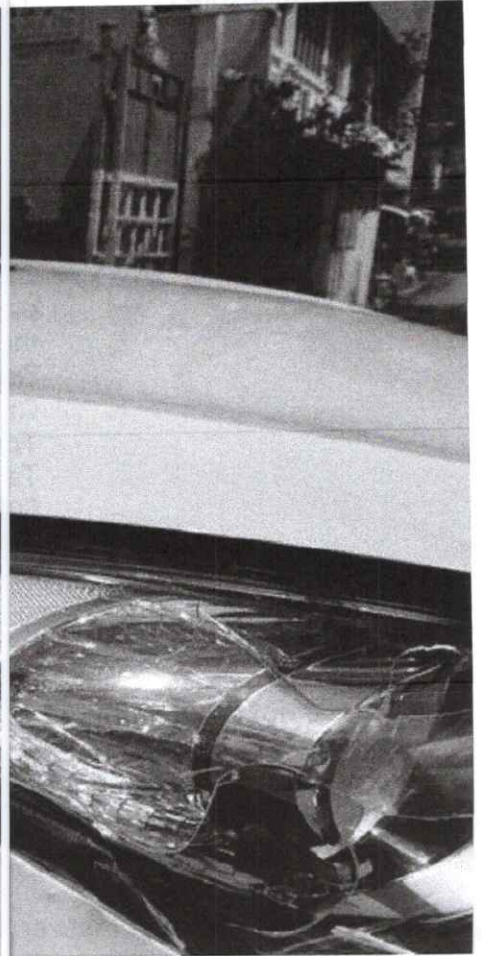
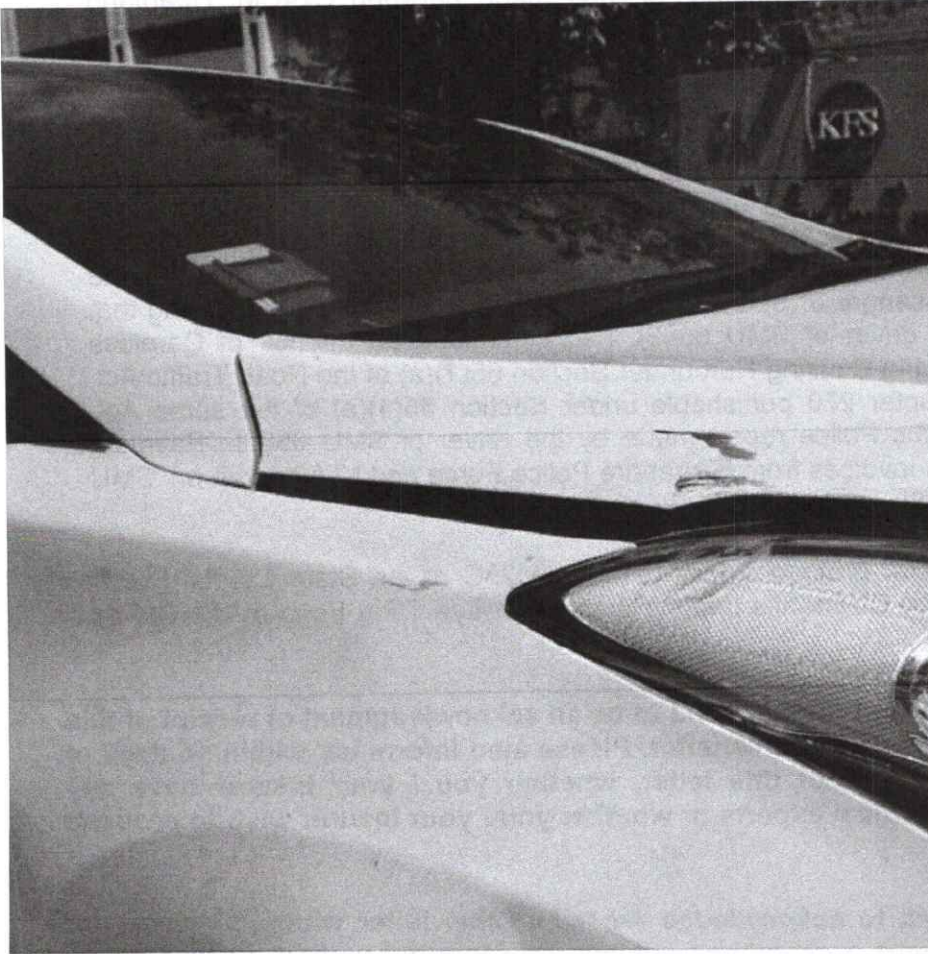
Witnessed by Reporting Centre
Personnel



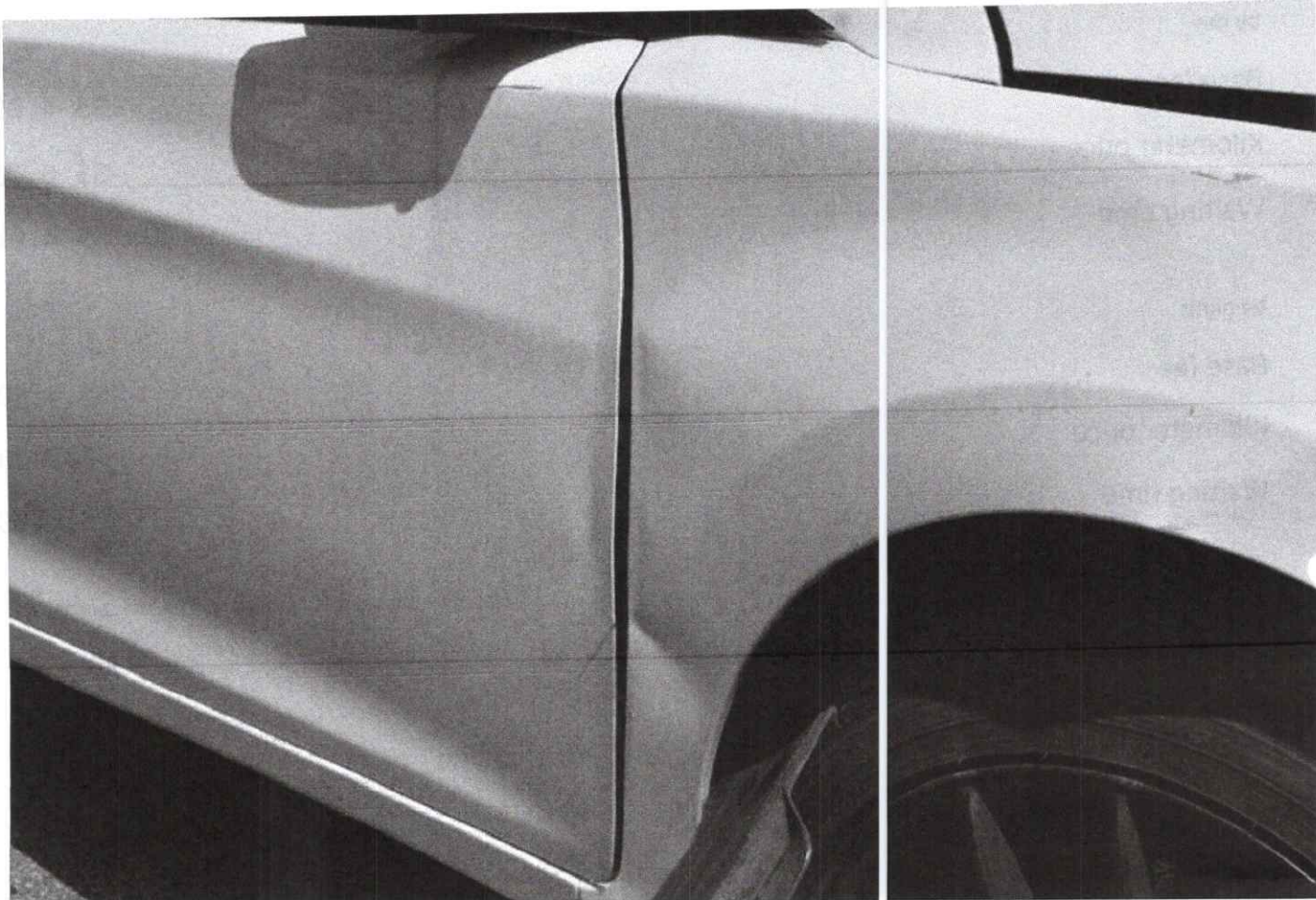


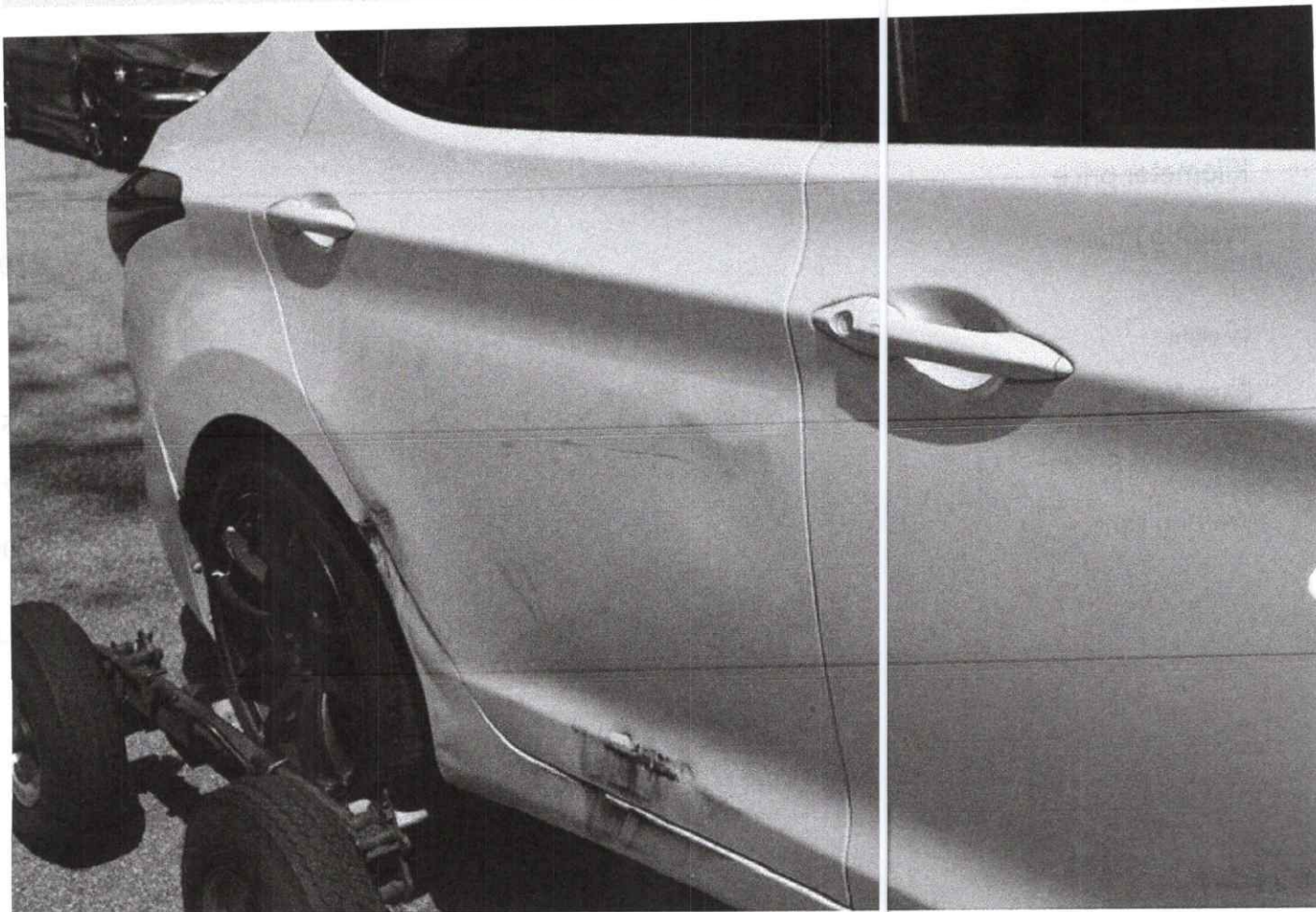




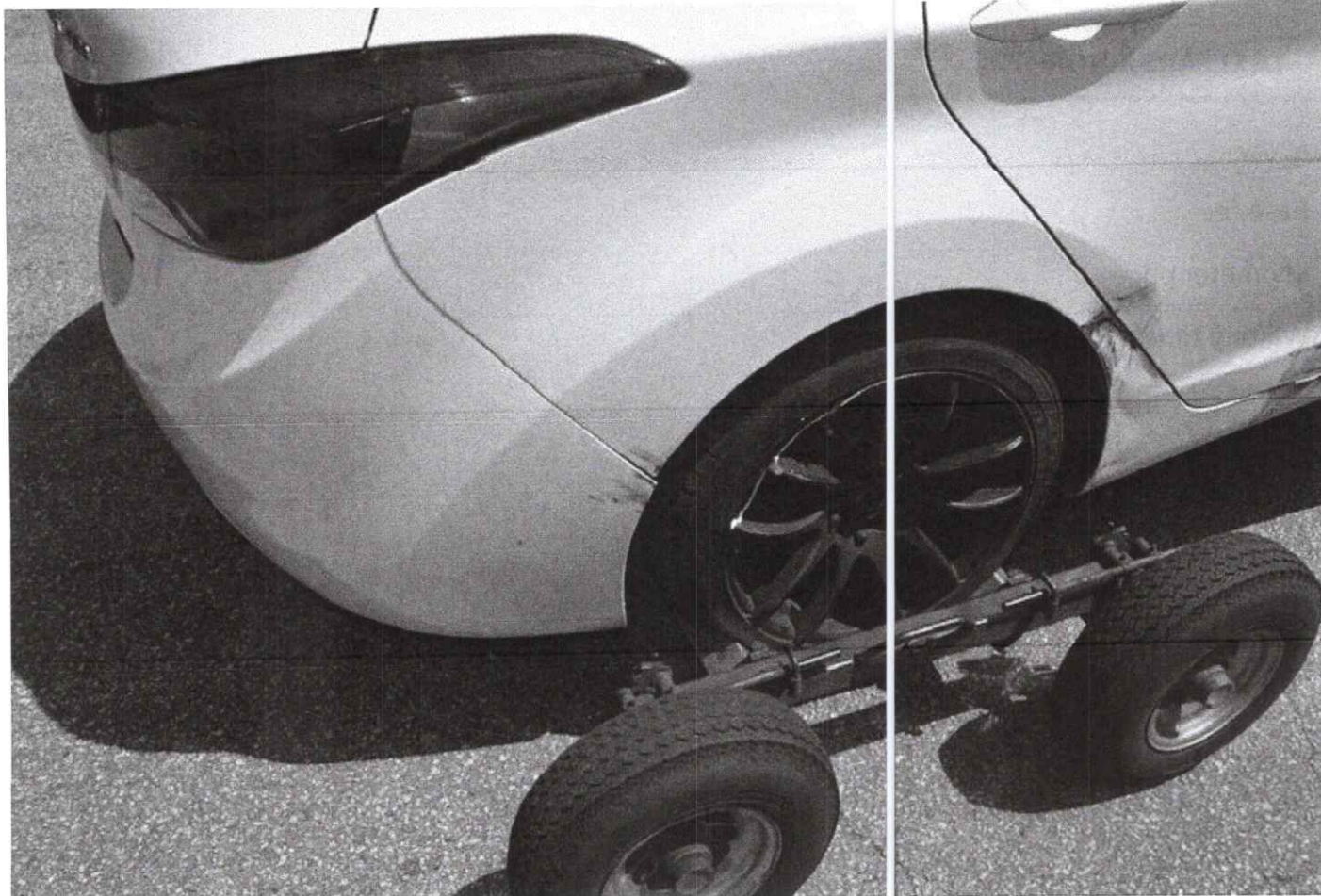


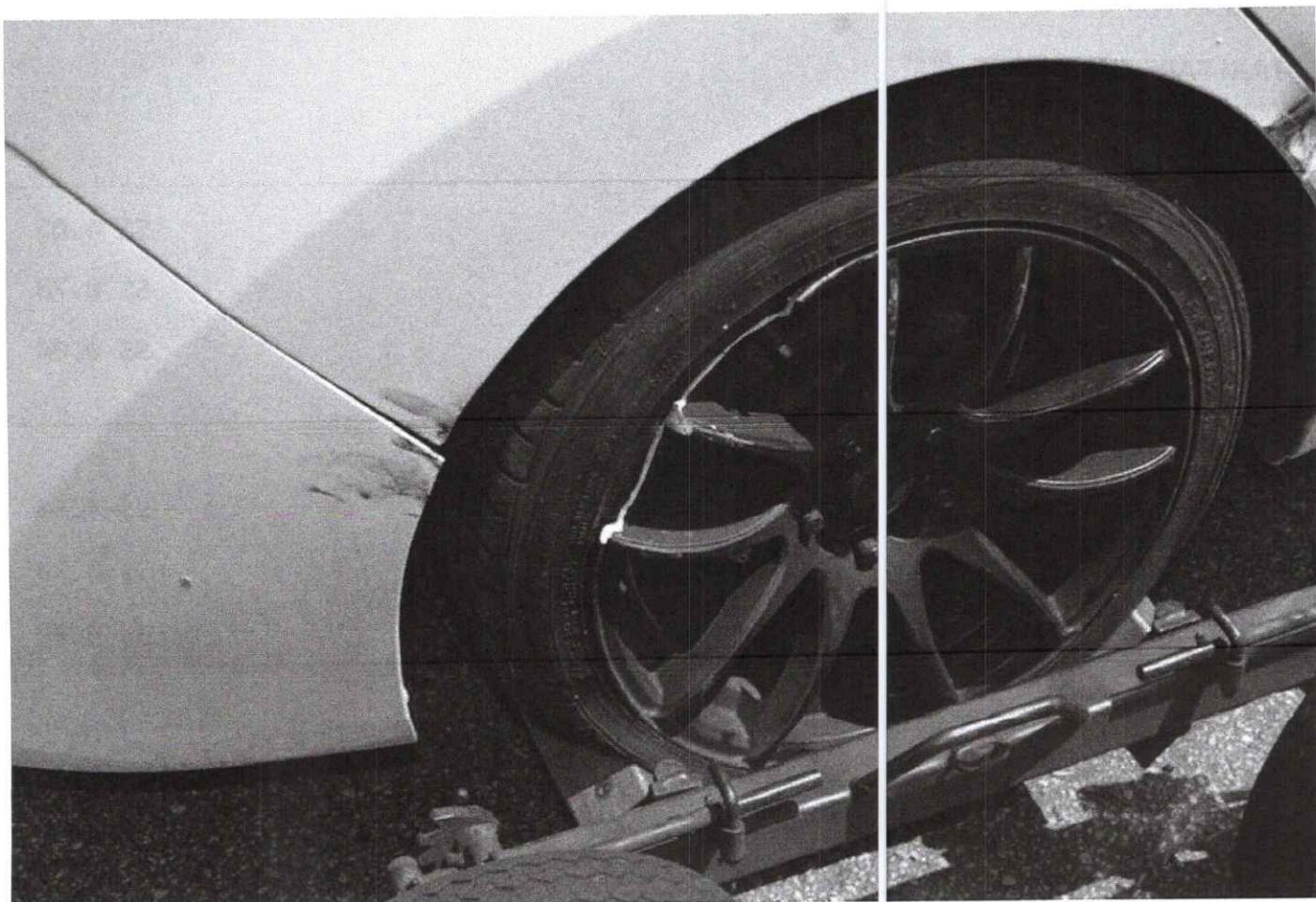


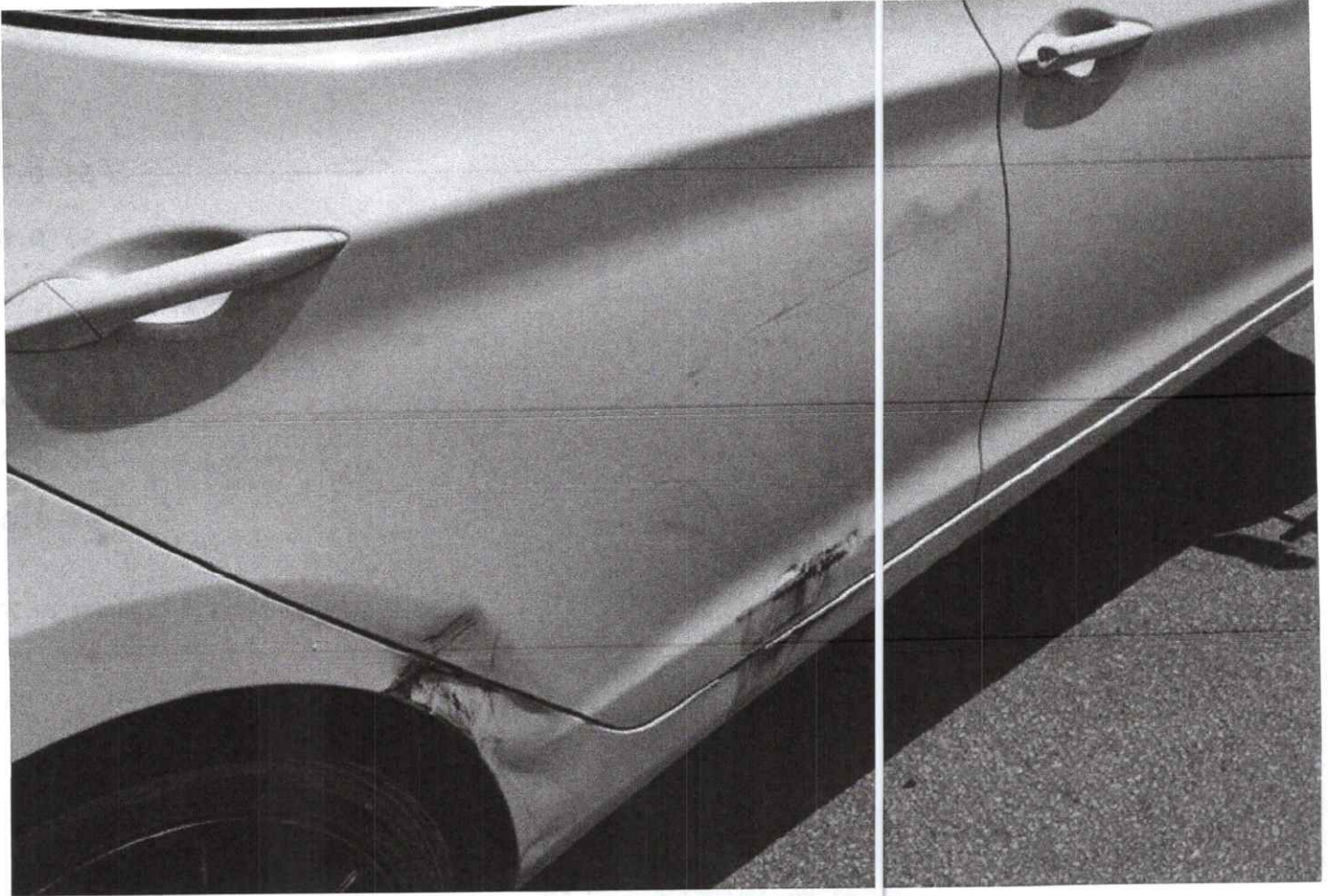


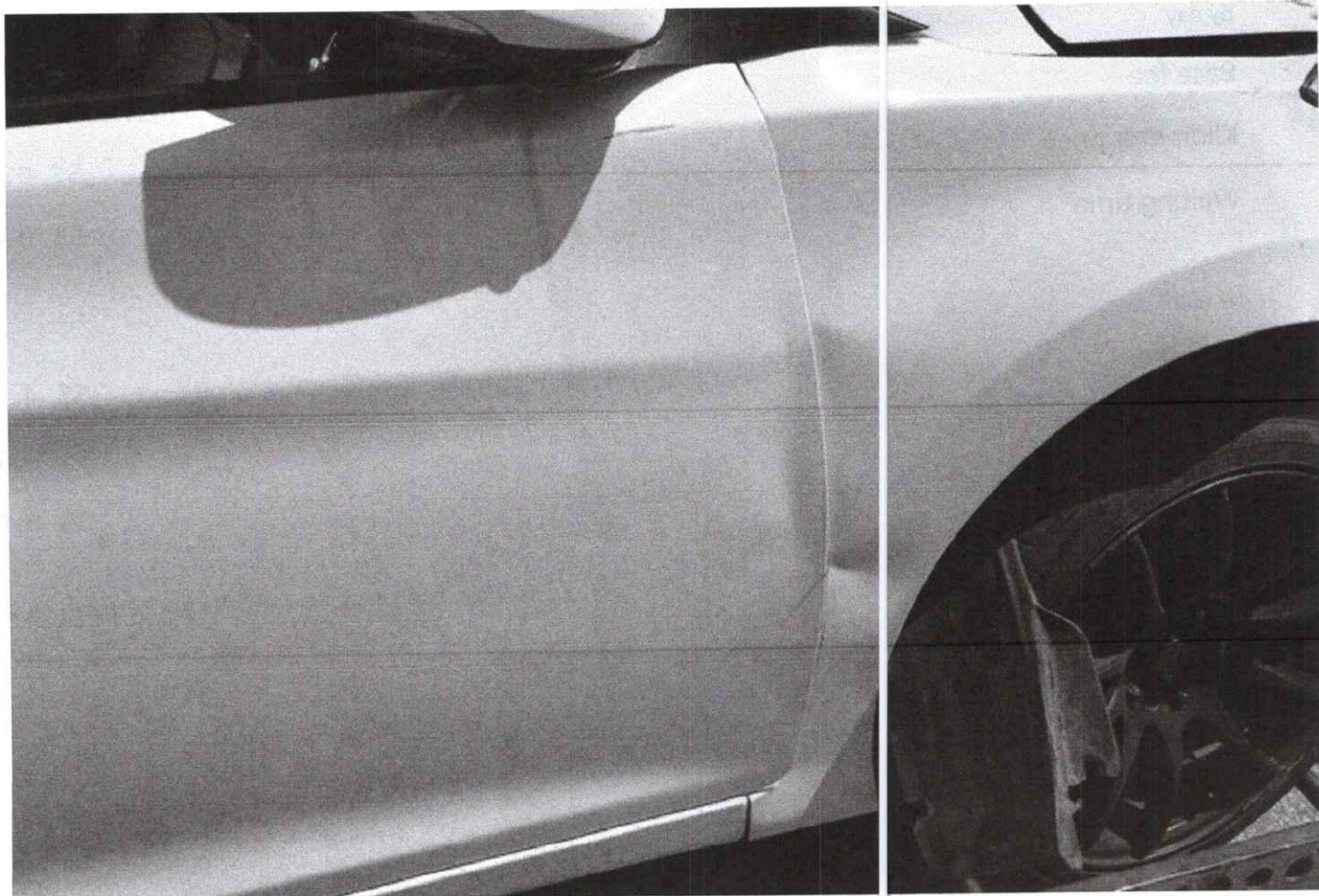


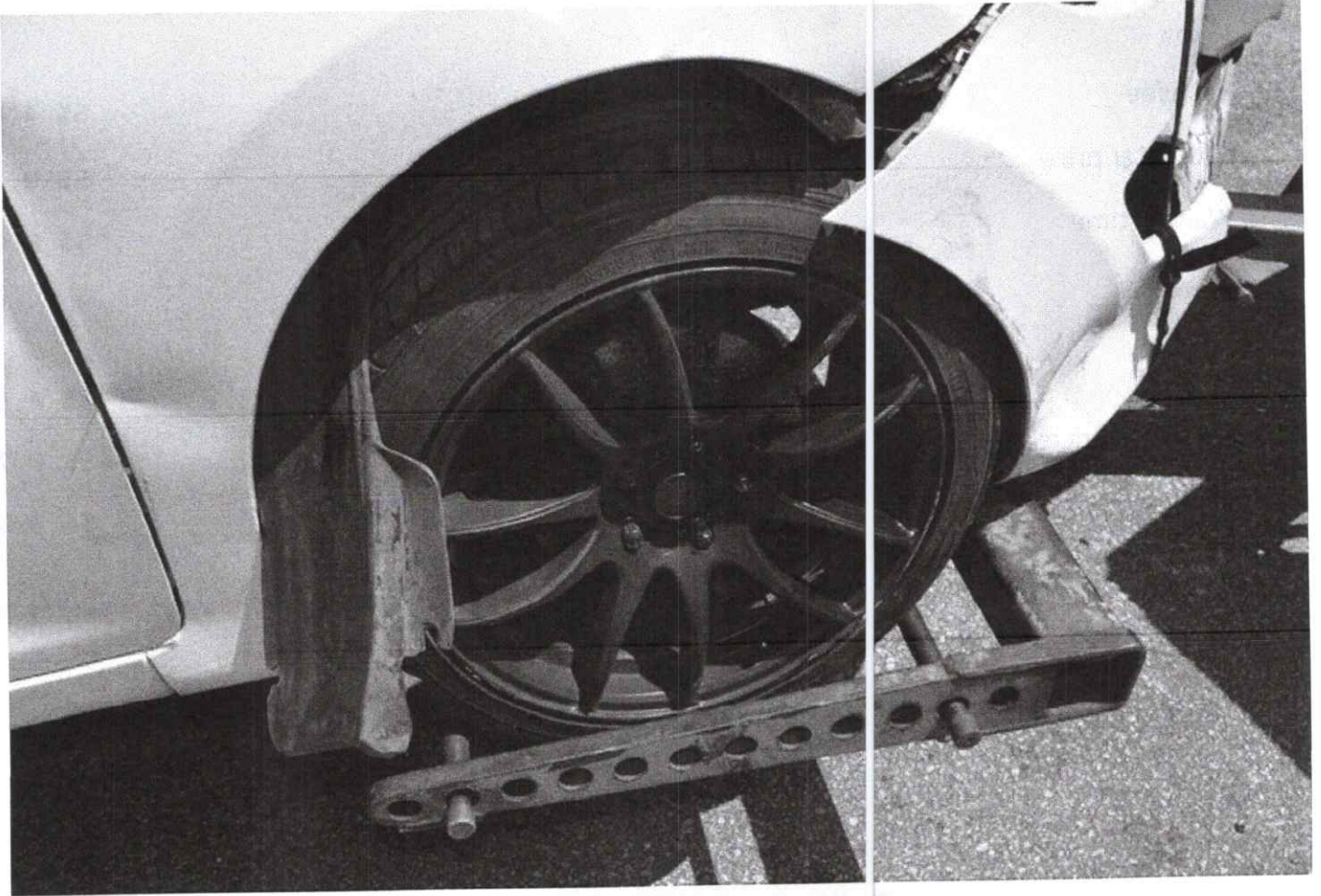


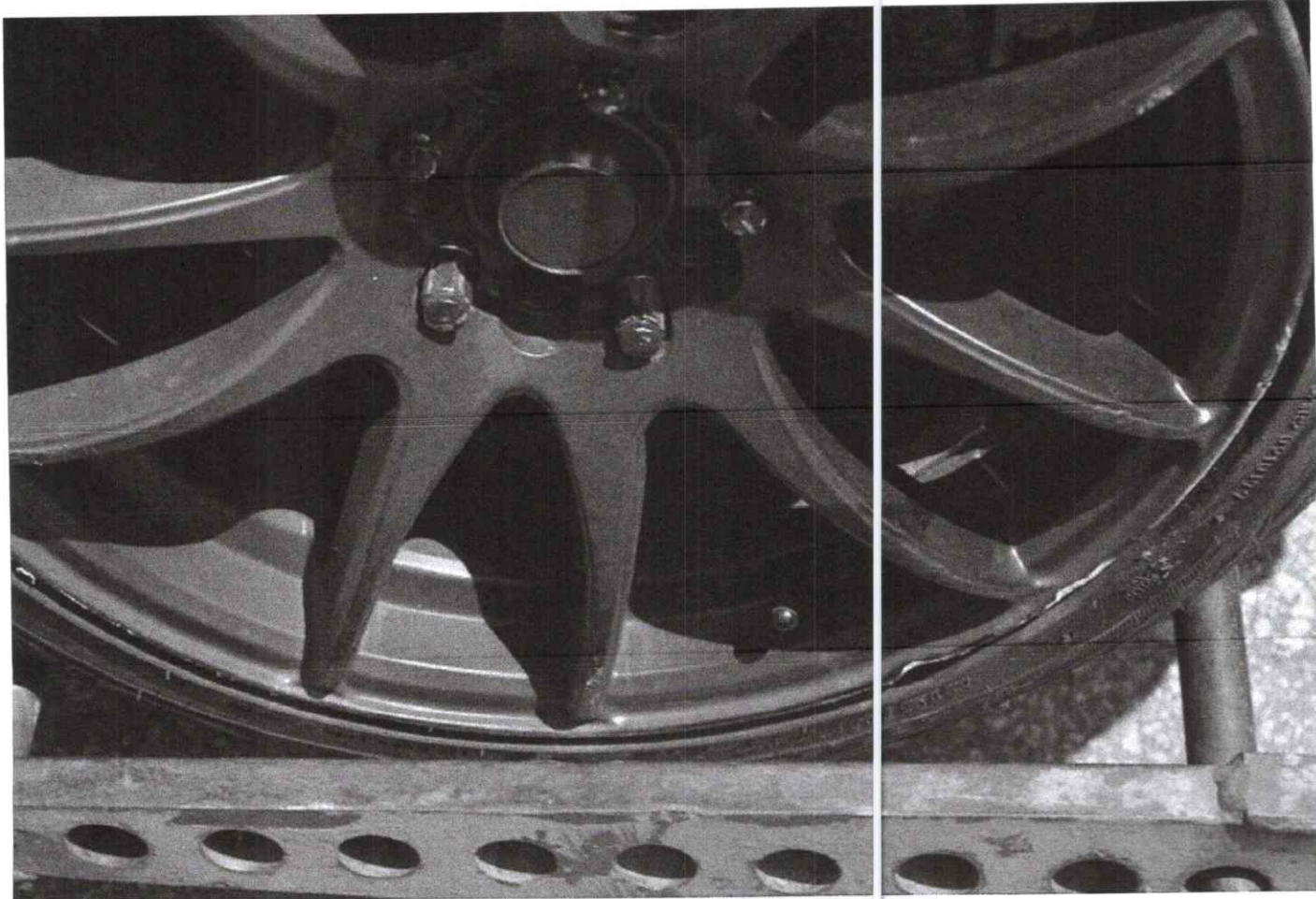


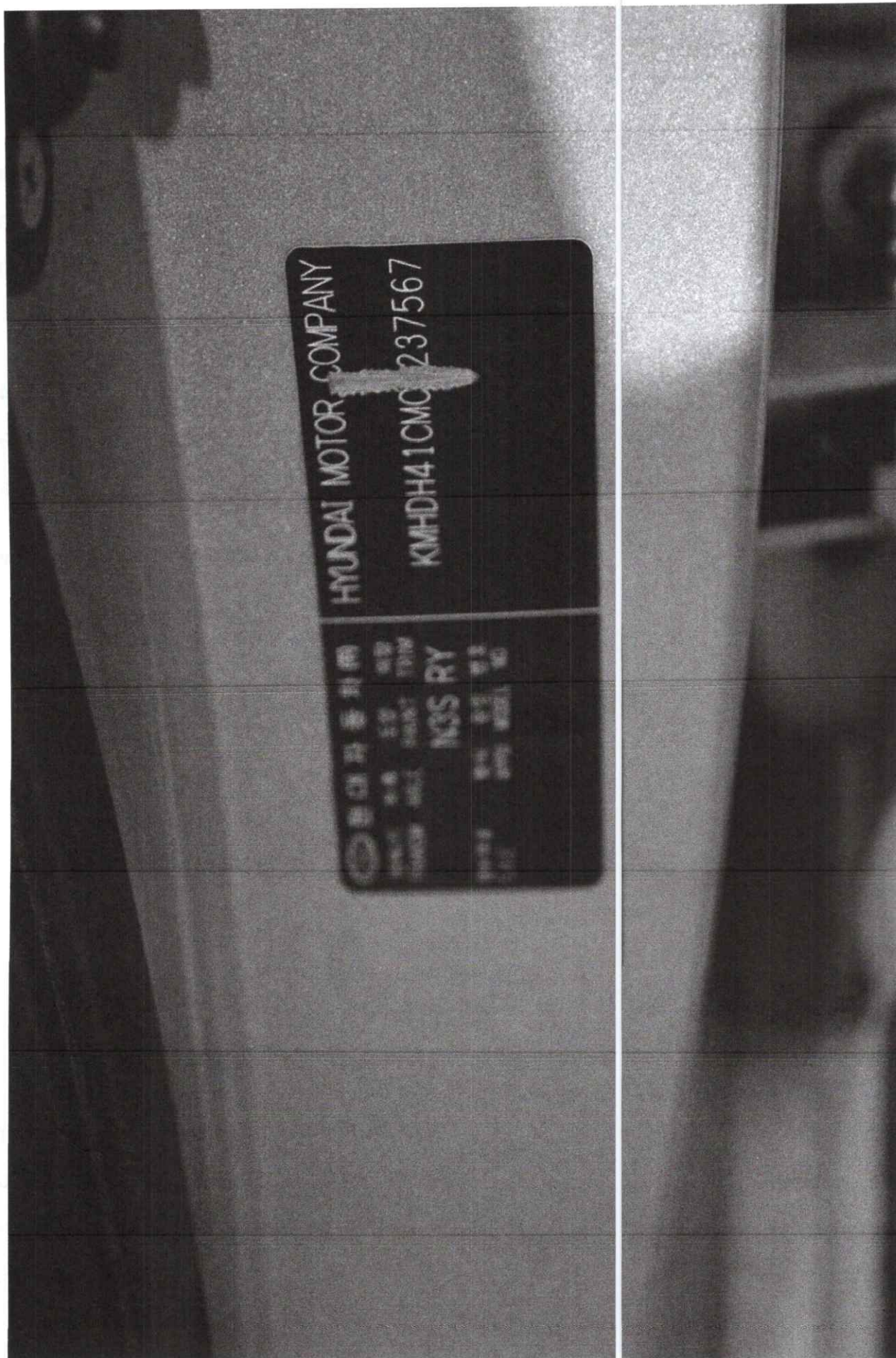













**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210620/7009

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Report No. T/20210620/7009

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/06/2021 12:46		Vide Report No.: F/20210619/0147		Station Diary No.:	
Informant's Particulars					
Name of Informant: NABIL SYUKRI BIN NORMAN					
ID Type / ID No.: NRIC N		Contact No.: Home/Office:		Mobile:	
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 30	Date of Birth: 01/06/1991	Type of Informant: Driver		Institution / School Name:
Race: Malay		Language: English			
Occupation: Manufacturing engineer (general)			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/06/2021 13:00	Type of Location: Expressway (PIE 23 KM/ PIE Exit 24)
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
SKC4152Y	Car	HYUNDAI	ELANTRA 1.6 AT ABS D/AB 2WD 4DR SR	White	Seriously Damaged	3
SLP6489H	Car	HONDA	Vezel	Red	Slightly Damaged	2



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210620/7009

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Report No. T/20210620/7009

CONTINUATION OF REPORT

Details of Vehicle Involved					Conditio	No of
Vehicle No.	Type	Make	Model	Color	Seriously Damaged	2
SMY 8113U	Car	HYUNDAI	Avante	Grey		

Details of Vehicle Insurance			Effective	Expiry Date
Vehicle No.	Insurance Company	Insurance No	25/03/2021	24/03/2022
SKC4152Y	OVERSEAS ASSURANCE CORPORATION LIMITED	V8010869		

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NABIL SYUKRI BIN NORMAN		ID No
Related Vehicle	SKC4152Y (Car)		Contact No.
Hospital/Clinic	NIL		Class of Driving Licence & Expiry
Date	NIL		Class: NIL Date of Expiry: NIL
No. of Days granted Medical Leave	NIL		Class: NIL
Passenger			
Name	SARAH UMMAIRAH BINTE JOHARI		ID No
Related Vehicle	SKC4152Y (Car)		Contact No.
Hospital/Clinic	NIL		Class of Driving Licence & Expiry
Date	NIL		Class: 3 Date of Expiry: NIL
No. of Days granted Medical Leave	01		Class: 3
Degree of		Slight	


**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210620/7009

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Report No. T/20210620/7009

CONTINUATION OF REPORT

Driver			
Name	NA CHEE SEA		ID No. S74891171
Related Vehicle	SLP6489H (Car)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 2B,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	CHAI WEIZHE		ID No. S8407819J
Related Vehicle	SMY 8113U (Car)		Contact No. 98258968
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

I was driving on lane 5 and keeping to the lane with the intention to exit to BKE on the left. A red car (SLP 6489H) from lane 4 swerved out into my lane just as I was passing it and hit the right rear end of my car and resulted in a loss of control of the steering wheel as the steering alignment was immediately out due to the hit. As a result, I crashed on the left front passenger door of the grey car (SMY 8113U) on lane 4. Prior to the incident, I did notice that the red car was erratically braking repeatedly for no reason but I did not expect him to switch lane as his signal lights had not indicated any intention. I have a video recording (6.97 MB in size) capturing the accident. The video recording file was shared with Investigating Officer Clarence via WhatsApp.

**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20210620/7009

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Report No. T/20210620/7009

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
JOFILIANO BIN MOHAMED ALI
Contact No.: 65476960

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
20/06/2021 12:40

Classification Of Case:

For Customer Service please visit
1 Pickering Street
#01-01 Great Eastern Centre
Tel: +65 6248 2888 Fax: +65 6327 3080

Certificate of Insurance



ORIGINAL

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation:
Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189 of the Revised Edition) (Singapore)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1996 Edition (Singapore)
Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaysia)
Road Transport Act 1987 (of Malaysia)
Road Transport (Amendment) Act 2019 (of Malaysia)

FORM MX1

Policy No. : 2021-V8010869-VAW-E002
Policy Type : AutoWise

Risk# : 0001
Cover : Comprehensive

DESCRIPTION OF VEHICLES:

Vehicle Registration : SK04152Y
Vehicle Make & Model : HYUNDAI - ELANTRA

Name of Insured : NABIL SYUKRI BIN NORMAN

Period of Insurance : 25-03-2021 (0000 HRS) to 24-03-2022

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE *

(a) The Policyholder.

The Policyholder may also drive a motor car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

(c) In the event of the death of the Policyholder; (i) any member of the Policyholder's family, or a paid driver who has been driving the car during the lifetime of the Policyholder & permission to drive has not been withdrawn prior to the death of the Policyholder; (ii) any other person who has been given permission to drive the vehicle prior to the death & such permission had not been withdrawn by the Policyholder.

* 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

LIMITATIONS AS TO USE

Use 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 or the carriage of goods (other than samples) in connection with any other trade or business or use for any purpose in connection with the Motor Trade.

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 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Authorised Signature

SPRING

05-04-2021

Great Eastern General Insurance Limited (Reg. No. 1920-0003VA)
(A wholly-owned subsidiary of Great Eastern Holdings Limited)
1 Pickering Street, #01-01 Great Eastern Centre, Singapore 048858
Tel: +65 6248 2888 Fax: +65 6327 3080 greateasterngeneral.com