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 21/06/2021 14:11 (SGT) Date of Accident 20/06/2021 03:49 (SGT) Exact Location of Accident Near 147 Carpmael Rd, Singapore 429893 Additional Location Information JUNC OF CARPMAEL ROAD AND DUNMAN ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SMU6999P

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner RAI BUILDERS PTE LTD Company Reg No SXXXXXX783K Email Address vinayrai2001@gmail.com Mobile Phone No (Phone) +65-96926999 Alternative Phone No +65-96926999

VEHICLE PARTICULARS

Manufacturer

Model Camry Variant Exact purpose for which vehicle was being used at time of **Employment** 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 2400

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage ThirdParty Fleet Policy Nο Policy Number GA557274/1 Cover Note Number

DRIVER

Name of Driver VINAY RAI NRIC No. TXXXX026B Date Of Birth 25/11/2001 Occupation Indoor Date Of Driving Pass 15/09/2020 Driving experience 9 MONTHS Gender Male Mobile Number (Phone) +65-91710153 Alt. Phone Number Email Address vinayrai2001@gmail.com Address 40 JALAN CHERMAT Address complement Postcode 538389 Is the driver the policyholder? Nο If No, Relationship of the Driver with the Insured **Employee** 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 Collision - Head to Rear Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO 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 Vehicle Manufacturer Vehicle Model	GBC3300A Toyota Dyna
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-83534586
Address	-
Address complement	-

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

WITNESS DETAILS

WITNESS 1

Name JOE YUE

Phone (Phone) +65-92309405

Email

SKETCH PLAN

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 interested parties.
- 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) of :
 - 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.

Driver's Signature

(If driver is not the policyholder)

Date & Time: 21/06/21

DM

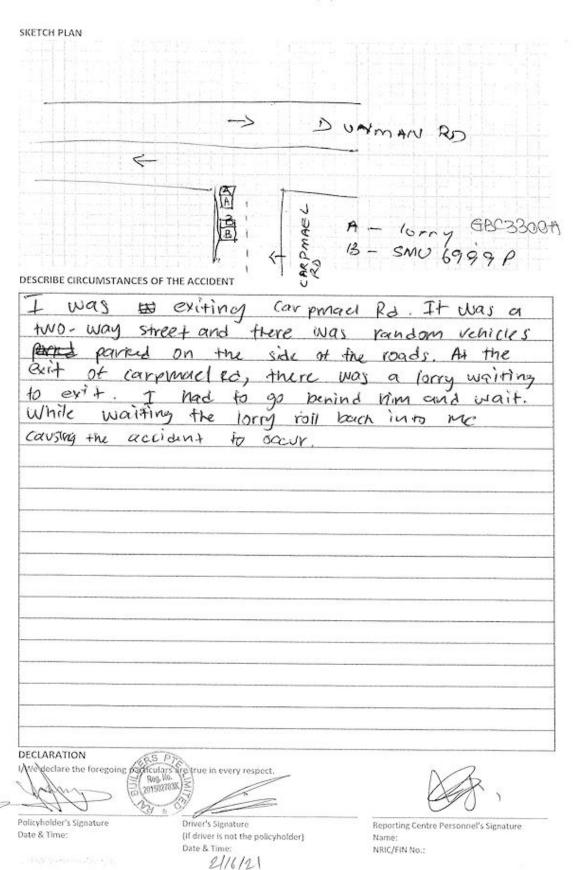
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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AXA Insurance Pto Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 Ed customer.care@axa.com.sg www.ava.com.sg

account number

04279

Certificate of Insurance

Policy details

Policyholder name

Period of Insurance

RAI BUILDERS PTE LTD

Certificate number

GA557274 / 1

Cover Plan name

Third Party Only Third Party

NCD applicable Vehicle registration number

SMU09999

from \$1/11/2020 to \$0/11/2021 (both dates inclusive)

Finance loan company -

Persons or classes of persons entitled to drive*

un) Any Named Driver as stated in the Policy:

(b) Any person who is desire on the Policylisider's order or with their permission

Provided that the person arrange is not maked in accordance with the incarring or other lives or regulations to drive the Motor Values or has been so porhitted and is not disqualified by order of a Count of Law or by reason of any exactneed or regulation in that behalf from criving the Motor Melacie.

Limitation as to use*

Use only for social, dominatic and pleasure purposes and for the Policyholder's business.

The policy does not cover-use for time or coverd, racing, pace-rawing reducate, their spread testing, the consing of good other than complete in county seen with any trade of Business of use for any purpose in conservice with motor hadator when the Motor Car, whether stationary, in use or extressible, when or one a mixing traph, circuit, muse, course or any other code by whatever name called that are typically used for raping, pace may higher such structure purposes.

Districtions involved respectation by Section 8 of the York World inschiner Party find world Description Acts (Diopest 280 and 27 and 95 of the Principles of A. 2567 infalls and A. and to be imposting these these insertings.

- 2. \$5.500 for declared Young and ascapersensed Driver

Additional clauses & endorsements to your policy

VWe hereby certify that the policy to which this Certificals related in accordance with the provision of the Major Vehicles (Third Party Piets and Congressation) Act, (Chapter 180) and Part V of the Road Nameport Act, 1967 (Majorsa);

AXA Insurance Pte Ltd

Important note

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