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.

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 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 30/03/2022 15:17 (SGT) Date of Accident 29/03/2022 09:05 (SGT) Exact Location of Accident Geylang East Central, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMV5758U

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **KOH TUAN HONG** NRIC No. S8460156Z Email Address tuanhongkoh.manson@gmail.com Mobile Phone No (Phone) +65-97879974 Alternative Phone No +65-97879974

VEHICLE PARTICULARS

Manufacturer Honda Model Fit 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 - Reporting only Vehicle Category Private car Transmission Auto CC 1300

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number GA554247 Cover Note Number

DRIVER

Name of Driver KOH TUAN HONG NRIC No. S8460156Z

Date Of Birth 25/07/1984 Occupation Indoor Date Of Driving Pass 15/02/2019 Driving experience 3 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-97879974 Alt. Phone Number +65-97879974 Email Address tuanhongkoh.manson@gmail.com Address BLK 82A CIRCUIT ROAD #19-60 Address complement Postcode 731082 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 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? Was any injured conveyed to hospital by ambulance? Was any other vehicle 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 VEHICLE B BRAKE AND STOP. I BRAKE BUT COULD NOT STOP IN TIME AND COLLIDED INTO VEHICLE B'S REAR PORTION ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SJV3066G Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver

Contact Number

Address complement

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

SKETCH PLAN

IMPORTANT NOTICE

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- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

Lunderstand, 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 & Tinxe

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

Witnessed by Reporting Centre Personnel

30/5/22

Sketch Plan



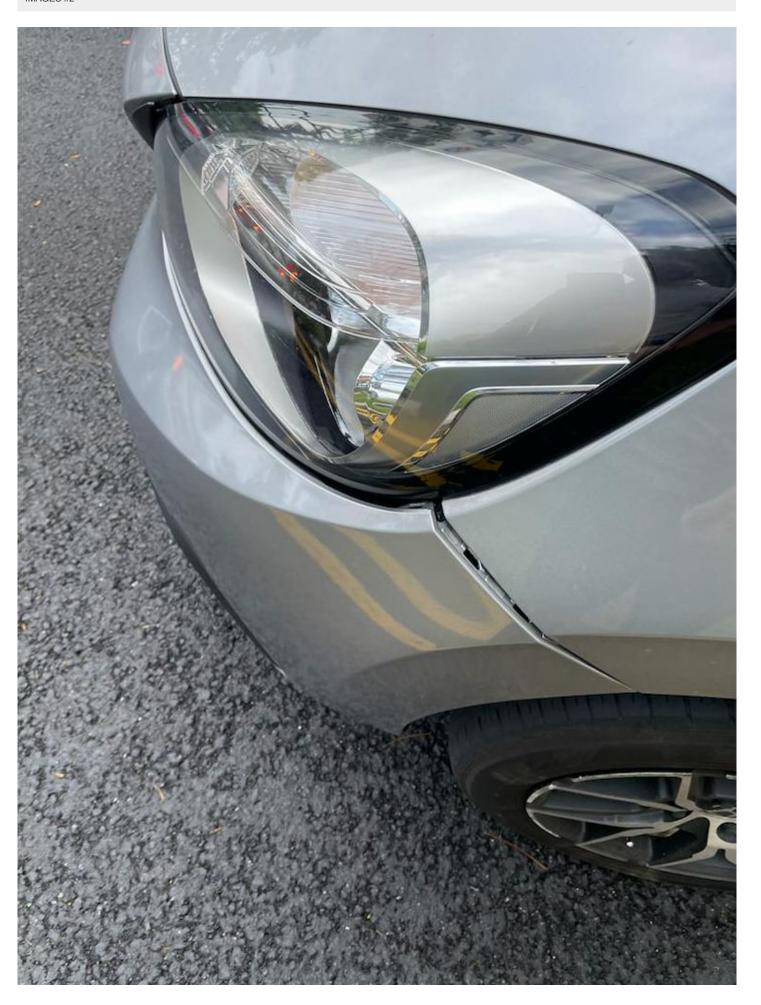
Describe Circumstances of the Accident

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LETTER OF UNDERTAKING

I/We, KOH TURN HONSEY	, the owner of vehi	cle no. SMV 57580
My/Our Insurance is under M/s AXA In claim under my/our Policy or against th such a claim to M/s AXA Insurance Pte within 14(fourteen) days of occurrence	e Third Party and if the f Ltd with all relevant fac	ormer shall submit
My/Our Third Party claim is handle by I	my/our preferred worksh	op,
Signed and Acknowledge by:		
Nric no. & signature of policyholder		30/.3/.>2_ Date

















redefining / insurance

AXA Insurance Pte Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 ⊠ customer.care@axa.com.sg

www.axa.com.sg

KOH TUAN HONG 82A CIRCUIT RD #19-60 SINGAPORE 371082 Renewal

date 27/09/2021

your servicing distributor ALLINK INSURANCE AGENCY PTE LTD /

04437

your servicing distributor contact 6567 4722

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name

KORTUAN HONG

Policy number

GA554247

Comprehensive

FIN / NRIC

XXXXX156Z

Period of Insurance

from 08/10/2021 to 07/10/2022 (both dates inclusive)

Premium breakdown

Gross Premium after 10% NCD Total Discounts 7% GST Final Premium SGD 1,815.72 - SGD 529.06 SGD 90.07 SGD 1,376.73

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Flexi Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Loss or Damage
- Legal Liability
- Workshop of Your Choice
- Medical and dental expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

Add-on Benefits

Off-Peak car

- Personal accident benefit of up to \$ 50,000,00 for you and your named drivers
- Personal accident benefit of up to \$20,000 per passenger

Vehicle details

Make & Model of Vehicle Vehicle registration number Body type

Seating capacity (excl driver)

HONDA FIT 1.3 SMV5758U HATCHB 4 No

Year of manufacture Type of Use Engine capacity (c.c.) Engine number

2020 Private use 1317 1.1381522308 GR11017025

Insured's Estimated Market Value Limitation to use

Market Value at the time of Loss (including accessories and spare parts)

As per Certificate of Insurance MAYBANK SINGAPORE LTD

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess Windscreen Excess

Finance Loan Company

SGD 400.00 SGD 100.00

AXA Insurance Pte Ltd (199903512M) 8 Shanton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01

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