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.

- 4. The issue and acceptance of this is form by instrained 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 27/04/2022 17:05 (SGT) Date of Accident 26/04/2022 12:40 (SGT) Exact Location of Accident Singapore Additional Location Information DRAYCOTT PARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Lexus

Vehicle Registration Number SJD708C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner HILLARY SUMIJATI WONG NRIC No. S2222550B Email Address BESBILT@GMAIL.COM Mobile Phone No (Phone) +65-97545456 Alternative Phone No (Home) +65-97545456

VEHICLE PARTICULARS

Manufacturer

Model Rx350 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 Transmission Auto CC 3500

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number GA581246/1 Cover Note Number

DRIVER

Name of Driver WONG KUM WAH NRIC No. S0003736B

Date Of Birth	06/08/1948
Occupation	Indoor
Date Of Driving Pass	13/04/1966
Driving experience	56 YEARS
Gender	Male
Mobile Number	(Phone) +65-94568718
Alt. Phone Number	-
Email Address	BESBILT@GMAIL.COM
Address	56 DRAYCOTT PARK
Address complement	-
Postcode	259399
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	NO
Verificie (registration) Number of Other Verificie Owned by Driver	_
Insurance Company of Other Vehicle Owned by Driver	
mountained company or other vertices owned by Briver	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	
Nodu Gundee	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	-
Was any injured conveyed to hospital by ambulance?	No
	- V
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	Na
soliciting/offering accident claims assistance?	No
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Na
Was notice of intended Prosecution given?	No
_	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
	INT
PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEME	INI.
ATTACHMENT(S)	
Are accident photos available for attachment?	Vaa
	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vahiola Bagistration Number	ODIVACAD
Vehicle Registration Number	GBK263B

Vehicle Registration Number	GBK263B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SIM SENG KOON
NRIC No	S1432650B
Contact Number	(Phone) +65-98564815
Address	-

Address complement	-
Postcode	-
nsurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	REAR PORTION
No. Of Passenger (Including Driver)	_

Anvor	in trant stormed after moving last of	Draggett Park
/ / / /	who the the	ulided the rear
of Ve	in front stopped afer moving left of upable to grop in time, and coencile B.	made me real
- 07 VG	DIEGE B.	
The state of the s		
		-11
claration		
declare the foregoing particula	rs are true in every respect.	
	1	
	IIa A	
	INAMIV	
cyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centre

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 <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.
- 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' lawyers/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 w ith 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.

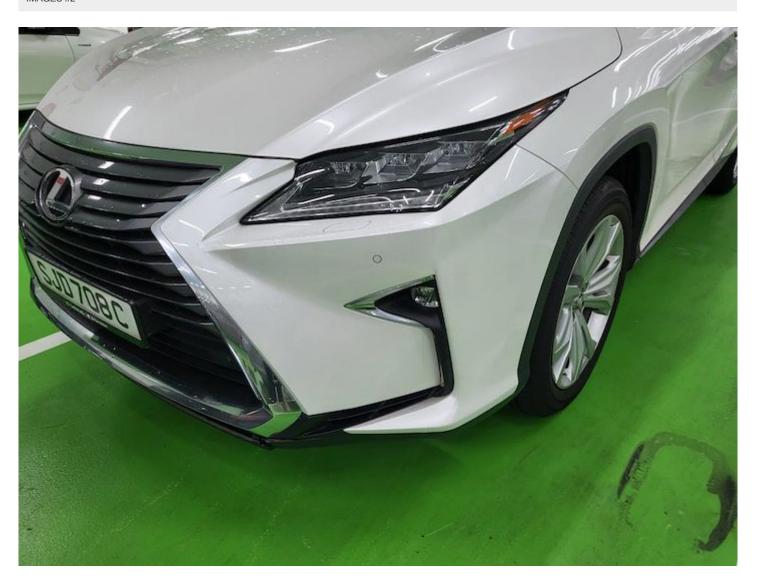
Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel

Sketch Plan

Claymord A - 8JD 708C
B - GBK D63B
Draycott

Draycott

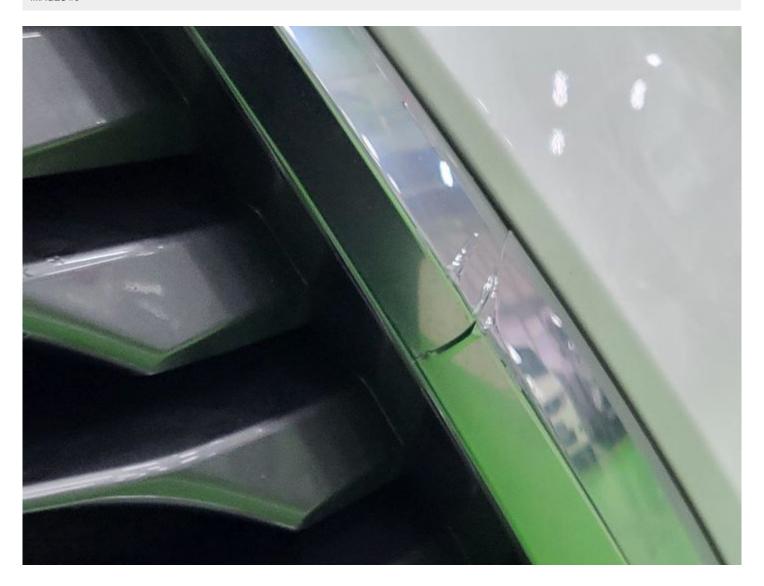
















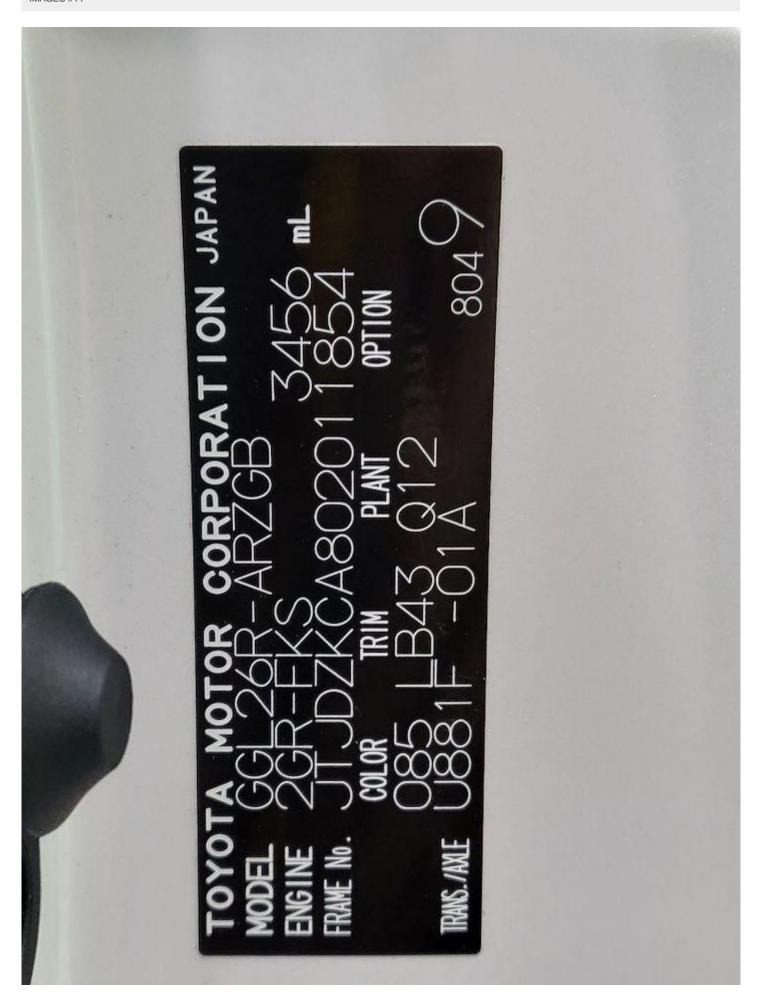














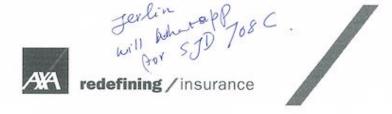




IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

	ADDEND	им			
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:				
	Original Report No: SBOG > 24POOT	_ Vehicle Registration No:_	SJD FOPC		
	Name (as shown in NRIC): HILLARY SUMIJATI WONG	NRIC/FIN/Passport No: _	SXXX550B		
	(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate				
	Address:		Singapore (
	Contact (Tel):	Mobile No.:			
	Email Address:				
	Date of Accident: 26/4/20>2	_ Time of Accident:	:40		
	Place of Accident: DRAYCOTT PARK				
	Insurance Company:AXA .				
(D)	ADDITIONAL INFORMATION /AMENDMENTS:				
	TO GIANGE TO REPORTING ONLY				
			A.		
	Policyholder / Driver's Signature Date:	Reporting Centre Pers Name: NRIC/FIN No.:	onnel's Signature		

GIARMC Addendum Form



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

Certificate of Insurance

account number

04123

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 number

Chassis number

Engine number

Policy details

Policyholder name Cover Plan name NCD applicable Vehicle registration number

HILLARY SUMUATI WONG Comprehensive Essential 20% SMN1448H

from 20/08/2021 to 19/08/2022 (both dates inclusive) STANDARD CHARTERED BANK (SINGAPORE) LIMITED

GA581246 / 1 JTJDZKCA802011854 2GRK556619

Persons or classes of persons entitled to drive*

Period of Insurance

Finance loan company

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

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.

Limitation as to use*

Use only 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, the carriage of goods other than samples in connection with any trade 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 on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* 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.

EXCESS

Basic Own Damage Excess Windscreen Excess

SGD 500.00 SGD 100.00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued 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

Authorised signature

Important note

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).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate. endorsement etc.

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #81-01

1 of 2