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 07/03/2022 12:39 (SGT) Date of Accident 05/03/2022 14:30 (SGT) Exact Location of Accident Singapore Additional Location Information TAMAN JURONG SHENG SIONG SUPERMARKET OPEN **CARPARK** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SNB1022D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SIR DWI ASTUTI NRIC No S7074686G Email Address taykahsafety@gmail.com Mobile Phone No (Phone) +65-83083117 Alternative Phone No +65-83083117

VEHICLE PARTICULARS

Model Prado 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 2700

Manufacturer

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number GA582495 Cover Note Number

DRIVER

Name of Driver MUSTAFFA TAY KIM CHIEW NRIC No S1667578D Date Of Birth 28/10/1964 Occupation Indoor Date Of Driving Pass 16/03/1985 Driving experience 37 YEARS Gender Mobile Number (Phone) +65-90609895 Alt. Phone Number Email Address taykahsafety@gmail.com Address BLK 22 MARSILING DRIVE #05-103 Address complement Postcode 730022 Is the driver the policyholder? Nο 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 Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collided into Parked Vehicle 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 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 05/03/2022 AT 1430HRS, VEHICLE B (FBS5428T) WAS PARKED ILLEGALLY AT DOUBLE YELLOW LINE INSIDE SLOP ROAD

AND WAS PARTIALLY BLOCKING SOME DRIVING SPACE FOR THE SLIP ROAD. I WAS DRIVING (SNB1022D) WHILE TRYING TO PARK IN ONE AT THE PARKING LOTS, ACCIDENTALLY PUSHED THIS MOTORCYCLE CAUSING IT TO FÁLL. NO ONE WAS ON THE MOTORCYCLE AS IT'S ENGINE WAS OFF AND PARKED ILLEGALLY. NO ONE ELSE WAS INJURED AT ALL.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBS5428T Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Motorcycle Name of Driver

Contact Number	-
Address	_
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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- 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)

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")

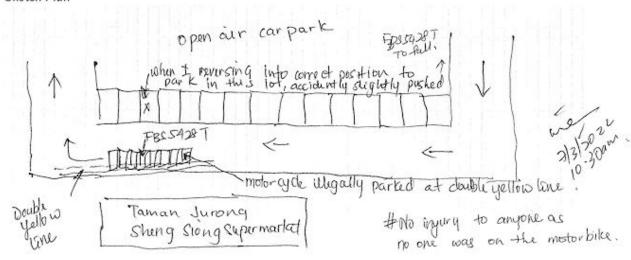
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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 &

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident
Deti: 05-03-2022
Localion: Taman surong carporte Sup Road.
Defails:
1) FBS 54227 was parting at allegally at double yellow the inside step road and was partially budging some thiring spall for the stop road
af the parking 1012 D, while trying to park in one af the parking 10ts, accidently pushed this motorcycle consing it to fall.
2) No one was on the motortycle as its engine was aff and parted illigally.
4) No one eles was injuned at all.
/

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date & Time 7/3/20 2 2 10.30 a.m.

Witnessed by Reporting Centre Personnel

LETTER OF UNDERTAKING

I/We, Sni Dwi Asterti	, the owner of vehic	le no. SNB 1022
My/Our Insurance is under M/s AXA la claim under my/our Policy or against the such a claim to M/s AXA Insurance Pto within 14(fourteen) days of occurren	ne Third Party and if the for the Ltd with all relevant facts	ormer shall submit s and documents
My/Our Third Party claim is handle by	my/our preferred worksho	op,
Signed and Acknowledge by:		07-62-2022
Silver & signature of relieved allow	Company stamp	
F. VIII		07-63-20. Date

















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

New business

date 03/09/2021

your servicing distributor MONEYMAX ASSURANCE AGENCY PTE LTD / 18197

your servicing distributor contact 9856 0763

SRI DWI ASTUTI APT BLK 22 MARSILING DRIVE #05-103 SINGAPORE 730022

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name

Cover

SRI DWI ASTUTI

Policy number

GA582495

Period of Insurance

Comprehensive from 03/09/2021 to 02/09/2022 (both dates inclusive)

FIN / NRIC

XXXXX686G

Premium breakdown

Gross Premium after 0% NCD Total Discounts 7% GST Final Premium

SGD 1,639.63 - SGD 174.22 SGD 102.58 SGD 1.567.99

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

Vehicle details

Make & Model of Vehicle Vehicle registration number

Body type

Seating capacity (excl driver) Off-Peak car

TOYOTA PRADO 2.7 SNB10220 SUV 6

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

2008 Private use 2TR0601314 TRJ1205110915

Insured's Estimated Market Value Limitation to use

Finance Loan Company

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

As per Certificate of Insurance MONEYMAX LEASING PTE LTD

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

No

Basic Own Damage Excess Windscreen Excess

SGD 700.00 SGD 100,00

Drivers details

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