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 17/06/2022 11:37 (SGT) Date of Accident 16/06/2022 16:30 (SGT) Exact Location of Accident Woodlands Ave 1, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SI X3391H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LOO AH CHENG @ TAN PECK HUA NRIC No S0132490Z Email Address CHENG.DOUGLAS@YMAIL.COM Mobile Phone No (Phone) +65-96841638

+65-96841638

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Previa Variant PREVIA AERAS 2.4 CVT MR

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? Vehicle Category Transmission

CC

Yes Private car Auto 2362

Private use

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Policy Number GA532702/1

Cover Note Number 26/03/2022 - 25/03/2023

DRIVER

Name of Driver CHENG HONG TAK (ZHENG KANGDE) NRIC No S7335681D

Date Of Birth 18/09/1973 Occupation Indoor Date Of Driving Pass 24/02/1995 Driving experience 27 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-96841638 Alt. Phone Number Email Address CHENG.DOUGLAS@YMAIL.COM Address 273 YISHUN ST 22 Address complement #12-92 Postcode 760273 Is the driver the policyholder? Nο If No, Relationship of the Driver with the Insured Child 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 - U-Turn Weather Conditions Clear Road Surface \/\e_t 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE SKETCH PLAN BY DRIVER 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	SMQ6905G
Vehicle Manufacturer	- -
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	QUEK CHECK HONG
NRIC No	S0096219H
Contact Number	-
Address	_

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

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.
- 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.
- 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 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.

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

17/04/2022

NRIC/FIN No.:

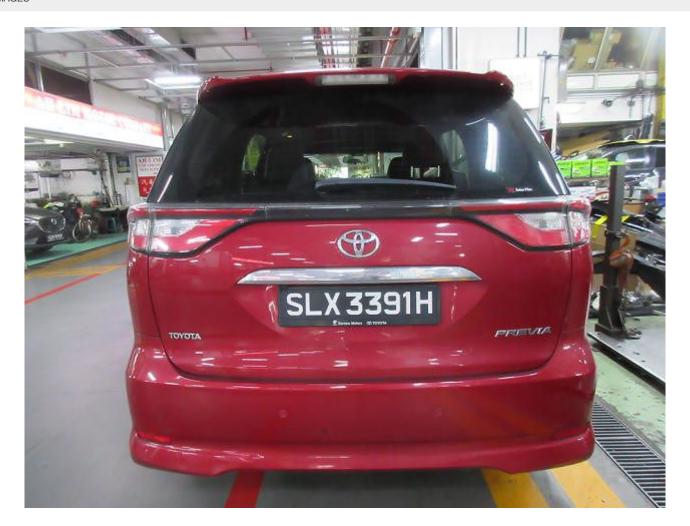
Reporting Cer

Name:

COMPLETED 17 JUN 2022

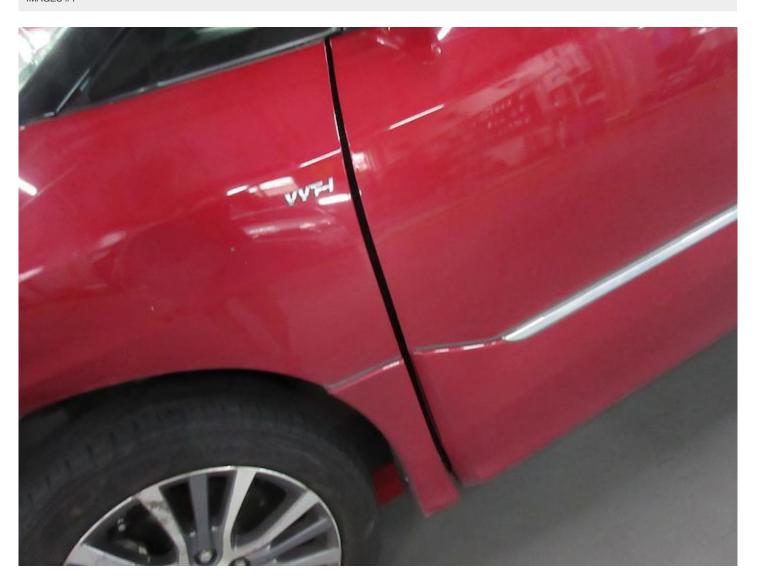
e Personnel's Signature

KETCH PLAN	391 H Vehicle B: SMQ 69	065CVehicle C:
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ESCRIBE CIRCUMSTANCES	S OF THE ACCIDENT	
On ICH June 2	1022 at 4:30pm, 1 w	and driving along woodlends
Avenue 1 towar	rds the traffic junction	along Woodlern Ave 3.
1 proceed to ma	kea U-tun at the;	unction after checking there
was no incum	198 reschile como for	Wordland Gartrei Read.
Haltwar dusc	the Utum the reclaim	woodland Gentral Road. inu SMQ 6965 C suddenly
- History was a	THE CHICAL THE ABOUTE	5119 21.1 CE 183 C 3 (COM)
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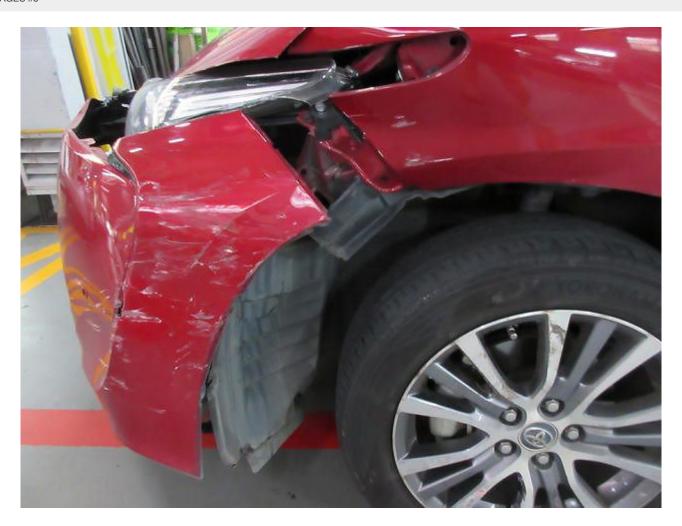


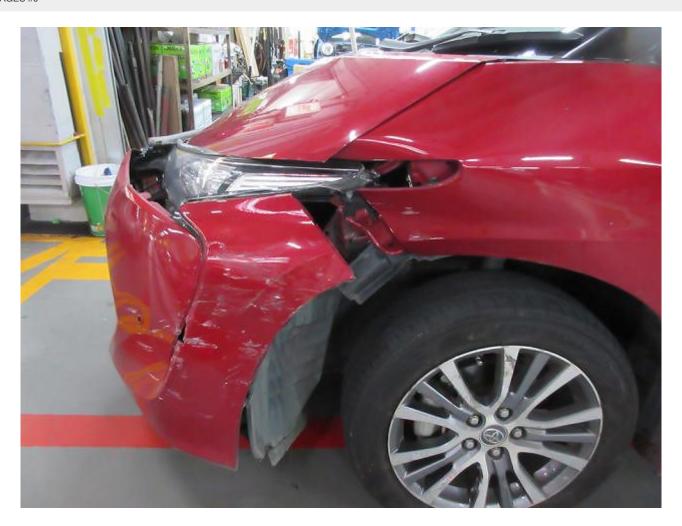




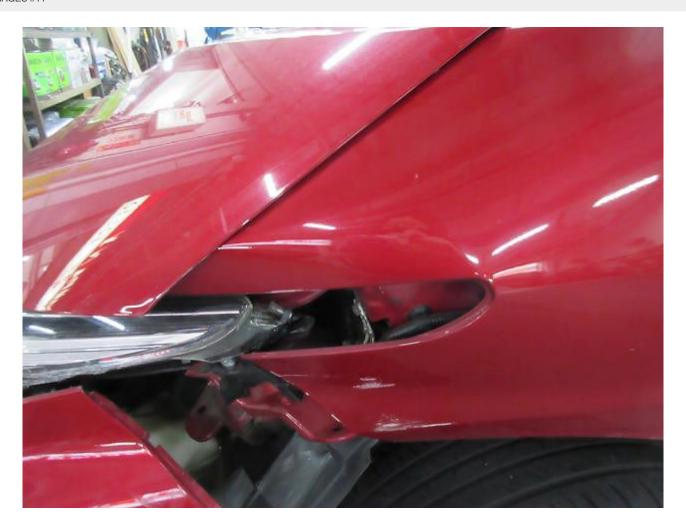




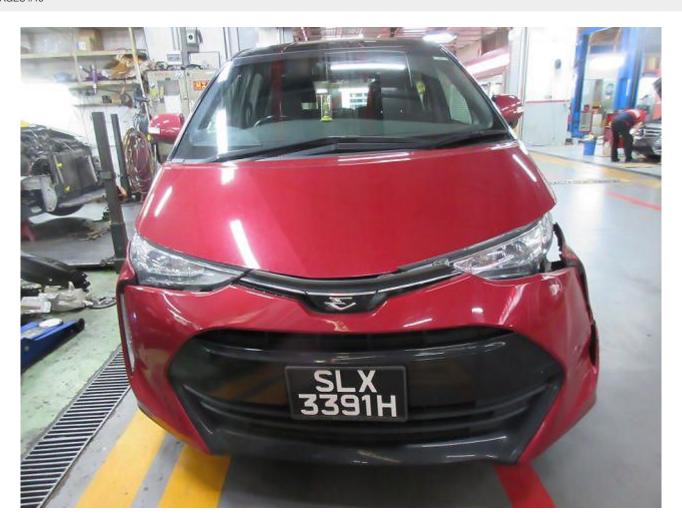




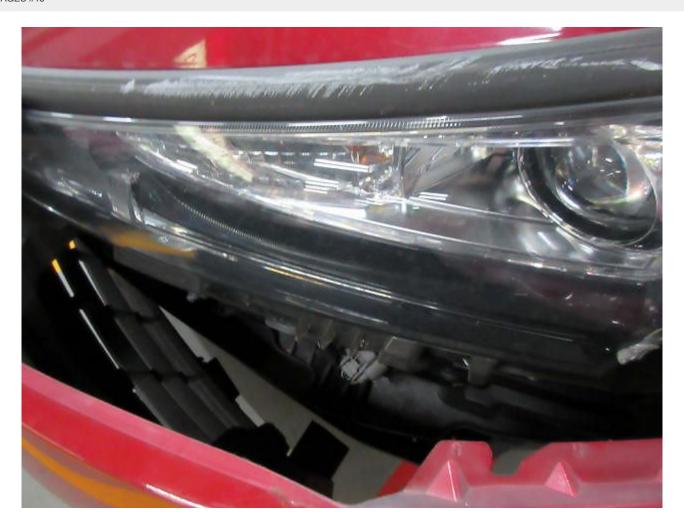














POLICYHOLDER ACKNOWLEDGEMENT FORM

Date:	17 JUN ZUZZ	To: Owner of Vehicle Number:	JLX 3391H		
The fo	ollowing has been advised to y	you via your workshop, AH LIM MOTOR C ease tick the applicable box if you had been adv	OMPANY through their staff rised on any of the following:		
/	You had been advised by the workshop that in the case that you wish to claim against your own policy is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the of occurrence.				
1	You had been advised by the	workshop on the liability and merits of the case	accordingly.		
()	due to this accident. if fire damage ar However, there was if fire damage a	workshop on the claims procedure for the type and you claim under your own insurance, any as will be no recovery prospect and NCD will be and you are claiming against the Third Party,	pplicable excess will be waived affected. your NCD will not be affected		
()	You have agreed to let AXA a be towed out to another work \$200 off on your \$200 as a benef	acovery is not guaranteed, and AXA will not be assign a workshop for your vehicle repairs. In kshop assigned by AXA. In return, you will get: ir Basic Own Damage Excess or fit if your policy has \$0 excess and no Loss of Use Benefit if your ponefit.	the process, your vehicle might		
()	There will be delay to your ve option except to indent it from	ehicle repair due to the unavailability of spare pa n overseas.	arts locally and there is no other		
N	placed. If you wish to cancel	/withdrawal of the Own Damage claim once the sl/withdraw the claim, you shall bear all costs, y to the procurement of the spare parts.	order of spare parts have beer expenses &/or related charge		
()	The estimated waiting time fo arrival time does not include to	or the spare parts to arrive isTB/4_ the repair period.	. The estimate		
()	You will be driving the vehicle may not be road worthy.	out despite being advised by the workshop med	hanic/ personnel that the vehicle		
/	use only original parts to repa For vehicles above three (3) company will be carrying out part that needs to be replace	years old or under warranty with a local distribut air your vehicle. years old and no longer under warranty with a repairs where any damaged part that can be re ced will be replaced using any combination of (M) parts and/or second-hand parts.	local distributor, your insurance epaired will be repaired and any		
()	workmanship related to the ac For vehicles that are under wa	ne workshop of the Twelve (12) months warran ccident. arranty with a local distributor, you have been ac any effect to your warranty prior to making this C	fvised by the workshop to check		
4		WA PAMAGL	wii Dainage Claiii.		
Signe	d and acknowledged by:				
4	hoto				
"author who ar	rized driver to either the named drive re permitted to drive the insured Vehic	r/ authorized driver* and company stamp (where as per motor insurance policy or in the case of coricle.	ere applicable) nmercial vehicles, permitted drivers		
Vi19	Ah Ling Mctor Company	Name and signature of workshop person	nel including company stamp		
	COMPLETED 17 J	1131 2022			
	O'O'LL In he I he to	ACT			

	To Whom It May Concern, SLX 339 1H
3	Accident involving my vehicle no. 16/04/2022 on 16/04/2022 (date) with BNQ (905G(other vehicle no) along _We all calls five
	1, Loo Ah Cheng Nric No. S 6132496-
	Owner of vehicle no. SLX 3331H am aware of the accident of my vehicle on 16/61/2622 (Date) while car was driven by Cheng Hong Take
Χ	Nric No. 37335(810). Thereby, authorise him / her to make the report.
	Name Los Ah Cheng
	Date: 17/66/2022
	To fill in if there is a OD claim
	I am aware of the circumstances and agreeable to claim my own insurance for the above accident.
X	y for
	Name Los Ah Cheng Date: 17/61/2022





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

date 15/03/2022

policy number GA532702

account number 20584

-Motor Vehicles (Third-Party Risks and Componsistion Let. (Chapter 189) - Motor Vehicles (Third-Party Risks and Componsation Rules, 1980-Road Transport Act, 1987 (Motoysto) - Motor Vehicles (Third-Party Risks) Rules, 1989 (Mataysto)

Policy details

Policyholder name

LOO AH CHENG GYAN PECK HUA

Certificate number Chassis number

Engine number

GA532702 / 1 JTEGD5GM507158783

2AZ1AG2042

Cover Plan namo NCD applicable Vehicle registration number Comprehensive Toyota Prostigo Max

50%

Certificate of Insurance

5LX3391H

from 26/03/2022 to 25/03/2023 (both dates inclusive)

Finance toan company UNITED OVERSEAS BANK LIMITED

Authorized Drivers

(a) The Policyholder

Period of Insurance

(b) Any Named Driver as stated in the Policy:

(c) 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 of the motor vehicle is connected to the Policyholder's business
- Use for the carriage of passengers (besides commercial hire or reward) in connection with the Policyholder's business
- Use for social, demestic, and personal purposes 0

The Policy does not cover:

- Use for commercial hire or reward, or for racing, pace-making, reliability trail, or speed testing
- Use while drawing a trailer, except for the towing of a disabled person's mechanically propelled vehicle 0
- Limitations rendered inoperative by Section 8 of the Mater Vehicles (Third Party Risks and Compercation) Act. (Chapter 189) and Section 95 of the Read Transport Act. 1987 (Malaysia), are not to be included under these headings.

EXCESS

Basic Own Damage Excess

Windscreen Excess

SGD 500.00 Not Applicable

Young/Inexpenienced driver excess

An additional excess of \$2500 (to be added to any excess imposed under the Policy) whilst the Insured MotorCar is being driven by any driver aged below 23 years old and /or has been issued a valid driving license to drive in Singapore for the relevant class of vehicle for less than one year

Young and/ or Inexperienced driver shall mean any person who :

- Is less than 23 years old , and/or
- Has been issued with a valid driving license to drive in Singapore for the relevant class of vehicle for less than 1 year

Additional clauses & endorsements to your policy

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

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

1 of 3