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	15/06/2022 15:44 (SGT)
Date of Accident	14/06/2022 18:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Yishun Avenue 9
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND5148M

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Saaban Bin Yusop
NRIC No	S1479338J
Email Address	saabanyusop20@gmail.com
Mobile Phone No	(Phone) +65-91272719
Alternative Phone No	(Home) +65-68933314

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish 1.8
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA609444
Cover Note Number	-

DRIVER

Name of Driver	Nur Hatika Binte Saaban
NRIC No	S9400307E

Date Of Birth	06/01/1994
Occupation	Indoor
Date Of Driving Pass	08/06/2013
Driving experience	9 YEARS
Gender	Female
Mobile Number	(Phone) +65-98419906
Alt. Phone Number	-
Email Address	nurhatika06@gmail.com
Address	Blk 485B Choa Chu Kang Avenue 5
Address complement	#02-118
Postcode	682485
Is the driver the policyholder?	No
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 - Change/cross lane
Weather Conditions	Clear
Road Surface	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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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

Refer to sketch plan

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	FBN5121D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	Ansel Eric Martin
Contact Number	(Phone) +65-98214663
Address	297 Yishun Street 20
Address complement	#08-69

Postcode	760297
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	Refer to photo
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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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 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

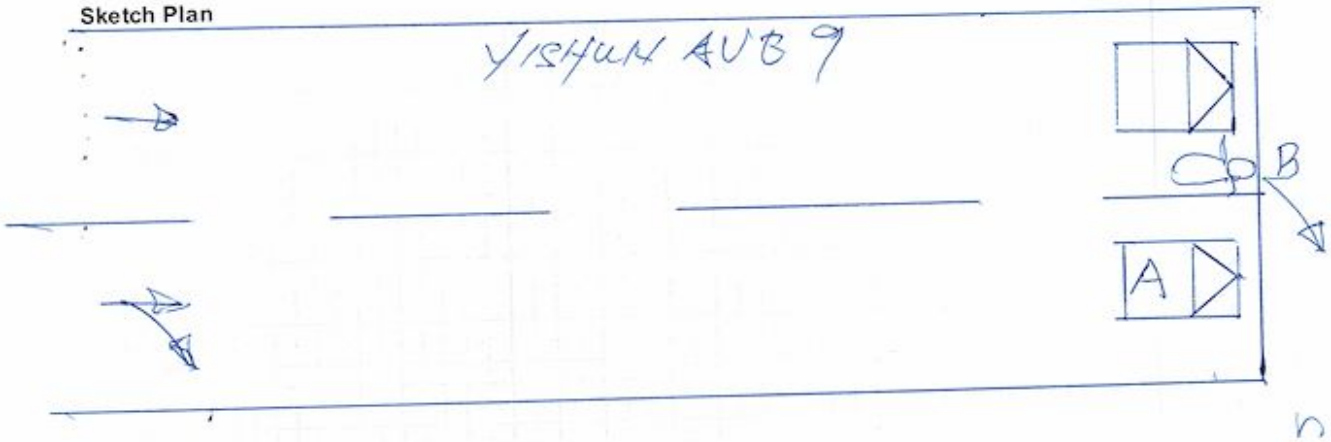
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Martin Hor Hatika 15-06-2022 1150am

HIN LUNG WORKSHOP

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

Sketch Plan



A) SNA 5148M

B) FBN 5121D

Martin

Describe Circumstances of the Accident

I had left my clinic, on my way back home. I was stationery at traffic light Junction of Yishun Avenue 9, on the extreme right lane as the traffic was red. There was a silver car beside me on the left lane. I was preparing to go straight while waiting for light to turn green, a motorcycle then stopped in between me and the silver car, closer to the silver car.

When traffic turn green, I release my foot from the brake pedal. While my car was starting to move forward very slowly, the said motorcycle from my left cut into my path thus creating a collision. I immediately put my foot back on the ~~pedal~~ brake pedal however collision still took place.

I immediately on the hazard light and came down to assist the rider and his pillion. They both claimed that they were alright. Then I questioned the rider "Why he had come to my lane?" The rider then replied "I was going to turn right." I then asked "But you are on my left side, how could you turn right because I was going straight."

Then for safety reason, we moved the vehicles to the side to exchange particulars that was when I heard it was the riders new bike and the pillion was first time on his bike.

Declaration

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

Nur Hatika 15.06.2022 1150am

HIN LUNG WORKSHOP

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

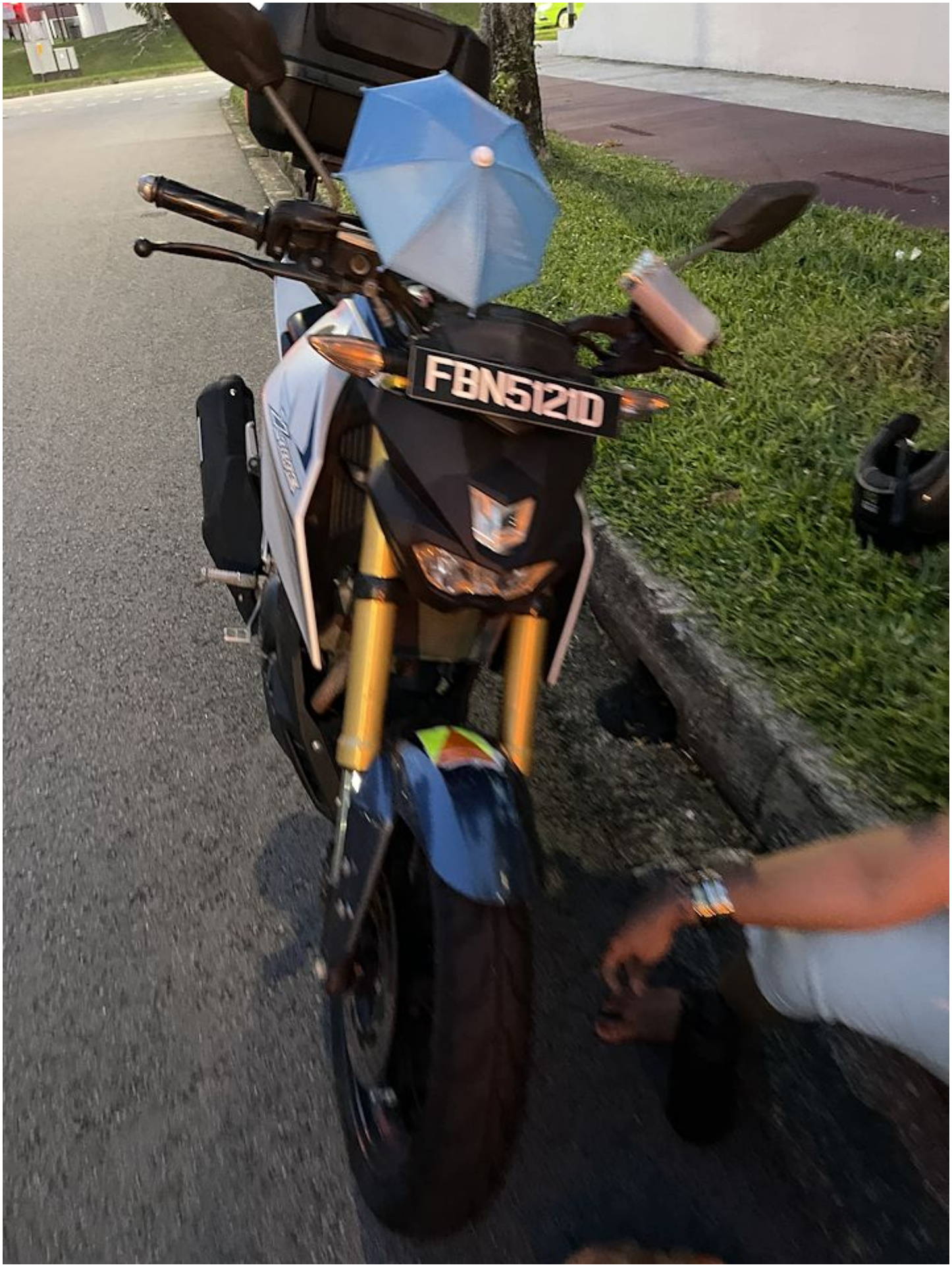
IMAGES #5

IMAGES #6

IMAGES #7


TOYOTA MOTOR CORPORATION JAPAN
MODEL ZGE20R-HPXNP
ENGINE 2ZR-FAE 1798 mL
FRAME No. JTDGG20W80J008559
COLOR TRIM PLANT OPTION
3R0 FA12 A32
TRNS./AXLE K311 -02A 529

IMAGES #8



IMAGES #9

IMAGES #10

IMAGES #11

IMAGES #12