SS2X22AI000B / SME MOTOR PTE LTD ENTRY DATE & TIME: 18/10/2022 15:06 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (18/10/2022 15:06 (SGT))

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 Actual 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 18/10/2022 15:06 (SGT) Reported by Date of Accident 15/10/2022 07:20 (SGT) Exact Location of Accident 717 Tampines Street 72, Block 717, Singapore 520717 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMY2681K

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **HUZAINI BIN HUSSAIN** NRIC No S6838696I Email Address HUZAINIHUSSAIN9756@GMAIL.COM Mobile Phone No (Phone) +65-92383874 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Toyota Model Estima 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 2400

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Policy Number / Cover Note Number GA568977

DRIVER

Name of Driver **HUZAINI BIN HUSSAIN** NRIC No S6838696I Date Of Birth 09/10/1968 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	11/08/1989 33 YEARS AND 2 MONTHS Male (Phone) +65-92383874 HUZAINIHUSSAIN9756@GMAIL.COM BLK 187 PASIR RIS STREET 11 #02-92 510187 Yes No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? 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? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's email Original language used in the statement PASSENGER 1 Name Gender DETAILS OF POLICE ACTION Was the accident reported to the police?	LOGANATHAN PERUMAL Male
Was notice of intended Prosecution given? If yes, against whom?	No -
CIRCUMSTANCES OF ACCIDENT	
I WAS GOING STRAIGHT. SUDDENLY, VEHICLE B REVERSE H	IIS VEHICLE AND HIT MY VEHICLE FRONT LH PORTION.
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	SHD3584X - -

Vehicle Colour	-
Vehicle Category	Taxi
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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5. Any false reporting may be referred to the Traffic Police Department for investigation.

- This report will be forwarded by the insurers to 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 with my claims.

(collectively the "Purposes")

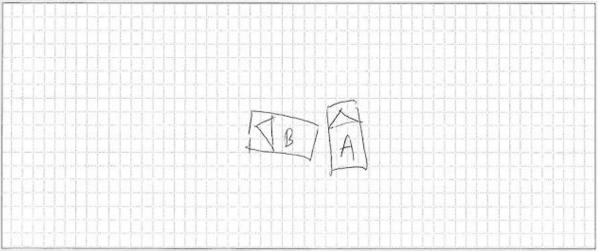
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the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

Policyholder's Signature / Date & Time

Oriver's Signature (if driver is not the policyholder) / Date 8 Time

Witnessed by Reporting Centre Personnel (Name as in NRICriD card)

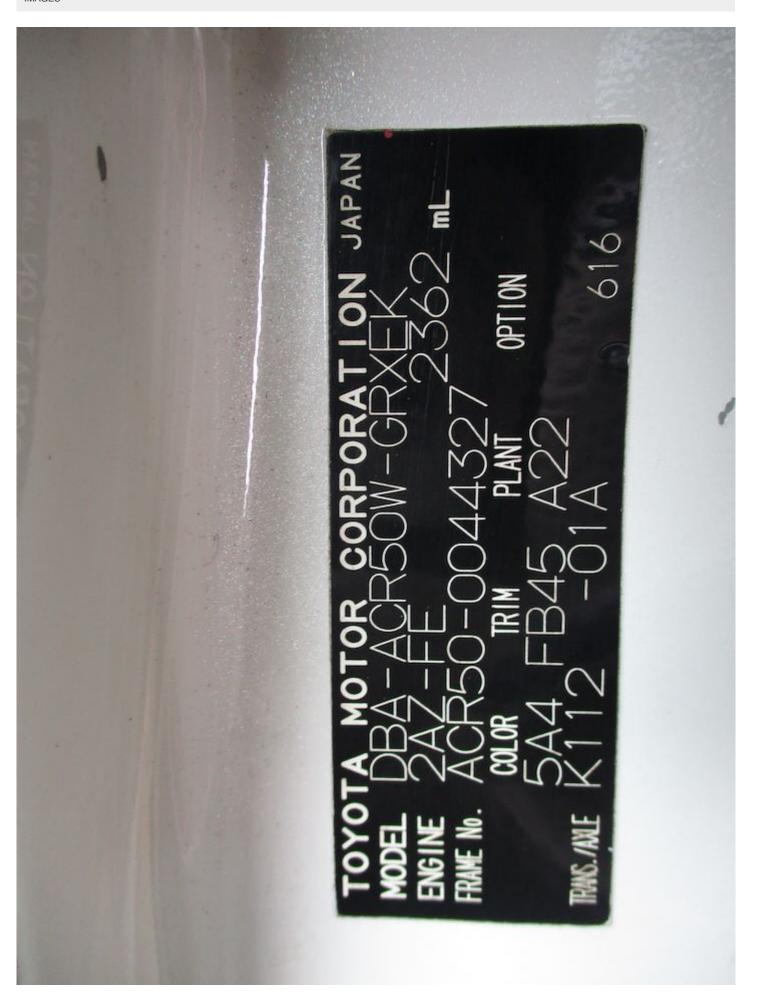
Sketch Plan



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was going straight, suddenly vide's yet a hit my new front	ut protion-
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4	
claration e declare the foregoing particulars are true in every respect.	
al 1919an.	
byholder's Signature / Date & Time Driver's Signature (if driver is not the policyholder) / Date	Witnessed by Reporting Centre Personnel

LETTER OF UNDERTAKING

I/We, HUZAINI BIN HUSSAIN	, the owner of vehic	cle no. Smy 2681F
My/Our Insurance is under M/s AXA In claim under my/our Policy or against the such a claim to M/s AXA Insurance Pte within 14(fourteen) days of occurrence	e Third Party and if the fo Ltd with all relevant fact	ormer shall submit is and documents
My/Our Third Party claim is handle by i	my/our preferred worksh	op,·
Signed and Acknowledge by:		
Nric no. & signature of policyholder	Company stamp	Date















#02-92

HUZAINI BIN HUSSAIN

SINGAPORE 510187

187 PASIR RIS STREET 11

redefining / insurance



AXA biserance Pto Ltd.

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

⊠ customencaro@axa.com.sg

Www.nxa.com.sg

Renewal

date

05/04/2022

your servicing distributor

DICKSON INSURANCE AGENCY FYELYD /

17120

your servicing distributor contact

6668 1161

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name

HUZAHII BIN HUSSAIN

Policy number

GA568977

Cover

Comprehensive

FIN / NRIC

XXXXXXG961

Period of Insurance

fr

from 87/05/2822 to 86/05/2823 (both dates inclusive)

Premium breakdown

Gross Premium after 50% NCD Total Discounts

7% GST

Final Premium

SGD 812.84 - SGD 43.34 SGD 53.87 SGD 823.37

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential Benefits

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

Add-on Benefits

Off-Peak car

e No Claim Discount Protector

Vehicle details

Make & Model of Vehicle Vehicle registration number TOYOTA ESTIMA 2.4 SMY2681K MPV Year of manufacture Type of Use 2007 Private use 2362

Body type Seating capacity (excl driver)

6 No Engine capacity (c.c.) Engine number Chassis number

2AZF061116 ACR500044327

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)

Basic Own Damage Excess Windscreen Excess SGD 400.00 SGD 100.00

Drivers details

1012

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

