

## 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 withholding of material facts may allow insurance companies to repudiate policy ability
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 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 Report	07/12/2015 09:20
Date Of Accident	06/12/2015 23:50
Exact Location Of Accident	ALONG BUKIT TIMAH TOWARDS TOP WHITLEY ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBC278B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SIM HONG KEE @ ALICE LONG
NRIC No	S1474444D
Email Address	ALICELONG001@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97986211
Alternative Phone No	Office-97986211

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF A7 1.2 TSI TL BMT (DSG)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Private Car

### Insurance Company

Name of Insurance Company	AXA Insurance Singapore Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	VPA/P1625538
Cover Note Number	

### Driver

Name of Driver	LONG THENG SHIUNN,NICHOLAS
NRIC No	S9405290D
Date Of Birth	14/02/1994
Occupation	Indoor
Date Of Driving Pass	07/07/2015
Driving Experience	0 Year And 4 Month
Gender	Male
Mobile Number	(Local) +65-97494966
Fax Number	(Local) +65-97494966
Contact Number	
EEmail Address	NICHOLASLONG1994@GMAIL.COM

Address	136A HILLVIEW AVE #05-04
Postcode	669606
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Children
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	Unknown - REFER TO SKETCH PLAN
Weather Conditions	Clear
Road Surface	Dry

#### Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No
Number of Passengers (Including Driver)	2

#### Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

#### Circumstances of Accident

Are accident photos available for attachment?	Yes
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#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD9707P
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	MR TAN BOON TAT
NRIC/Passport Number	S7430253Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

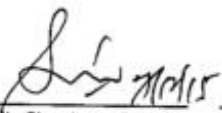
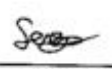
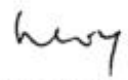
Name	
Phone Number	
Email Address	

## Sketch Plan

### SKETCH PLAN

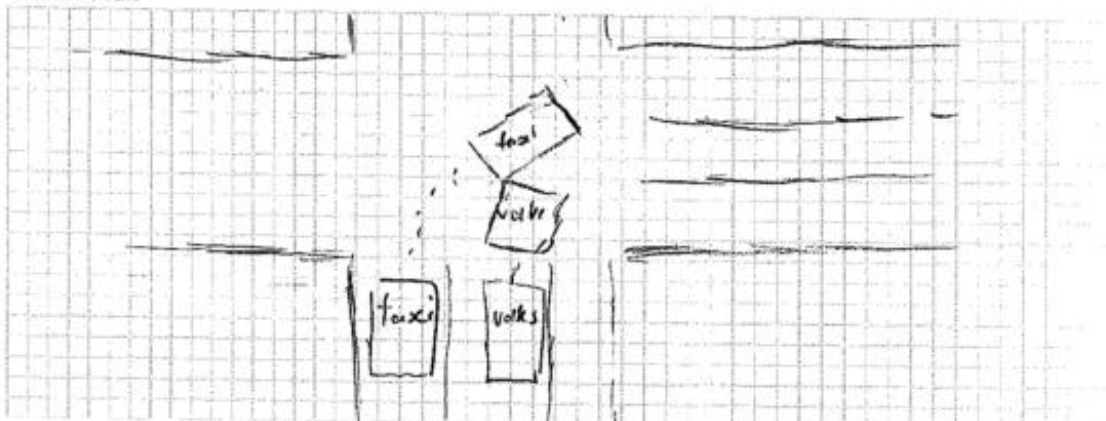
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**  
I understand, 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.

  07/12/15 

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

#### Sketch Plan



**Describe Circumstances of the Accident**

There was an accident on 06/12/15 at 11.50pm which involved taxi driver Mr Tan Boon Tat S74302532, vehicle number: 3409707P. The accident occurred at the traffic junction where both vehicles were on Bukit Timah Road waiting to turn right to Whitley Road. The taxi driver was positioned on the outer left lane while my vehicle was on the center lane. Once the traffic light had turned green, I was making a right turn, during this process, the taxi vehicle I suddenly heard a bang. The left front of my vehicle got hit by the taxi.

## Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time  
 [Signature] 07/12/15

Witnessed by Reporting Centre  
Personnel

AXA INSURANCE SINGAPORE PTE LTD  
 8 Shenton Way, #27-01  
 AXA Tower, Singapore 068811  
 Customer Service Centre #B1-01  
 Tel:(65)63387288 Fax:(65)63382522  
 Website:www.axa.com.sg  
 GST Registration Number: M2-0009922-2  
 customer.service@axa.com.sg



PRIVATE MOTOR  
 POLICY SCHEDULE  
 NEW BUSINESS  
 Original

<b>POLICY INFORMATION</b>		Policy No. : VPA/PI625538
Source	: (01) 07894 ARF (AP) PTE LTD (VW)	
Insured	: SIM HONG KEE @ALICE LONG	
Address	: 136A HILLVIEW AVENUE #05-04 MERAWOODS SINGAPORE 669606	
Business/Profession	: TEACHER Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance : From 22/05/2015 To 21/05/2016 (Both Dates Inclusive) Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.		
<b>PREMIUM</b>		
Premium After 50.00% : SGD 914.55 NCD		
Safe Driver Disc	: SGD 73.16 8.00%	
GST 7.00%	: SGD 58.91	
Annual Premium	: SGD 900.30	
Total Payable	: SGD 900.30	
<b>RISK DETAILS THE MOTOR VEHICLE</b>		
Type Of Cover	: Comprehensive	
Regn No.	: SBC278B	
Type Of Use	: Private Car	
Make/Model	: VOLKSWAGEN GOLF 1.2 TSI	
Year of Manufacture	: 2015	Seating Capacity (excl. Driver) : 04
Body Type	: HATCHBACK	Engine C.C. : 1197
Engine No.	: CJZ604537	Chassis No. : WVWZZZAUZFW271892
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)	
Limitations as to Use : As specified in Certificate of Insurance		
<u>Excess Applicable</u>		
Basic Own Damage Excess.	: SGD 600.00	
Windscreen Excess	: SGD 100.00	
<u>Named Drivers</u>		
1 SIM HONG KEE @ALICE LONG		
<b>MEMORANDA, CLAUSES, WARRANTIES &amp; ENDORSEMENTS</b>		
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:		
VOL 171M		

IDENTITY CARD NO S1474444D



SIM HONG KEE  
@ALICE LONG

沈鳳枝

CHINESE

Date of birth 23-05-1981 Sex F

Country of birth  
SINGAPORE

S1474444D

97986211

alice long 001 @ gmail.com



IDENTITY CARD NO S1474444D



Date of issue  
06-12-2006

Address  
136A HILLVIEW AVENUE  
#05-04  
SINGAPORE 559506

IDENTITY CARD NO. S9405290D



Person:

LONG THENG SHIUNN,  
NICHOLAS

龍登汛

Race:

CHINESE

Date of birth:

Sex:

14-02-1994

M

Country of birth:

SINGAPORE



Licence Number: S9405290D

Name:

LONG THENG SHIUNN,  
NICHOLAS

Birth Date: 14 Feb 1994

Issue Date: 07 Jul 2015



PLATE NO: S9405290D



Date of issue:

20-05-2009

Address:

136A HILLVIEW AVENUE  
#05-04  
SINGAPORE 669606

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg 07 Jul 2015  
< 7 passengers, exclusive of the driver; and  
other motor vehicles without clutch pedals =< 2500kg

MP 429A



97494966  
nicholasLong1994@gmail.com

Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

