SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be $\underline{\text{completed by the Policyholder and/or the Authorised Driver}}$
- 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 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	05/05/2016 08:53
Date Of Accident	04/05/2016 13:50
Exact Location Of Accident	jurong point entrance@jurong west st 64
Country/State of Loss	Singapore
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJF1720Z
Insured/Policyholder	
Name Of Registered Owner	FEC (SINGAPORE) PTE LTD.
Co Reg No	199406905C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-97642188
Vehicle Particulars	
Manufacturer	HONDA
Model	JAZZ-1.4 i-DSI (GD1) (A)
Exact Purpose for which vehicle was being used at time of accident	LLEISURE.
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
If No, Please state action to be taken	
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/P0663425
Cover Note Number	
Driver	
Name of Driver	LIM GUAT CHENG

S1265321B NRIC No Date Of Birth 01/04/1957 Occupation Indoor **Date Of Driving Pass** 01/04/1991

Driving Experience 25 Years And 1 Month

Gender Female

Mobile Number Fax Number

Contact Number

EMail Address NOEMAIL Address

Postcode

Was driver an employee of the Insured's Company No

If No, Relationship of the Driver with the Insured Paid Driver

Vehicle Registration Number of Driver's Own

Vehicle

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Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident Collision- Head to Side

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) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? No

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED SKETCH PLAN AND ACCIDENT STATEMENT. OD REVERT TO 3RD PARTY.

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGX8226D

Vehicle Make/Model/Colour HONDA STREAM

Details Of Properties

Name of Driver PNG KAY GUAN

NRIC/Passport Number S8200846B

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 3

Details of Witness

Name

Phone Number

Email Address

SKETCH PLAN

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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' 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' 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 ATIME

Sketch Plan

Revus Jlay

ASF 17702

B-SG X8936D

Describe Circumstances of the Accident
I was dering into Twoy Part entrance from Juny was st 64.
When I was about to turn in, a long long was viewwing out from the
Said entrane, I stop frother back to give may, with world two signal
my 'an to indicate that I would like to arutake the comy in order
b go to the entrance.
°
once I had check for clear triffiz, I have my car out stightly to overthe the larry when anddealy car is coming from my with
orwhite the leng when endealy Car is carry fin my world
hand with brushed against my car wight hand with fant.
Gor is according to divisor he try to cut into the lane to enter to Juny paint and he said that he saw my car light true synal with
Juny paint and he said that he saw my con light from rynal wit
on but he try to give a go-
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the turn mto carpark way cane.
Declaration

Policyholder's Signature / Date & Time

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

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

Witnessed by Reporting Centre Personnel









