

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	31/10/2016 16:32
Date Of Accident	28/10/2016 20:45
Exact Location Of Accident	MOUNTBATTEN RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGL3126E
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Insured/Policyholder

Name Of Registered Owner	SIM LIAN HUAT
NRIC No	S7003083G
Email Address	baseicy@hotmail.com
Mobile Phone No	(LOCAL) +65-97399433
Alternative Phone No	Office-NOPHONE

Vehicle Particulars

Manufacturer	BMW
Model	M5
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?	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	P1709798
Cover Note Number	

Driver

Name of Driver	SIM LIAN HUAT
NRIC No	S7003083G
Date Of Birth	31/01/1970
Occupation	Indoor
Date Of Driving Pass	31/08/1998
Driving Experience	18 Years And 1 Month
Gender	Male
Mobile Number	(Local) +65-97399433
Fax Number	
Contact Number	Office-NOPHONE
EEmail Address	baseicy@hotmail.com

Address	132 LORONG L TELOK KURAU #03-03
Postcode	425569
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Owner
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Collision- Head to Rear (Insured Hit TP)
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
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	No
Number of Passengers (Including Driver)	3

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

REFER TO SKETCH PLAN

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

Vehicle Registration Number	SKA7575B
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	SIVASRIAMPHAI AMAN
NRIC/Passport Number	S7919142F
Contact Number	98199220
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

SKETCH PLAN

APA

IMPORTANT NOTICE

Vehicle: - SGL
3126E

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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

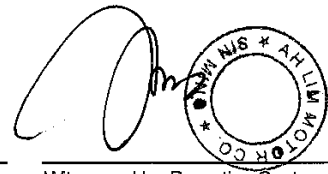
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

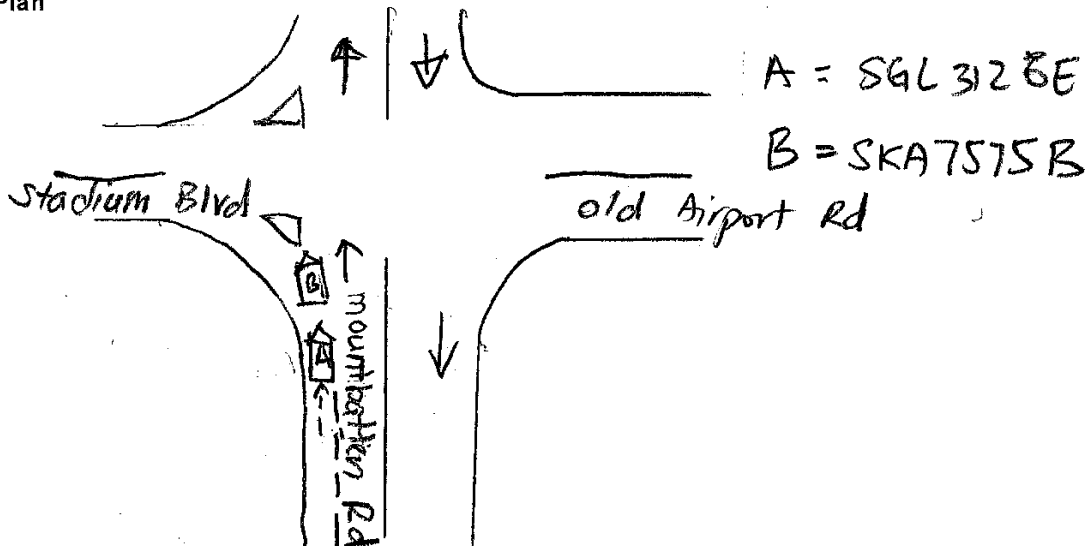
31/10/16

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



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 28 Oct 2016, at about 8:45pm, I was driving towards the city on Mountbatten road. And just before the junction of Mountbatten road and Stadium Blvd, SKA 7575B was in front and I hit into his rear. We exchanged particulars and we left the area.

- () Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop
() Reporting Only

Remarks : Please forward a copy of my efile accident report to :
My workshop : MEGA ENGINEERING PTE LTD
email address : resg@megacare.com.sg
& myself :
email address : baseicy@hotmail.com

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

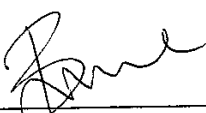
Declaration

We declare the foregoing particulars are true in every respect.

Vehicle S6C

2176E

31/10/16



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Policy Holder-Driver Particulars & Briefings Pg.1

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.care@axa.com.sg

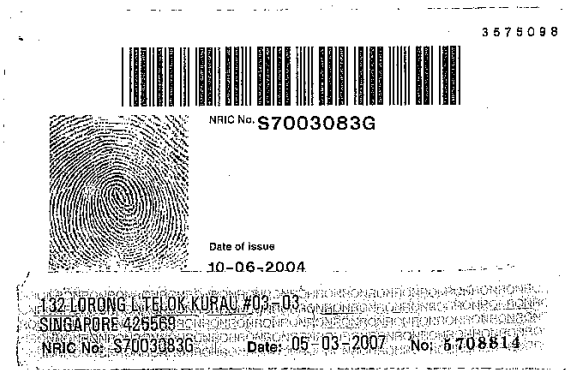
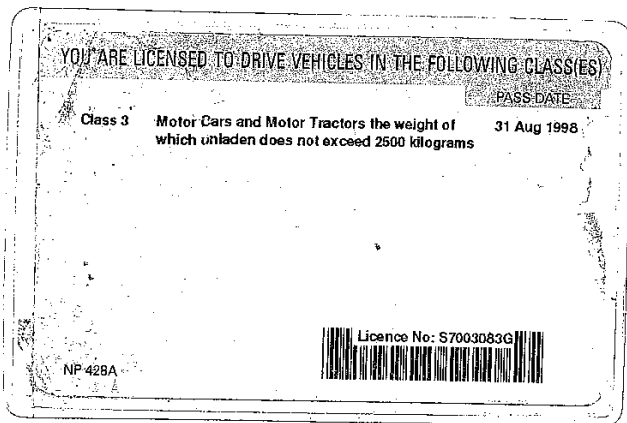
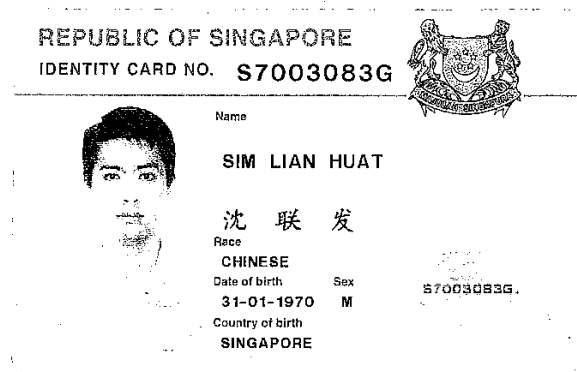
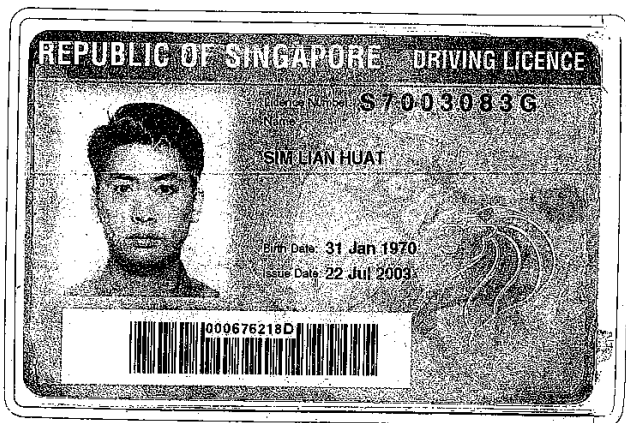


Duplicate

Private Cars COMP
POLICY SCHEDULE
RENEWAL
Original

POLICY INFORMATION		Policy No. : VPA/P1709798
Source	: (02) 00914 ANIKA INSCE BR & CONSULTANTS	
Insured	: SIM LIAN HUAT	
Address	: 132 LORONG L TELOK KURAU #03-03 SINGAPORE 425569	
Business/Profession	: MANAGER Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance : From 28/10/2016 To 31/07/2017 (Both Dates Inclusive)		
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.		
PREMIUM		
Premium After 50.00% : SGD 1,519.12		
NCD		
NCD Protector	: SGD 121.53	
GST 7.00%	: SGD 114.84	
Annual Premium	: SGD 1,755.49	
Total Payable	: SGD 1,332.26	
RISK DETAILS THE MOTOR VEHICLE		
Type Of Cover	: Comprehensive	
Regn No.	: SGL3126E	
Type Of Use	: Private Car	
Make/Model	: BMW M5	
Year of Manufacture	: 2006	Seating Capacity (excl. Driver) : 04
Body Type	: SALOON	Engine C.C. : 4999
Engine No.	: 60373806S85B50A	Chassis No. : WBSNB92030CU18111
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		
Hire Purchase	: HONG LEONG FINANCE LIMITED	
Extra Coverage(Premium Breakdown)	Limits (SGD)	Premium (SGD)
NCD Protector		121.53
Sect I - Used In S'pore Only	: SGD 1,500.00	
Sect I - Used Outside S'pore	: SGD 3,000.00	
Fire&Theft - Outside Singapore	: SGD 3,000.00	
Named Drivers		
1 SIM LIAN HUAT		

Policy Holder-Driver Particulars & Briefings Pg.2



Ah Lim Motor Company

176, Sin Ming Drive, #05-12 Sin Ming AutoCare Singapore 575721

Date: 31/10/2016

OD- open Workshop
Scheme

To: Owner of Vehicle Number: SGL 3126E

The following has been advised to you via AXA Authorised workshop, **Ah Lim Motor Company** through their staff, Jane / Meili / Mui Hong.

Please tick the applicable box if you had been advice on the content as seen below:

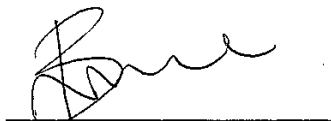
- (☒) You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- (☒) You had been advised by the workshop on the liability and merits of the case accordingly.
- (☒) You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.

- () There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- () The Estimation waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- () You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
- () For vehicles below Three (3) years old, your Insurance company will use only genuine original parts to repair your vehicle.

For vehicles above Three (3) years old, your insurance company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.

- () You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- (☒) As you have opted to repair your car and claim via your own workshop, please check with your own workshop on the claim procedures, liability & merits of the case.
- () If you opt to claim third party at AXA authorised workshop instead, AXA will grant you up to 30 days to revert to own damage claim should your TP claim be not successful.
- () Others : _____

Signed and acknowledge by:



Name and signature of policyholder/ authorised driver



Name and signature of workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



scene



scene

