

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	22/12/2017 11:27
Date Of Accident	03/11/2017 11:00
Exact Location Of Accident	ALONG WOODLAND SQUARE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU822R
Insured/Policyholder	
Name Of Registered Owner	SONG HAIJING
NRIC No	S8361638E
Email Address	6202692@QQ.COM
Mobile Phone No	(LOCAL) +65-98309818
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180-1.6 (A)
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 PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA094440
Cover Note Number	

Driver

Name of Driver	SONG HAIJING
NRIC No	S8361638E
Date Of Birth	05/10/1983
Occupation	INDOOR
Date Of Driving Pass	04/08/2009
Driving Experience	8 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98309818
Fax Number	
Contact Number	OFFICE-NOPHONE
EEmail Address	6202692@QQ.COM

Address	130 CANTONMENT ROAD #20-04
Postcode	089775
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 ON COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	4
Passenger 1	NAME: : JANET GENDER: : FEMALE
Passenger 2	NAME: : RAPHAEL(BABY) GENDER: : MALE
Passenger 3	NAME: : MAY GENDER: : FEMALE

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 OWNER SOLD VEHICLE

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH3076C
Vehicle Make/Model/Colour	HRV RED
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO: SJU82>R.
ACCIDENT DATE: 3/11/17

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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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

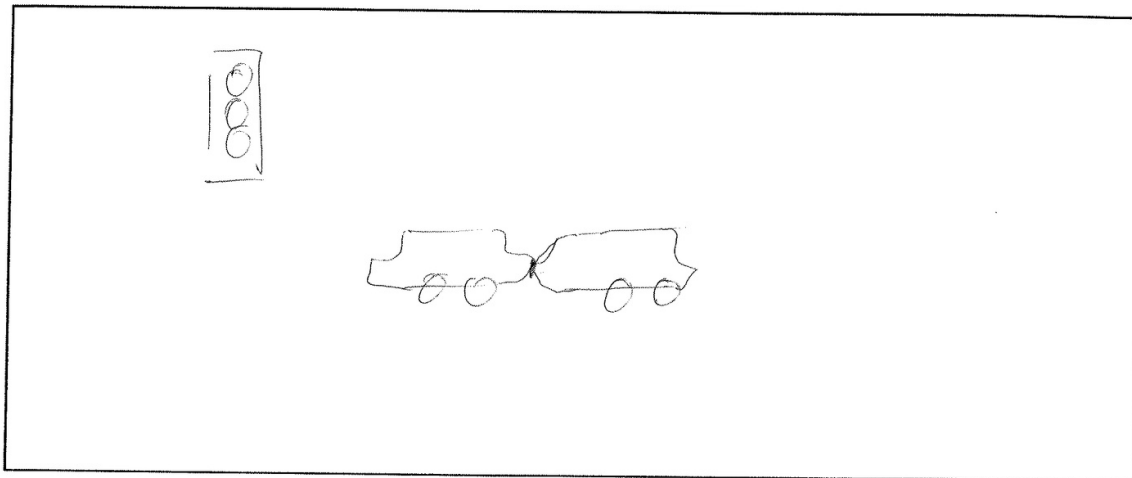
NOTE: DO NOT THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

Policyholder's Signature
Date & Time:

12.22.2017
10:58
Driver's Signature
(If driver is not the policyholder)
Date & Time:

CHARN'S CUSTOMCRAFT
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

11.3. 2017. 11 AM. woodland square.

红灯停时，刹车没踩实，碰到前车，当我下车解决问题时，对方不停拍灯，寻机，要求赔偿……他也打给警察沟通，警察要我们找保险，当时在车很多很塞住，我们各自去停车，我在傻傻 follow 他们去解释流程，当我下车时，后面连连说，他们说算了，所以我们就去吃，我打给保险没打通，然后我就出国，出国前因为很少用车，车正好卖掉了，回来 ~~后~~ 没有看到信，直到 12 月 21 日收到一封来自关于车的 letter。

我在这元不

照片两张附上

对方的车有一划痕 我们不确定谁的责任 请审查

OWN DAMAGE () 3RD PARTY CLAIM () REPORTING ONLY () OWN WORKSHOP ()

DECLARATION

I/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:

CHARMS CUSTOMCRAFT

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

A C SYED & PARTNERS

Advocates & Solicitors
Commissioner for Oaths
101A Upper Cross Street
#13-23 People's Park Centre
Singapore 058358

Tel : 6538 7411 Fax : 6534 1011 (Not for service of Court Documents)

Your Ref :
Our Ref : ACS.MISC.CH.17(Y).mh
Date : 08 December 2017

SONG HAIJING
BLK 130 CANTONMENT ROAD
#20 - 04 SINGAPORE 089775

WITHOUT PREJUDICE

BY CERTIFICATE OF POSTING

Dear Sir,

ACCIDENT INVOLVING SLH 3076C & SJU 822R ON 03.11.17 AT WOODLANDS SQUARE

We act for **HONG QI** the registered owner of motorvehicle No. **SLH 3076C** in the above matter.

Our investigation reveals that you were the owner of motorvehicle No. **SJU 822R** at the time of the accident. Kindly confirm.

Please let us have the following particulars and document:-


- (a) the name, address and NRIC No. of the driver;
- (b) whether the said motorvehicle was at the time of the accident covered by a policy of insurance and if so, the particulars thereof.
- (c) whether the driver was at the time of the accident driving as your servant or agent; and
- (d) whether the driver was an authorized driver and covered by the policy of insurance.
- (e) a copy of your Motor Accident Report (GIA report)/Police report.

Please take notice that there is a presumption in law that the said driver was driving as your servant or agent unless you confirm otherwise. Kindly revert within the next 5 days.

We advise that upon receipt of this letter you should report the above accident to your insurers immediately together with your Certificate of Insurance to enable them to assist you.

If you fail to do so, your said insurers may exercise their right not to cover you against our client's claim. In such event, our client will look to you for his claim. If you are found liable, you will have to pay our client's damages out of your own pocket.

Yours faithfully,



cc. Client

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Portrait photo of a woman.

License Number: **S8361638E**

Name: **SONG HAIJING**

Birth Date: **05 Oct 1983**

Issue Date: **26 Aug 2014**

Barcode: 002338910F

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8361638E

Portrait photo of a woman.

Name: **SONG HAIJING**

Chinese Name: **宋海静**

Race: **CHINESE**

Date of birth: **05-10-1983**

Sex: **F**

Country of birth: **CHINA**

Card Number: **S8361638E**

6202692@99.com.

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

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

EFFECTIVE DATE **04 Aug 2009**

NP 428A

Barcode: Licence No: **S8361638E**

9163964

Barcode

NRIC No. **S8361638E**

Nationality: **CHINESE**

Date of issue: **11-05-2012**

130 CANTONMENT ROAD #20-04
SINGAPORE 089775

NRIC No: **S8361638E** Date: **30/11/2016**

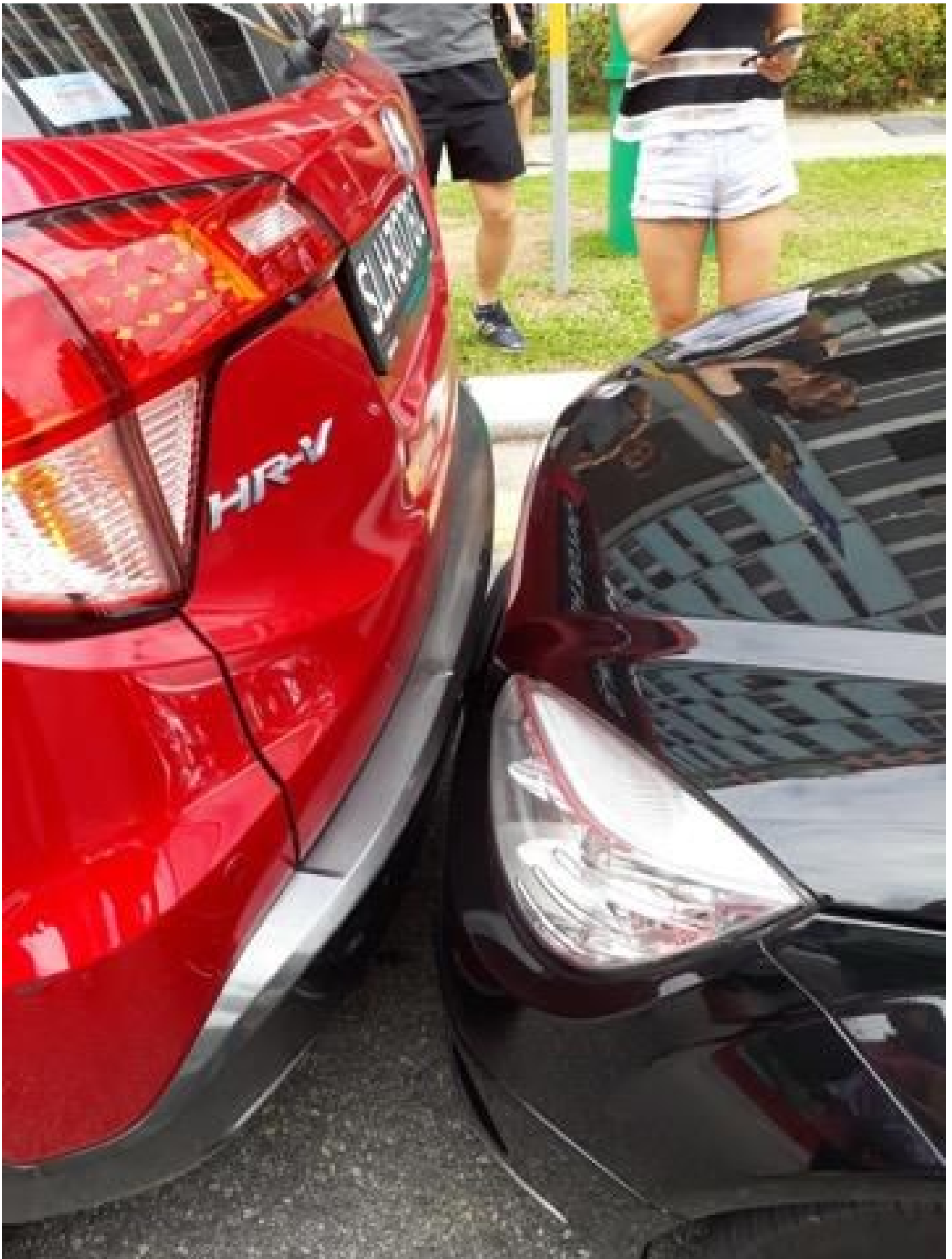
Accident Photo



Accident Photo



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