

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	07/12/2017 20:44
Date Of Accident	07/12/2017 07:25
Exact Location Of Accident	ALONG UPPER BUKIT TIMAH RD TOWARDS CLEMENTI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS4072Z
Insured/Policyholder	
Name Of Registered Owner	YAP SIEW HUA
NRIC No	S1775094A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91013938
Alternative Phone No	OTHERS-91013938

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 AD GLS (A)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1995396
Cover Note Number	

Driver

Name of Driver	YAP SIEW HUA
NRIC No	S1775094A
Date Of Birth	07/12/1966
Occupation	OUTDOOR
Date Of Driving Pass	04/01/1999
Driving Experience	18 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91013938
Fax Number	
Contact Number	OTHERS-91013938
Email Address	NOEMAIL

Address

Postcode

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 CHAIN COLLISION

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? YES

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) 1

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

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJE8031M

Vehicle Make/Model/Colour HONDA AIRWAVE 1.5M A

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKH8958L

Vehicle Make/Model/Colour RENAULT SCENIC III 1.5 DCI AUTO ABS D/AB S/R 5DR

Details Of Properties

Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF INJURED PERSON 1

Name YAP SIEW HUA
Approximate Age
Injuries Sustain
Injured person in which vehicle? SLS4072Z
Were seat belts worn? YES
Was injured conveyed to hospital by ambulance? NO
Address
Postcode

Sketch Plan


SKETCH PLAN


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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.


Policyholder's Signature
Date & Time:

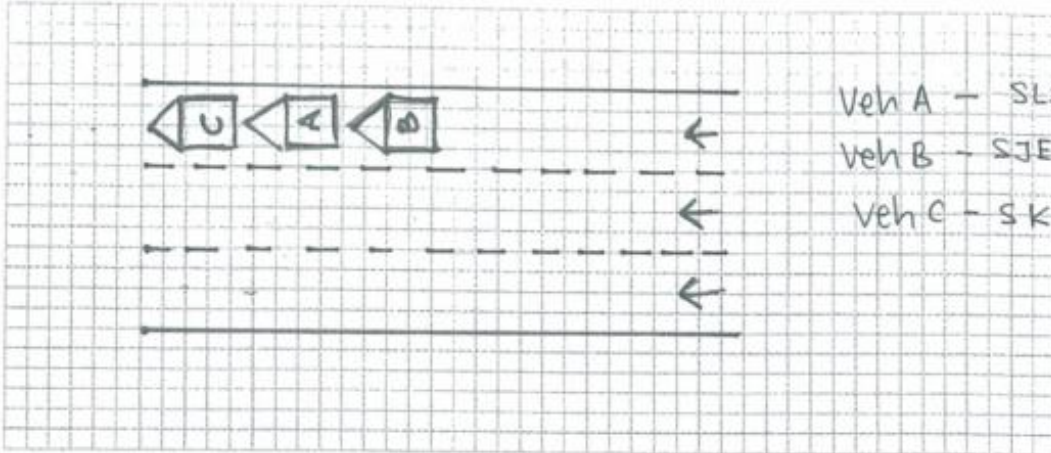

Driver's Signature
(If driver is not the policyholder)
Date & Time:

07 DEC 2017

Reporting Centre Personnel's Signature
Name: Suram
NRIC/FIN No.: 9201037111

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time I was travelling along stated venue, as the front vehicle stop, I applied my breaks as well. Before I can come to a halt, vehicle B could not stop in time and hit onto mine. The huge impact propelled my car forward and hit onto the front vehicle.

DECLARATION

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

07 DEC 2017

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Suhaim
NRIC/FIN No: 8804027101

GIA/IMC SP-003PilotForm_V3

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



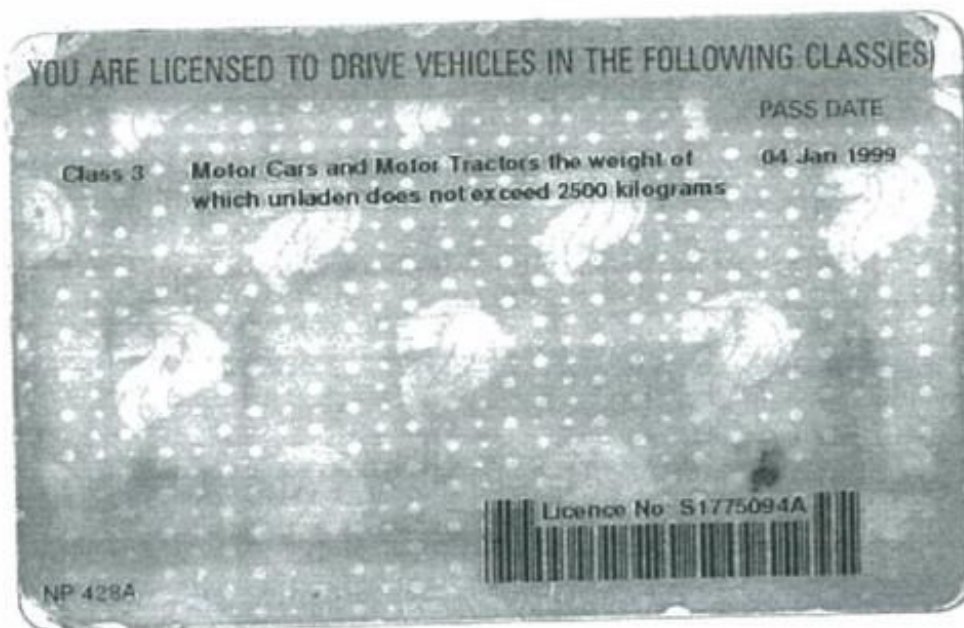
Accident Photo



Accident Photo



Driving License



AXA INSURANCE PTE LTD
 3 Beachway, #24-01
 AXA Tower, Singapore 189811
 E-mail: Taxa@axa.com.sg
 Tel: 65 6339 8888
 Website: www.axa.com.sg
 GST Registration Number: T20001234
 Insurance License No: 100000000000000000



CERTIFICATE OF INSURANCE

* Motor Vehicle (Third-Party Risk and Compensation) Act, (Chapter 187) * Motor Vehicle (Third-Party Risk and Compensation) Rules, 1987 * Road Transport Act, 1987 (Malaysia) * Motor Vehicle (Third-Party Risk and Compensation) Rules, 1987 (Malaysia)

CERTIFICATE NO.	YPA/F1995396	Account No.	08165
Coverage	Comprehensive		
Sum Insured	Market Value At The Time Of Loss		
Name of Policy Holder	YAP EION KUA		
Vehicle Registration No.	SL840722		
Period of Insurance	From 12/09/2017 To 21/09/2018 (Both Dates Inclusive)		

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

(a) The Policyholder
 The Policyholder may also drive a Motor Car not belonging to or not hired under a hire purchase agreement or otherwise to him or his employer or his partner.
 (b) Any other person who is driving on the Policyholder's order or with his permission.
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover - use for hire or reward, racing, pace making, liability trial, speedtesting, the carrying of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade, or when the Motor Car, whether stationary, in use or otherwise, is in or on a racing track, circuit, road, course or any other road by whatever name called that are typically used for racing, pace-making or such similar purposes. (01)

An Additional Excess is applicable as follows:

\$2500.00 for Unnamed Authorized Driver
 \$25,000.00 for Undeclared Young and Inexperienced Driver.
 (Please refer to your policy on the terms & conditions)

* Limitations rendered imperative by Section 3 of the Motor Vehicle (Third-Party Risk and Compensation) Act, (Chapter 187) and Section 33 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/we hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicle (Third-Party Risk and Compensation) Act, (Chapter 187) and Part IV of the Road Transport Act, 1987 (Malaysia).

N.B.:
 Your authorized workshop is Kinoco Motors Pte Ltd.

AXA INSURANCE PTE LTD

Authorized Signature

Issued by: E00VGRP2 on 29/09/2017

IMPORTANT

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risk and Compensation) Act (Cap. 187).
 The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy. Renewal certificate, covernote and endorsement etc.