

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	14/12/2017 14:26
Date Of Accident	14/12/2017 08:00
Exact Location Of Accident	PIE (TUAS)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR191T
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Insured/Policyholder

Name Of Registered Owner	TAY BOK CHYE
NRIC No	S1656775B
Email Address	STEVENBC@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-93692948
Alternative Phone No	OFFICE-93692948

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)

Exact Purpose for which vehicle was being used at time of accident

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
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Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	CN856139
Cover Note Number	

Driver

Name of Driver	TAY BOK CHYE
NRIC No	S1656775B
Date Of Birth	09/11/1964
Occupation	INDOOR
Date Of Driving Pass	05/09/1997
Driving Experience	20 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93692948
Fax Number	
Contact Number	OFFICE-93692948
Email Address	STEVENBC@SINGNET.COM.SG

Address	BLK 45 LORONG 5 TOA PAYOH #09-139
Postcode	310045
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?	YES
Foreign Vehicle Registration Number	JRK7802 (MOTORCYCLE)
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TOA PAYOH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , POSTCODE: 319194 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2519999 - FAX NO: 63548749
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN. ATTACHED ADDENDUM.

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	JRK7802
Vehicle Make/Model/Colour	
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	GBF3537T
Vehicle Make/Model/Colour	VAN WHITE
Details Of Properties	NO DAMAGED
Name of Driver	YU WEI
NRIC/Passport Number	
Contact Number	98506093
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

Approximate Age

Injuries Sustain

Injured person in which vehicle?	JRK7802
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Were seat belts worn?

Was injured conveyed to hospital by ambulance?

Address

Postcode

Accident Sketch Plan


SKETCH PLAN

IMPORTANT NOTICE

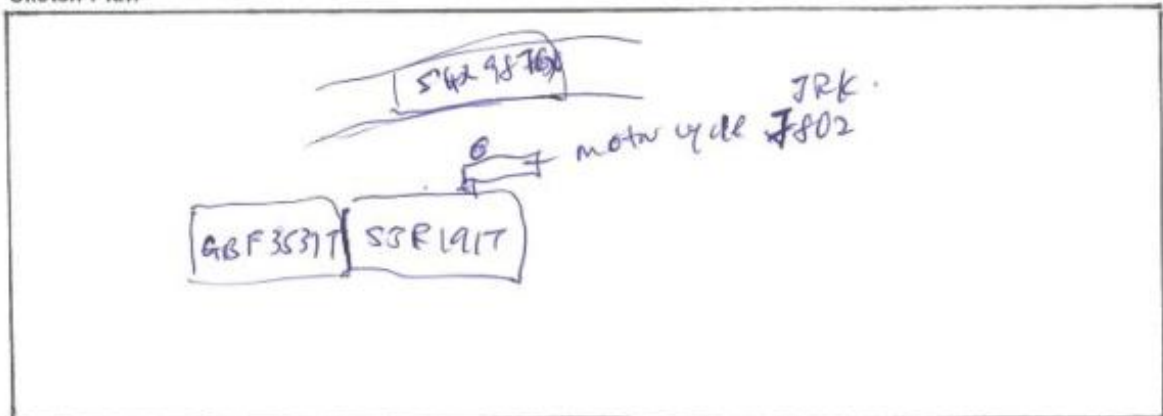
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 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
5. **Consent under the Personal Data Protection Act (PDPA)**
- I understand,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

 14/17/17
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstances of the Accident

I waiting heavy traffic other. the front vehicle suddenly stop and I stopped and slightly touched the front vehicle. I opened the door when no vehicle beside me and suddenly motorcycles hit my door and fell.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time 14/12/17

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

Witnessed by Reporting Centre
Personnel

Accident Sketch Plan



SINGAPORE POLICE FORCE

ACKNOWLEDGEMENT SLIP

Ref: Report No: #J/20171214/0080

I, ISKANDAR SS T03406

(Recipient's Name, NRIC or Passport No. / Rank and No.)

of C/O TP HQ

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 One 'BLACKROE' MICRO SD memory card. (32 GB)

2
3
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from TAY BUX CHYE S165677SB

(Name, NRIC or Passport No. / Rank and No.)

of BLK 45, TOA PAYOH, LOR 5 #09-139

(Address / Police Station / NPC / NPP)

on 14.12.2017

(Date)

at

0950hrs.

(Time)

S(310045)


Witnessed by / * Handed over by:

(* Delete if applicable)

Received by:


(Signature)
S165677SB

(Name, NRIC or Passport No. / Rank and No.)


(Signature)
T03406

(Name, NRIC or Passport No. / Rank and No.)

Other Remarks:

Accident Sketch Plan

AXA INSURANCE PTE LTD
 #24-01
 Singapore 068811
 Service Centre #B1-01
 288 Fax: 6338 2522
 www.axa.com.sg
 Registration Number: 199903512M



Agent's Copy

Agent Code: 14885
Policy No. (if any): BSTL033 PAMELA TEO
New Business
SmartDrive Quote Ref:

MOTOR COVER NOTE

No. **CN856139**

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) - Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby **HELD COVERED** under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	TAY BOK CHYE
MAKE AND DESCRIPTION OF VEHICLE	TOYOTA COROLLA ALTIS 1.6
VEHICLE REGISTRATION NO.	<i>SJR 191-T</i>
YEAR OF MANUFACTURE	<i>2017</i>
ENGINE NO.	1ZR0A22665
CHASSIS NO.	MR053REH604574557
ENGINE CAPACITY/TONNAGE	1598
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	UNITED OVERSEAS BANK LIMITED
VALUE (S\$)	AS PER MARKET VALUE
PERIOD OF INSURANCE	FROM: 27/10/2017 TO: 26/10/2019
EXCESS (S\$)	500
AXA PREMIUM WORKSHOP?	NO BORNEO MOTORS (S) PTE LTD

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by **AISINCHCAPE6** on **27/10/2017 1:30pm**

 Authorised Signature

Note : This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum of S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
- An administrative fee of S\$26.75 (inclusive of GST) will be charged:
 - Cover note issued and cancelled before inception.
 - Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

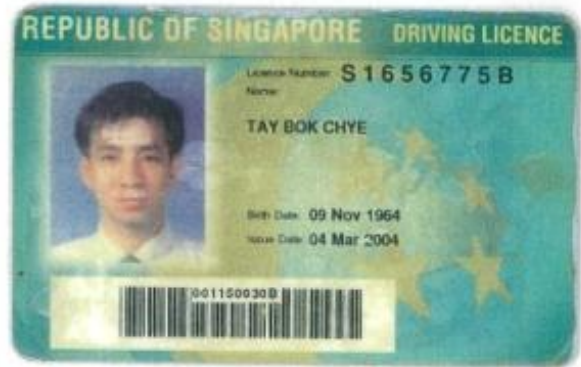
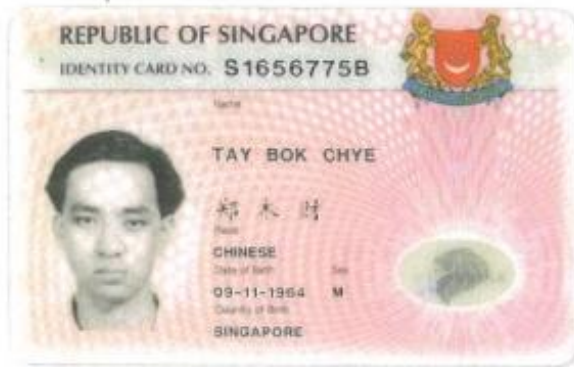
Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

MTR/CNOTE/V01/03

Nric And Driving Licence



Police Report



**SINGAPORE
POLICE FORCE**



T/20171214/2116

1 of 3

Report No. T/20171214/2116

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/12/2017 14:51	Vide Report No.: J/20171214/0080	Station Diary No.: 117
--------------------------------------------	-------------------------------------	---------------------------

Informant's Particulars			Address: APT BLK 45 LORONG 5 TOA PAYOH #09-139 SINGAPORE 310045	
Name of Informant: TAY BOK CHYE			Contact No.: Home/Office:	Mobile: 93692948
ID Type / ID No.: NRIC NO / S1656775B			Email:	
Nationality: SINGAPORE CITIZEN			Type of Informant: Driver	
Sex: Male	Age: 53	Date of Birth: 09/11/1964	Language:	Institution / School Name:
Race: Chinese			Driving Licence Information: Class:	
Occupation: FINANCE			Date of Expiry:	

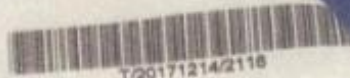
General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/12/2017 08:00	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
ALONG PIE GOING TOWARDS TUAS				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow:	Traffic Control:		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF3537T	Van				No Damage	0
JRK7802	Motorcycle					0
SJR191T	Car	TOYOTA	COROLLA ALTIS ELEGANCE AUTO	Silver	No Damage	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20171214/2118

2 of 3

Report No. T/20171214/2118

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

CONTINUATION OF REPORT

Details of Vehicle Insurance		Insurance No	Effective	Expiry Date
Vehicle No	Insurance Company			
SJR191T	AXA INSURANCE SINGAPORE PTE LTD	P2022804	09/11/2017	08/11/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAY BOK CHYE	ID No.	S1858775B
Related Vehicle	NIL	Contact No.	93692948
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 14.12.2017 at about 0800hrs, I was driving my said vehicle SJR191T Brand: Toyota Altis, Colour: Silver at Lane 2 along PIE going towards Tuas. While I was driving my said vehicle, I was too near to my front vehicle GBF3537T and my vehicle got touch to the said vehicle.

After which both of us make a check on our vehicle and there is no damaged on both vehicle. While I was in a midst of checking my said vehicle, out of sudden one motorcycle bearing registration of JRK7802 hit into my driver seat door and fell off from his said motorcycle.

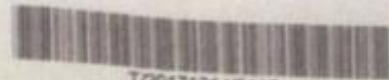
I was informed by my surround that they already had called for police assistance. Upon traffic police and ambulance arrival, ambulance make a check on the motorcycle rider and conveyed him to hospital.

Traffic police informed me to lodge a traffic report vide J/20171214/0080.

Police Report



SINGAPORE
POLICE FORCE



T/20171214/2116

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

3 of 3

Report No. T/20171214/2116

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Staff Sgt NUR FHADILAH BINTE MOHD
KHALID

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

14/12/2017 14:51

Officer In Charge Of Case:

TP / AEIT /

SSIGOH GEOK LYE

Contact No.: 65476148

SN 168

Authentication Stamp

NPT

Signature

Singapore Police Force

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



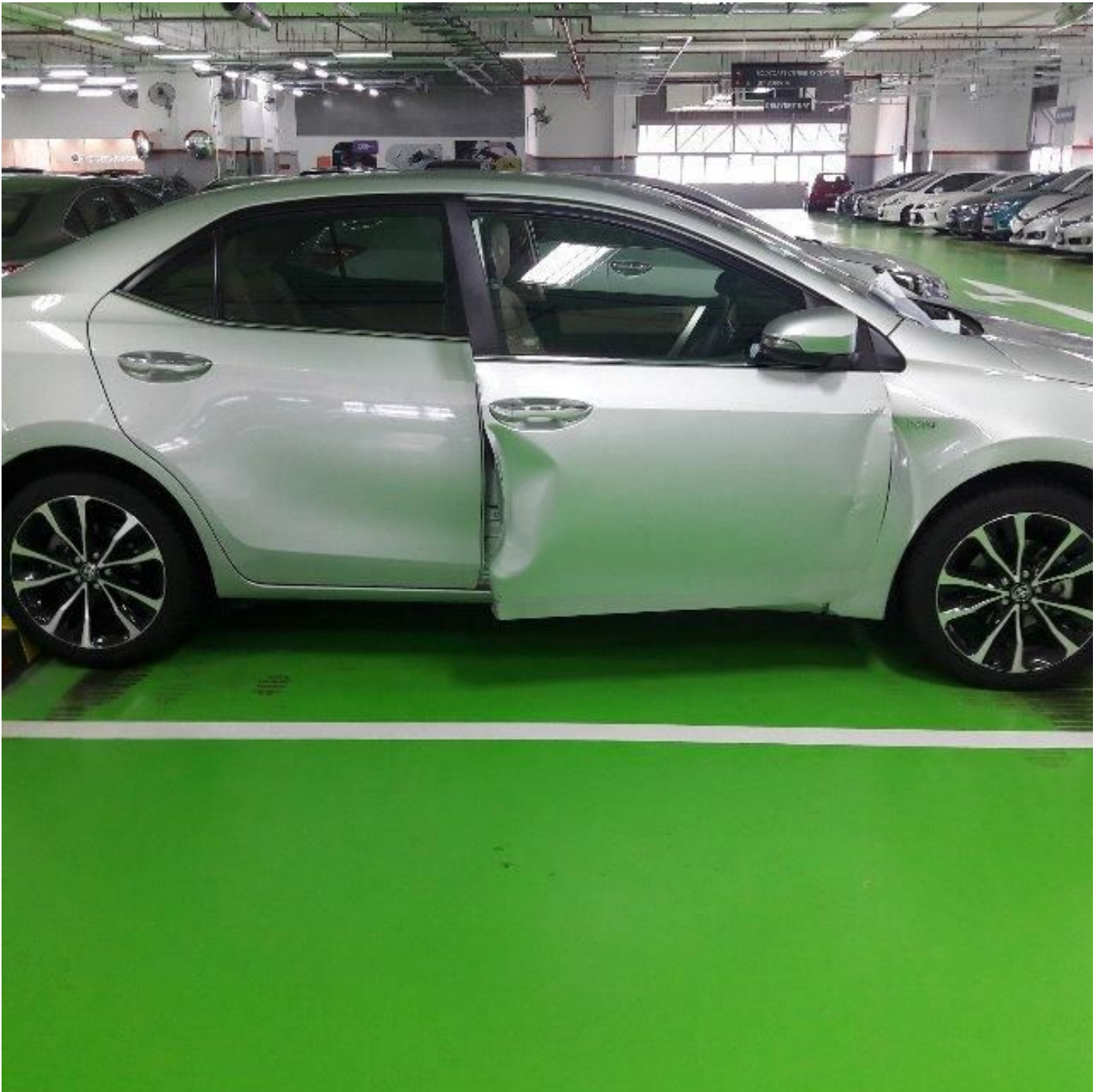
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



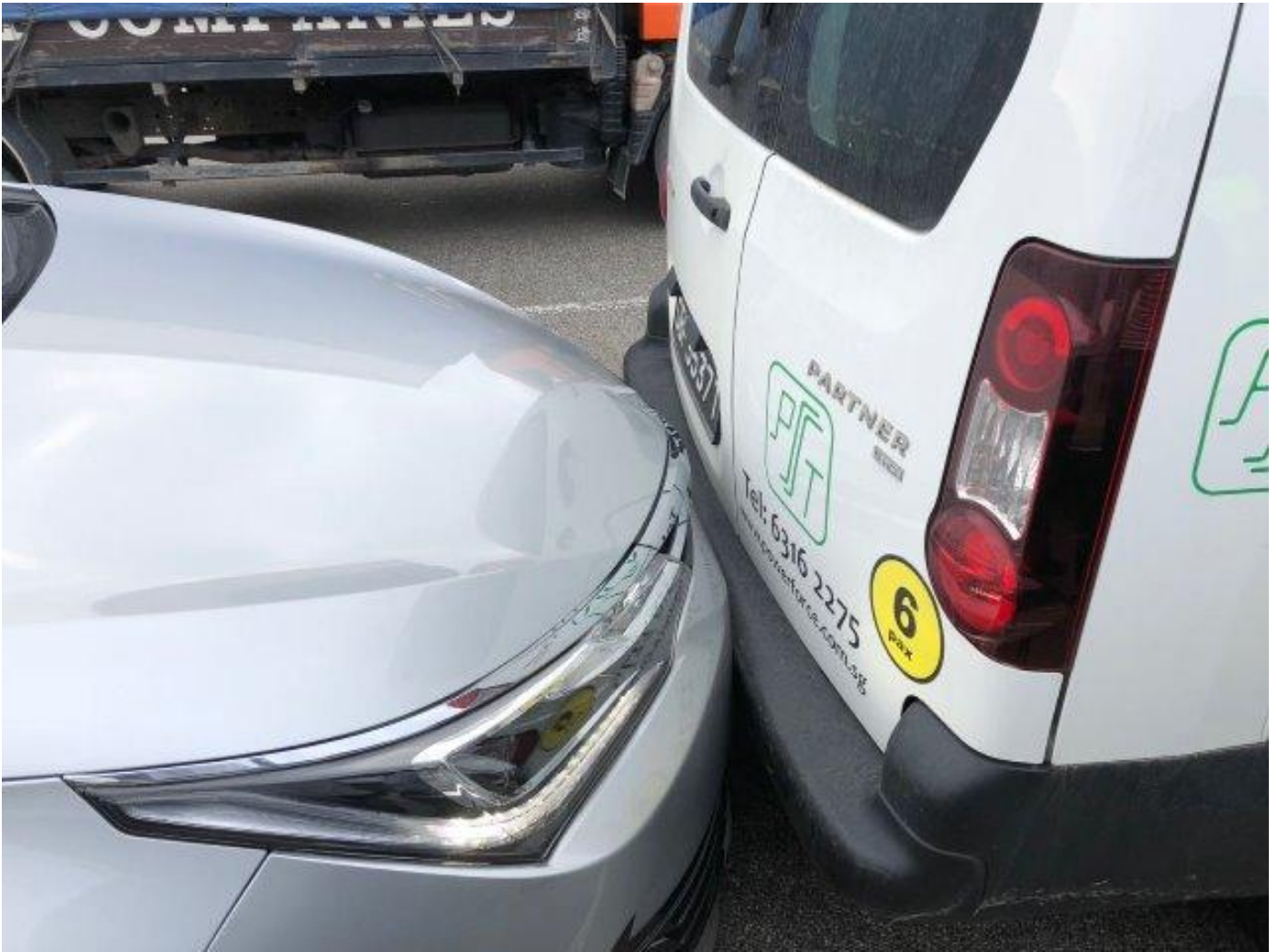
Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MBM217164536 Vehicle Registration No: SJR 191T

Name(as shown in NRIC) : Tay Bok Chye NRIC/FIN/Passport No : _____

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : _____ Singapore()

Contact (Tel) : _____ Mobile No. : _____

Email Address : _____

Date of Accident : 14.12.2017 Time of Accident : 08:00

Place of Accident : PIE (Tuas)

Insurance Company: _____

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

attach police report and video footage.

PAYO
Policyholder / Driver's Signature
Date: 15/12/17

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