

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 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	10/02/2018 13:28
Date Of Accident	09/02/2018 15:30
Exact Location Of Accident	PIE (PIE TO CHANGI) BEFORE TOA PAYOH LOR 6
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP8028D
Insured/Policyholder	
Name Of Registered Owner	SEOW KHIM POLYTHELENE CO PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65452828

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE

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	GA309705/1
Cover Note Number	

Driver

Name of Driver	ONG TAT ANN
NRIC No	S1318466F
Date Of Birth	29/10/1958
Occupation	INDOOR
Date Of Driving Pass	28/08/1991
Driving Experience	26 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98396082
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 22 MAR THOMA ROAD #08-02
Postcode	328702
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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
Number of vehicles involved in the accident	
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)	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

FRONT VEHICLES SUDDENLY BRAKE AND STOP. I BRAKE BUT COULD NOT STOP IN TIME AND HIT ONTO VEHICLE B REAR PORTION. THERE'S A TOTAL OF 3 VEHICLES INVOLVED.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKB5521P
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBG4456G
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

VEHICLE C

COMMERCIAL VEHICLE

Sketch Plan Pg. 1

SKETCH PLAN

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7. By the lodgment 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.
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:

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Front vehicles suddenly brake and stop, I brake but could not stop in time and hit onto vehicle B rear portion. There's a total of 3 vehicles involved.

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:

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

GP/RC/StandardForm 103

Sketch Plan #3 Pg. 1



redefining Insurance

Date: 10/02/2018

To: Owner of Vehicle Number: 80P 80250

The following has been advised to you via your workshop, LIME MOTOR PTE LTD through their staff, _____.

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 case 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.

☒ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.

☒ The estimated waiting time for the spare parts to arrive is 4 - 6 weeks. 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.

☒ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.

☐ Others _____

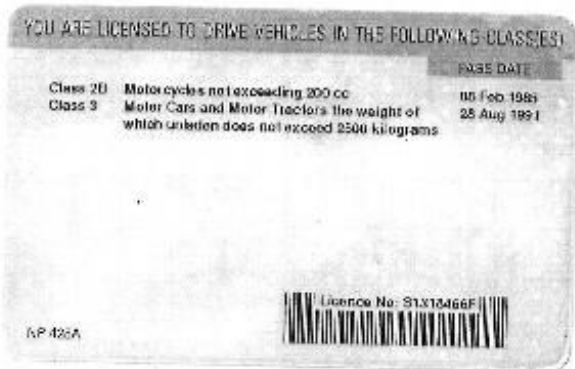
Signed and acknowledge by:



Name and signature of policyholder/authorised driver

Name and signature of workshop personnel including company stamp

Driving License



INSURANCE



redefining / insurance

AXA Insurance Pte Ltd
☎ 1800 680 4888 (Within Singapore)
(65) 6880 4888 (International)
☎ 65 6880 4740
✉ customer.care@axa.com.sg
🌐 www.axa.com.sg

account number
03786

Certificate of Insurance

Motor Vehicle Third Party Risk and Compensation Act, Chapter 165 - Motor Vehicles Third Party Risk and Compensation Act, 1962 Road Transport Act, 1987 (Malaysia)
Motor Vehicles Third Party Risk and Compensation Act, Chapter 165 - Motor Vehicles Third Party Risk and Compensation Act, 1962 Road Transport Act, 1987 (Malaysia)

Policy details

Policyholder name	SEOW KHIA POITHELENE CO PTE LTD	Certificate number	G4209705 / 1
Cover	Comprehensive	Chassis number	MM057A154HHC3607
Plan name	Flexi	Engine number	3A92JDN9529
NCD applicable	60%		
Vehicle registration number	SKP80280		
Period of insurance	From 12/01/2018 to 11/01/2019 (both dates inclusive)		
Finance loan company	DBS BANK LTD		

Persons or classes of persons entitled to drive*

(a) Any named Driver as stated in the Policy

1. CHAI HAI ANN

(b) Any person who is driving on the Policyholder's order or with their permission

Provision 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.

Limitation 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, reliability trial, speed testing, the carriage of goods other than samples in connection with a trade or business or use for any purpose in connection with motor sports or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads or whatever name called that are typically used for racing, pace-making or such similar purposes. Limitations on usage are set out in Section 8 of the Motor Vehicle Third Party Risk and Compensation Act, Chapter 165 and Section 90 of the Road Transport Act, 1987 (Malaysia) and are included under these headings.

EXCESS Windscreen Excess

No. Applicable

An Additional Excess is applicable as follows:

- \$4,500 for Unlicensed Authorized Driver
- \$4,500 for Licensed Young and Inexperienced Driver
- \$15,000 for an declared Young and Inexperienced Drivers. This additional excess is reduced to \$4,500 if You have chosen AXA Premium Workshop.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the points at which this Certificate relates is stated in accordance with the provision of the Motor Vehicles Third Party Risk and Compensation Act, Chapter 165 and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorized signatory

Important note

Provision 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.

The Premium Warranty Clause requires the premium to be paid in full within a specified period starting with the end of the last business day under the policy, as stated in the policy schedule.

AXA Insurance Pte Ltd (185903522M)
8 Shenton Way, #24-01, AXA Tower,
Singapore 068811
Customer Centre, #01-01

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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

