#### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	28/02/2018 20:31
Date Of Accident	27/02/2018 18:20
Exact Location Of Accident	ALONG BALESTIER ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKA139Z
Insured/Policyholder	
Name Of Registered Owner	KHOO KOH SEONG
NRIC No	S2548857A
Email Address	KKS528@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96317106
Alternative Phone No	OFFICE-96317106
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E250 CGI 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?	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	GA062306/1

Cover Note Number

**Driver** 

Name of Driver SAMUEL KHOO KWANG WEE (SAMUEL QIU GUANGWEI)

 NRIC No
 \$8129728B

 Date Of Birth
 30/09/1981

 Occupation
 INDOOR

 Date Of Driving Pass
 23/05/2001

Driving Experience 16 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97421630

Fax Number
Contact Number

EMail Address KKS528@HOTMAIL.COM

**BLK 125 COMPASSVALE BOW** Address

#15-31

Postcode 544820

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **CHILDREN** 

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

**COLLISION - CHANGE/CROSS LANE** Type Of Accident

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?

Passenger 1

NO

NO

3

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NAME: : TOH LIJUN SALLY

GENDER: : FEMALE

Passenger 2 NAME: : SHAYNE KHOO HSIEN YANG

> GENDER: : MALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

**Circumstances of Accident** 

PLEASE REFER TO THE ATTACHMENT

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 SHF488A

Vehicle Make/Model/Colour

**Details Of Properties** 

TAXI Vehicle Category

Name of Driver **CHUA KOON CHAI** 

NRIC/Passport Number S7309934Z Contact Number 98200854

Address Postcode Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

#### Accident Sketch Plan

#### SKETCH PLAN

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  interested parties.
- 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)

Lunderstand, 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:
  - 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.:

#### **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

<b>←</b>	
(B)	
MAI	
a_	A : SKA 139 Z
Balestier Road	B; SHF 488A

#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Balestier Road 3rd lane on 27	February 201
6.20pm. It was Heavy traffic at that time as it was	r peak
hour. I need to filter to the 2nd lane to go or	to
PIE Changi. I signalled my intention to filter right.	checked
my mirrors and blind spot I started to filter to	the right.
My speed was grand 20 km/hr at that time.	Half
way into the lane, I saw a taxi from my sid	
trying to filter left into the same lane as m	
I sounded the horn but he still proceed and	
into my car. I draked immediately.	
	-

#### DECLARATION

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

Policyhoider's Signature

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Date & Time:

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#### **CERTIFICATE OF INSURANCE Pg. 1**





Certificate number

Chassis number

Engine number

AXA Insurance Pte Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 www.axa.com.sg

account number 08198

GA062306 / 1

WDD2073472F080425

2718603Q137463

**Certificate of Insurance** 

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960-Road Transport Act. 1987 (Malaysia) -Motor Vehicles (Third-Party Risks ) Rules, 1959 (Malaysia)

#### **Policy details**

Policyholder name Cover

Plan name

NCD applicable

KHOO KOH SEONG Comprehensive

Essential 40%

SKA139Z

Vehicle registration number

Period of Insurance

from 06/01/2018 to 05/01/2019 (both dates inclusive)

Finance Ioan company TOKYO CENTURY LEASING (S) PTE LTD

#### Persons or classes of persons entitled to drive\*

(a) The Policyholder

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

#### 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 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, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**EXCESS** 

Basic Own Damage Excess Windscreen Excess

SGD 700,00 SGD 100.00

- An Additional Excess is applicable as follows:
  - 1. S\$500 for unnamed Authorised Driver 2. S\$500 for declared Young and Inexperienced Driver
  - 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops

## Additional clauses & endorsements to your policy

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

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 Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period falling which there would be no liability under the policy, renewal certificate, endorsement etc.

> 質業(保險)代理私人有限公司 INSMART (INSURANCE) AGENCY PTE LTD NO. I KAKI BUKIT ROAD I #02-27 ENTERPRISE ONE

SINGAPORE 415934 TEL: 6842 0766 FAX: 6842 6955 / 6842 7855

1 of 2

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01













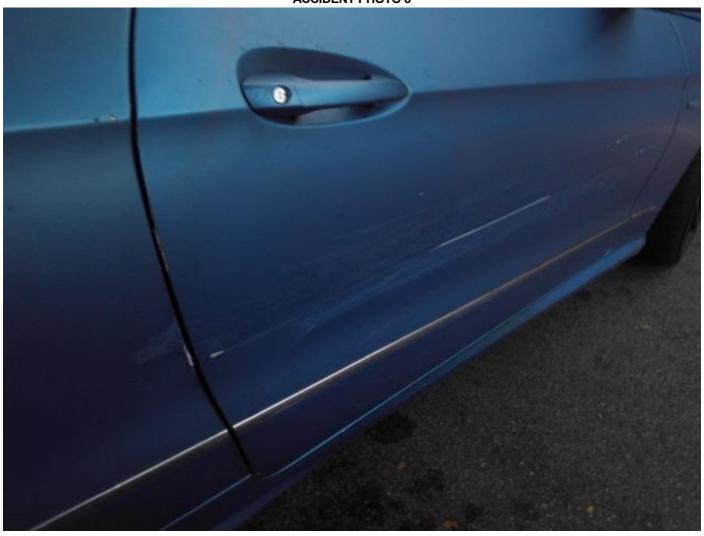


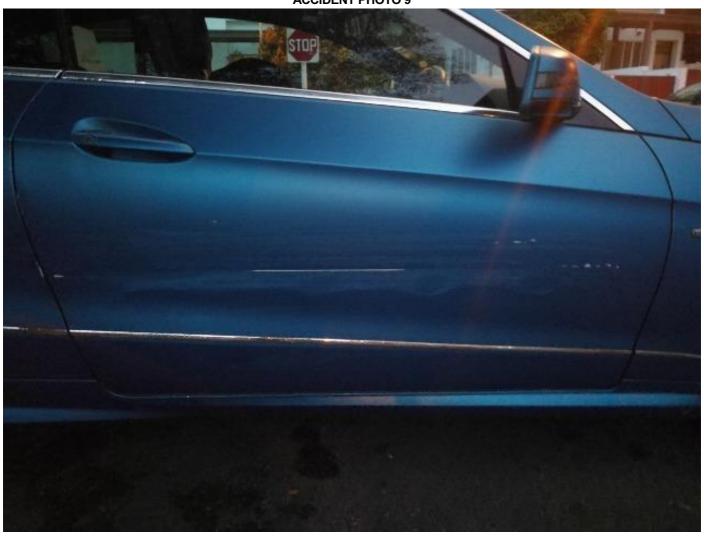










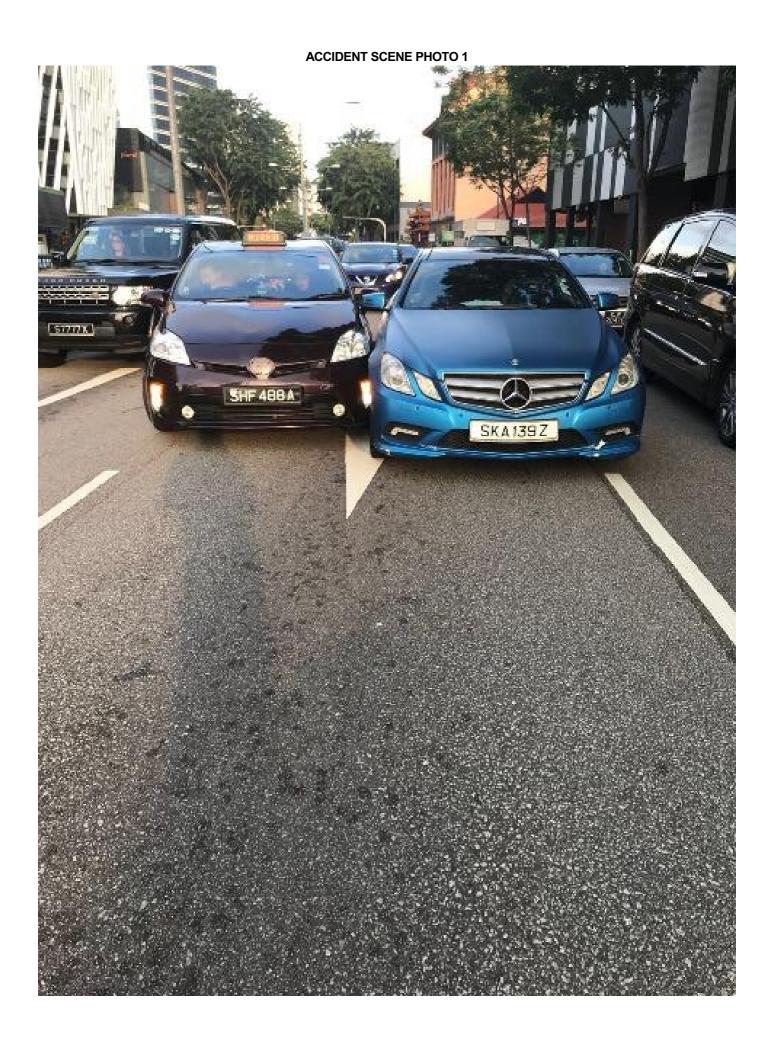






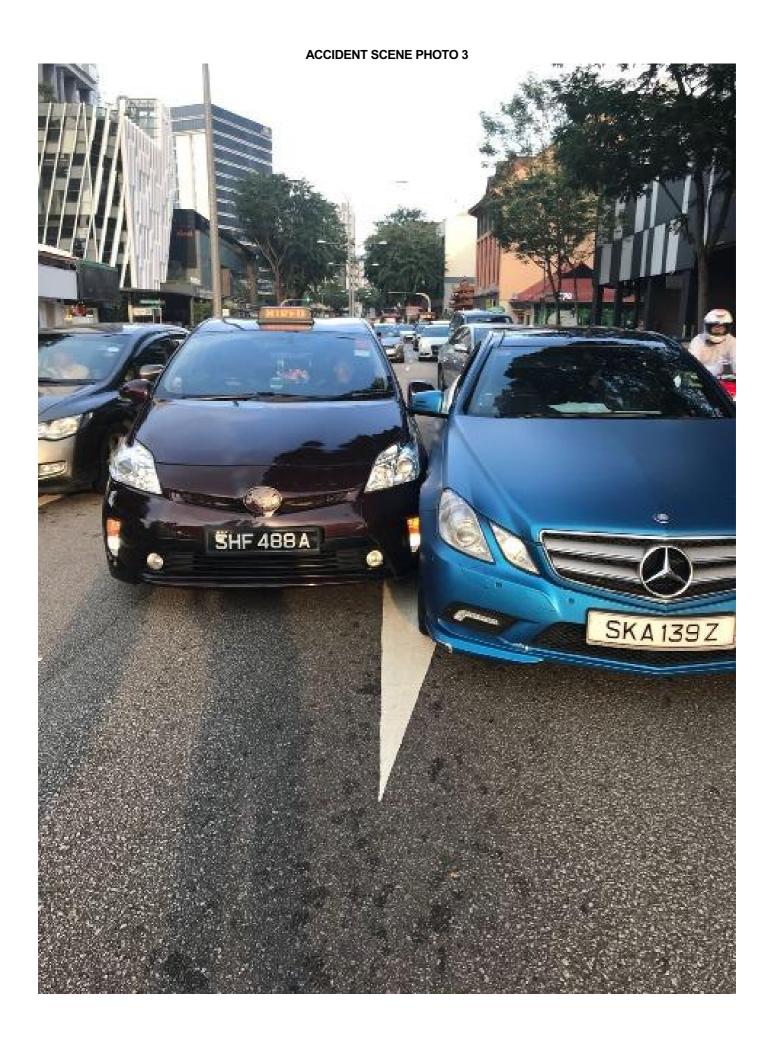
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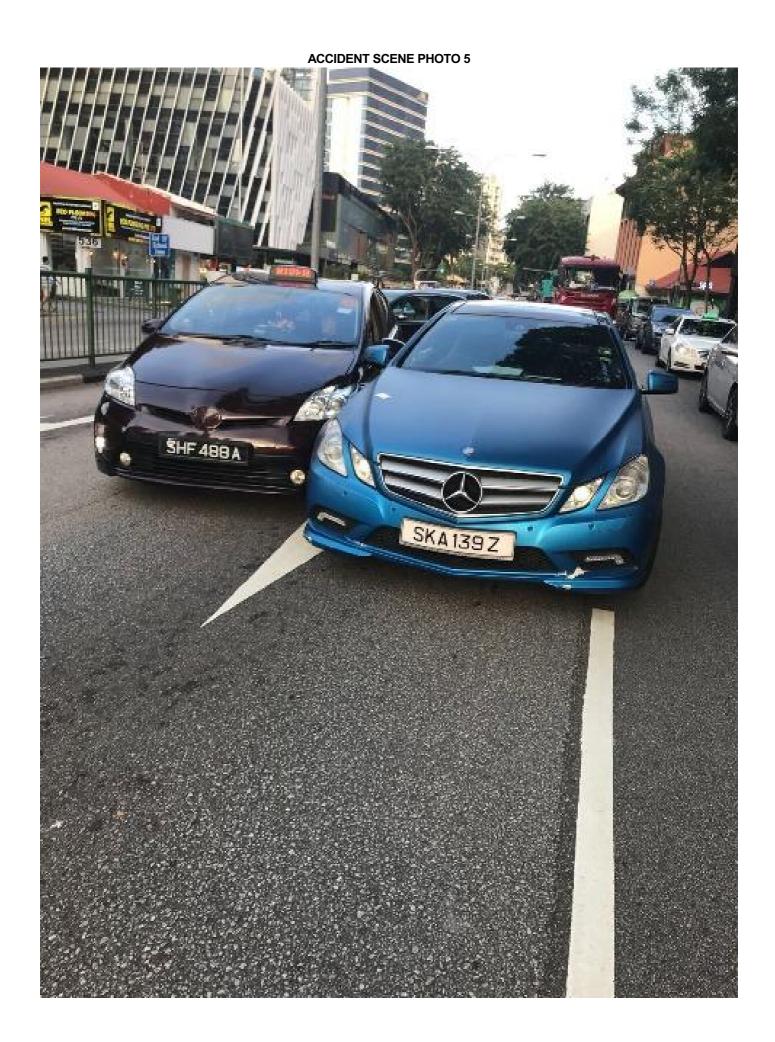


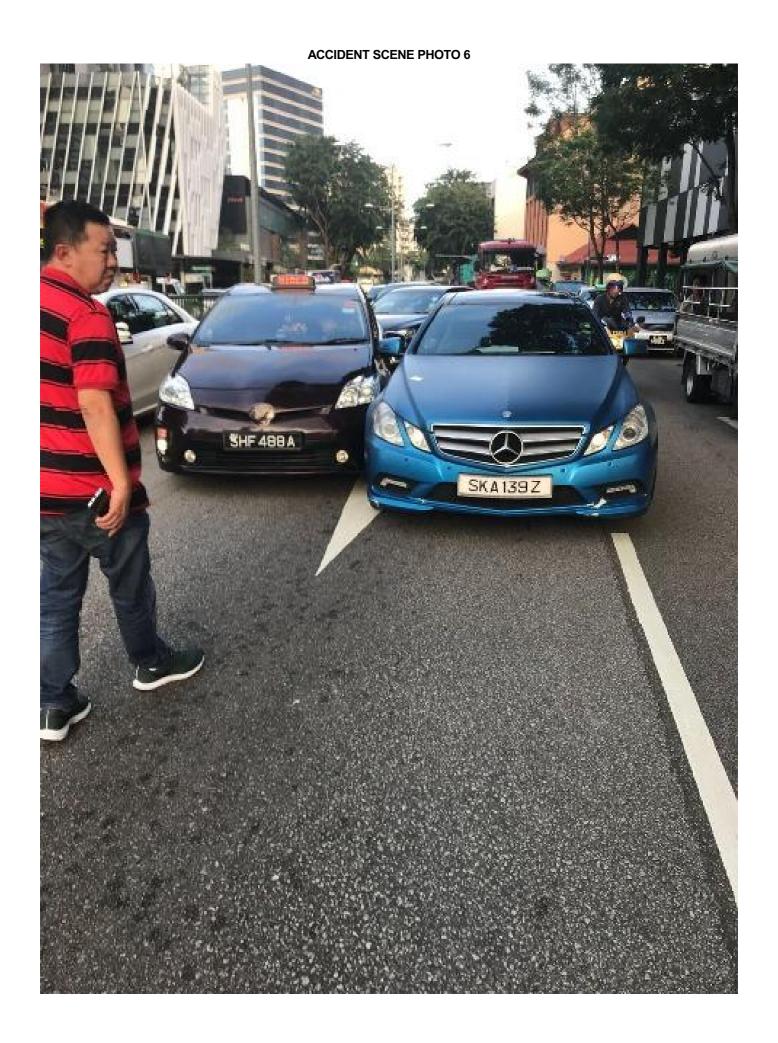
## **ACCIDENT SCENE PHOTO 2**











## **ACCIDENT SCENE PHOTO 7**



