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 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.

	ACCIDENT STATEMENT	
Date Of Report	29/03/2018 09:43	
Date Of Accident	28/03/2018 17:00	•
Exact Location Of Accident	LORONG CHENCHARU	
Country/State of Loss	SINGAPORE	

|--|

Vehicle Registration Number SJC1205K

Insured/Policyholder

Name Of Registered Owner TAN EU JIN (CHEN YOUJUN)

NRIC No. S7704987H

Email Address TANEUJIN@YAHOO.COM

Mobile Phone No (LOCAL) +65-98521170

Alternative Phone No OTHERS-98521170

Vehicle Particulars

Manufacturer TOYOTA

Model VOXY HYBRID-1.8 X CVT (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 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 GA307782/1

Cover Note Number

Driver

Name of Driver TAN EU JIN (CHEN YOUJUN)

NRIC No S7704987H

Date Of Birth 20/02/1977

Occupation INDOOR

Date Of Driving Pass 17/07/1995

Driving Experience 22 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98521170

Fax Number

Contact Number OTHERS-98521170

EMail Address TANEUJIN@YAHOO.COM

Address

BLK 586 WOODLANDS DRIVE 16 #04-120

SINGAPORE

Postcode

730586

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 TO REAR

Weather Conditions

DRIZZLING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

2 YES

Was any body injured in the Accident?
Was any injured conveyed to hospital by

NO

ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

soliciting/offering accident claims assistance.

...

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 THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE AUTOMOTIVE PTE LTD TEL 6741 5336

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES
VIDEO WITH OWNER

Remarks/ Reasons:

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Was there any audio recorded?

SLB8808G

Vehicle Make/Model/Colour

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)

DETAILS OF INJURED PERSON 1

Name

TAN EU JIN (CHEN YOUJUN)

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SJC1205K

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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Sketch Plan #2

SKETCH PLAN

Vehicle No A - SUC 17 0 1 /6 B - SU 2 8808/4



Legend A

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Common Statement

Reporting Centre, Propriese se Automotive Pte Ltis

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Tan Ru Jin (Chen You Jun)

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Reporting Centre: Progressive Automotive Pte Ltd

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