

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	20/04/2018 17:09
Date Of Accident	19/04/2018 17:45
Exact Location Of Accident	PIONEER RD NORTH AYE ROUNDABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX1933G
Insured/Policyholder	
Name Of Registered Owner	PANG TAU PONG
NRIC No	S1344415C
Email Address	CONTACT.KENNETHLYK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92205089
Alternative Phone No	OFFICE-92205089

Vehicle Particulars

Manufacturer	PEUGEOT
Model	207-1.4 2-TRONIC SPORT (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	GA189737 / 1
Cover Note Number	

Driver

Name of Driver	LIM YONG KANG, KENNETH
NRIC No	S9317090C
Date Of Birth	22/04/1993
Occupation	INDOOR
Date Of Driving Pass	29/12/2015
Driving Experience	2 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92205089
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	SINGAPORE
Postcode	
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

Type Of Accident	COLLISION - HEAD TO REAR
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?	
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

On the 19/04/18, at 1745Hrs, I was at Pioneer Rd North waiting to enter AYE. Vehicle B (SFX868R) was waiting in front of my car. I checked the roundabout and moved off as the approaching vehicle was still a safe distance. Unfortunately vehicle B was still stationary and I collided into the rear of vehicle B. After the collision we stopped at a safe place to take pictures of our damages. The Driver of vehicle B seemed to have some discomfort in her neck.

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	SFX868R
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)	

Accident Sketch Plan

SKETCH PLAN

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 liability.
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. The 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 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.:

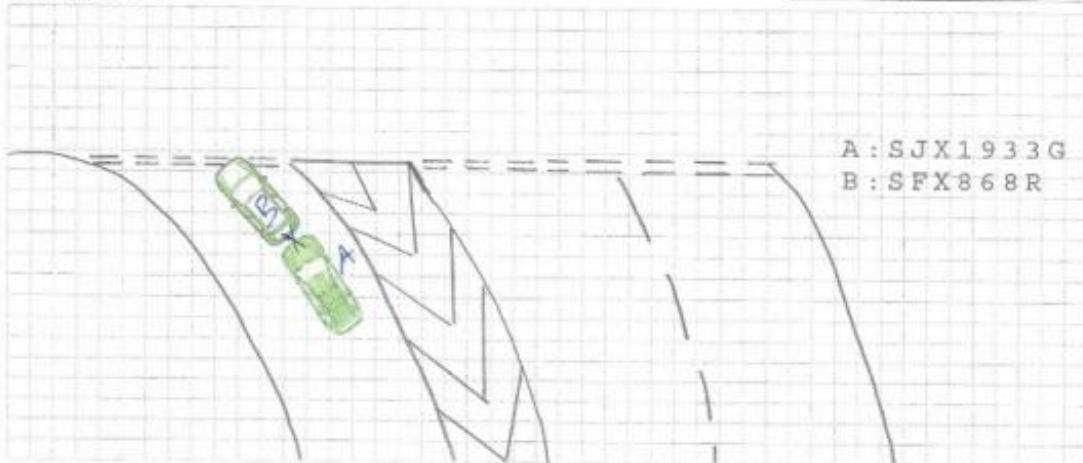
I am fully aware that my insurer may have a 14-day period for me to decide on filing an Own Damage Claim.

10/01/2017 Version 15.0 (Rev. 15.0)

Accident Sketch Plan

SKETCH PLAN

Date of Accident: 19/04/18



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 19/04/18, at 1745Hrs, I was at Pioneer Rd North waiting to enter AYE. Vehicle B (SFX868R) was waiting in front of my car. I checked the roundabout and moved off as the approaching vehicle was still a safe distance. Unfortunately vehicle B was still stationary and I collided into the rear of vehicle B. After the collision we stopped at a safe place to take pictures of our damages. The Driver of vehicle B seemed to have some discomfort in her neck.

- ☐ Own Damage Claim
☐ Third Party Claim
☐ OD/TP Claim at another workshop : _____
☒ Reporting Only

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.:



INSURED

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1344415C



Name



PANG TAU PONG

龐道鳳

Race

CHINESE

Date of Birth

26-11-1959

Sex

F

Country of Birth

SINGAPORE



1284980



NRIC No. S1344415C



Blood Group

O+

Date of Issue

16-09-1993

APT BLK 620 JURONG WEST STREET 65 #10-450
SINGAPORE 640620

NRIC No: S1344415C

Date: 02-01-2004

No: 4783075

DRIVER

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S9317090C**



Name
LIM YONG KANG, KENNETH

林 勇 慷
Race
CHINESE

Date of birth **22-04-1993** Sex **M**



Country of birth
SINGAPORE





REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S9317090C**
Name:
LIM YONG KANG, KENNETH

Birth Date: **22 Apr 1993**
Issue Date: **29 Dec 2015**



002506692K



DRIVER

4209992



NRIC No. **S9317090C**

Date of issue
24-04-2008


Address
**APT BLK 620 JURONG WEST STREET 65
#10-450
SINGAPORE 640620**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	29 Dec 2015

NP 428A

Licence No: S9317090C





redefining / insurance

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

account number
 03811

Certificate of Insurance

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) -Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980 -Road Transport Act, 1987 (Malaysia)
 -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	PANG TAU PONG	Certificate number	6A189737 / 1
Cover	Comprehensive	Chassis number	VF3WCKFU34492172
Plan name	Essential	Engine number	10F2040307402
NCD applicable	0%		
Vehicle registration number	SJX1933G		
Period of Insurance	from 19/04/2017 to 18/04/2018 (both dates inclusive)		
Finance loan company	DBS BANK 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.

This 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.

* - Initiatives 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	S\$D 500.00
	Windscreen Excess	S\$D 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. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

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

Important note

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 Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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, endorsement etc.

VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



Accident Photo



Accident Photo

