

## 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	19/04/2018 13:21
Date Of Accident	19/04/2018 09:15
Exact Location Of Accident	BARTLEY RD EXIT TO PAYA LEBAR
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH4134X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LAI YOON SIONG
NRIC No	S7083637H
Email Address	YS_LAI@YAHOO.COM
Mobile Phone No	(LOCAL) +65-91075639
Alternative Phone No	OTHERS-NOPHONE

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (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	GA037687
Cover Note Number	

### Driver

Name of Driver	LAI YOON SIONG
NRIC No	S7083637H
Date Of Birth	25/06/1970
Occupation	INDOOR
Date Of Driving Pass	19/05/2001
Driving Experience	16 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91075639
Fax Number	
Contact Number	OTHERS-NOPHONE
EEmail Address	YS_LAI@YAHOO.COM

Address	BLK 123 BISHAN ST 12 #09-05
Postcode	570123
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?	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

REFER TO ATTACHED

#### 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	SKE5265M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG LENG LENG
NRIC/Passport Number	S7415006C
Contact Number	97575031
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKQ2894D
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	PRIVATE CAR
Name of Driver	LIM KIAN HOCK
NRIC/Passport Number	S1349987Z
Contact Number	96730926
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**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: 19/11/18 11:28am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

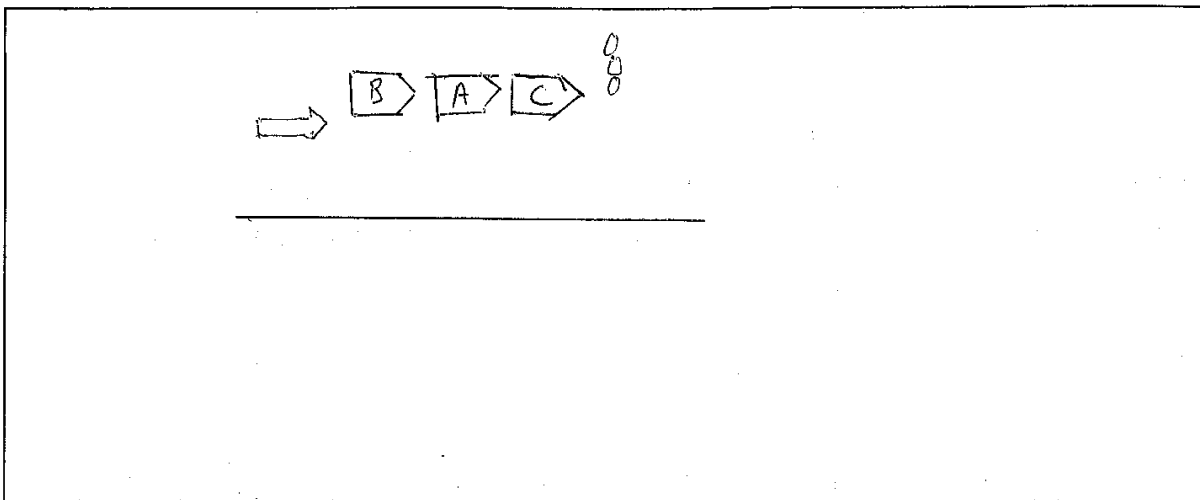
NRIC/FIN No.:



# Sketch Plan Pg. 2

## SKETCH PLAN

Accident Date: 19/4/18 Time: 9:15 Location: Bartley Road exit to Paya Lebar  
 My Vehicle A: SGH4134X Vehicle B: SKE 5265M Vehicle C/Others: SKA 2894D



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stationary at the traffic light waiting for it to turn green. Has been stationary for a while already. Suddenly Car B bang into my back. The impact was so great that my car (vehicle A) also move forward and bang into car C.

( ) Claim OD / TP at Ah Lim Motor ☒ Claim OD / TP at other workshop ( ) Reporting Only

Remarks : Please forward a copy of my efile accident report to

My workshop :

Email Address :

& Myself :

Email Address : ys\_lai@yahoo.com

Note : Please take note that your insurer have **14 days timeframe** for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

## DECLARATION

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

Policyholder's Signature

Date & Time: 19/4/18

Driver's Signature (If driver is not the policyholder)

Date & Time

Witnessed by Reporting Centre

Personnel

11:16am



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

LAI YOON SIONG  
 BLK 123 #09-05  
 BISHAN STREET 12  
 SINGAPORE 570123

**Renewal**

date  
**23/05/2017**

your servicing distributor  
**J & T PLANNING SERVICES / 00880**

your servicing distributor contact  
**62972029**

## Policy Schedule

**Your SmartDrive Comprehensive Private MPV APW**

### Your policy snapshot

<b>Policyholder name</b>	<b>LAI YOON SIONG</b>	<b>Policy number</b>	<b>VA1 / GA037687</b>
<b>Cover</b>	<b>Comprehensive</b>	<b>FIN / NRIC</b>	<b>S7083637H</b>
<b>Period of Insurance</b>	from <b>09/06/2017</b> to <b>08/06/2018</b> (both dates inclusive)		

### Premium breakdown

Gross Premium after 50% NCD	SGD 777.61
Total Discounts	- SGD 38.89
7% GST	SGD 51.71
<b>Final Premium</b>	<b>SGD 790.43</b>

### Your benefits highlights

(refer to Policy Wording for full terms and conditions)

#### SmartDrive Comprehensive Private MPV APW Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability
- Loss of Personal Effects in Singapore up to \$3,000
- Daily Transport Allowance of \$50 for a maximum of five (5) days
- Double Personal Accidental Benefit for Young and Old Passengers
- Car Accessories up to \$2,500
- Medical and dental expenses up to \$500 per person for either you as the driver or your authorised driver and a passenger
- Waiver of Named Young or Inexperienced Driver Excess
- Basic Own Damage Excess Reduction for AXA Premium Workshop
- Personal accident benefit of up to \$30,000 for you or one of your named drivers while driving and \$20,000 per passenger
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess

### Vehicle details


<b>Make &amp; Model of Vehicle</b>	<b>TOYOTA WISH 1.8</b>	<b>Year of manufacture</b>	<b>2006</b>
<b>Vehicle registration number</b>	<b>SGH4134X</b>	<b>Type of Use</b>	<b>Private use</b>
<b>Body type</b>	<b>MPV</b>	<b>Engine capacity (c.c.)</b>	<b>1794</b>
<b>Seating capacity (excl driver)</b>	<b>4</b>	<b>Engine number</b>	<b>1ZZ2570651</b>
<b>Off-Peak car</b>	<b>No</b>	<b>Chassis number</b>	<b>ZNE100306404</b>

<b>Insured's Estimated Market Value</b>	Market Value at the time of Loss (including accessories and spare parts)
<b>Limitation to use</b>	As per Certificate of Insurance
<b>Finance Loan Company</b>	OCBC BANK LIMITED

**Excess applicable** (refer to Policy Wording for other applicable Excesses)

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

**REPUBLIC OF SINGAPORE DRIVING LICENCE**


 Licence Number: **S7083637H**  
 Name: **LAI YOON SIONG**  
 Birth Date: **25 Jun 1970**  
 Issue Date: **18 Jul 2003**

1000665377D

**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S7083637H**


 Name: **LAI YOON SIONG**  
 賴永祥  
 Race: **CHINESE**  
 Date of birth: **25-06-1970** Sex: **M**  
 Country of birth: **MALAYSIA**

S7083637H

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

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	19 May 2001
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	19 May 2001

NP 428A

Licence No: S7083637H

4923713


 NRIC No: **S7083637H**


 Date of issue: **14-01-2013**

Address:  
**APT BLK 123 BISHAN STREET 12**  
**#09-05**  
**SINGAPORE 570123**

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



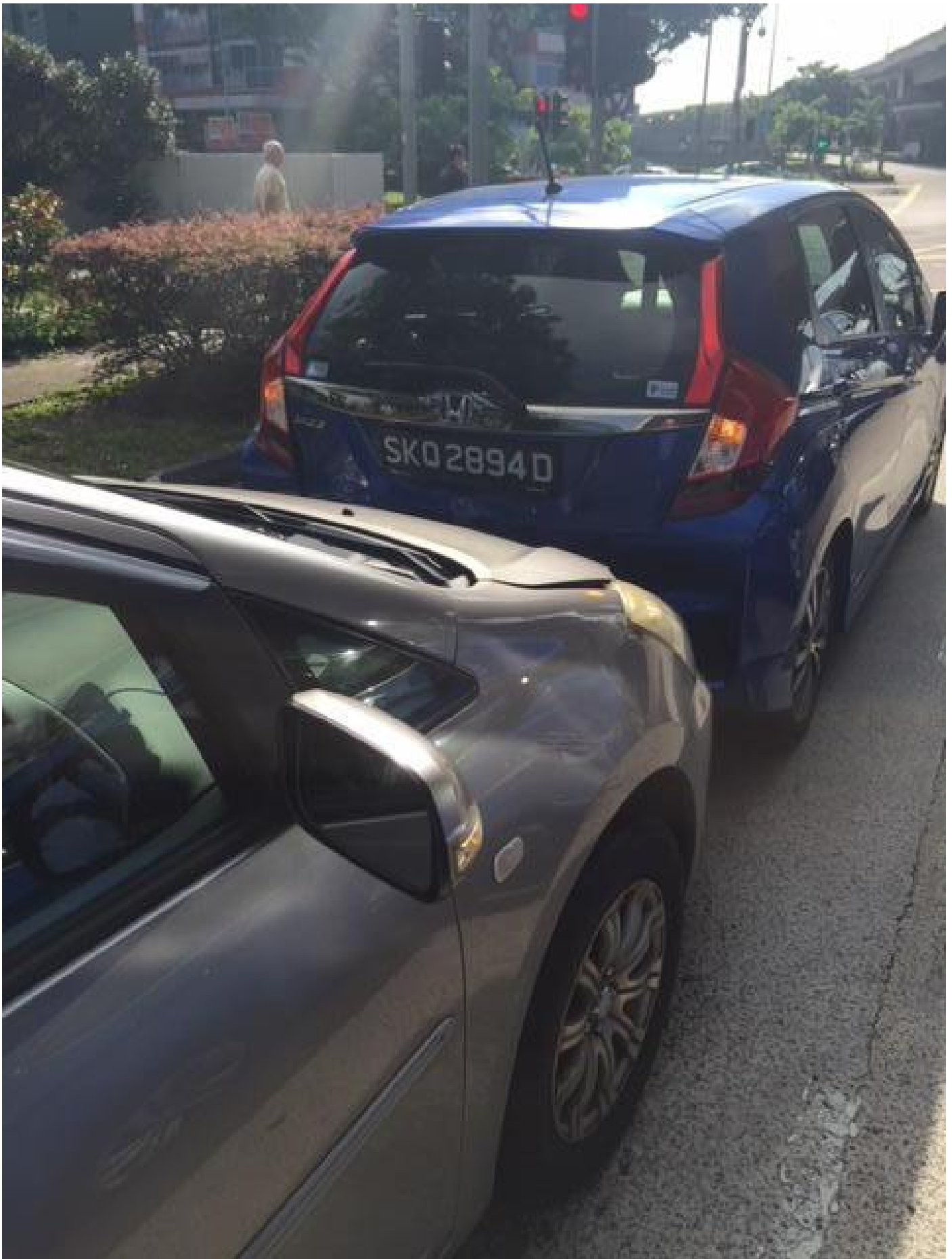
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