

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	23/04/2018 16:32
Date Of Accident	21/04/2018 19:30
Exact Location Of Accident	CTE TOWARDS CITY (NEAR ORCHARD)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK4148G
Insured/Policyholder	
Name Of Registered Owner	FURNITURE CLUB INTERNATIONAL PTE LTD
Co Reg No	201512490E
Email Address	REGINA@FURNITURECLUB.SG
Mobile Phone No	(LOCAL) +65-81808138
Alternative Phone No	OFFICE-67456866

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C200 COUPE-2.0 (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? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA154794
Cover Note Number	

Driver

Name of Driver	ANG QIN HEARN, JAVIER
NRIC No	S9629692D
Date Of Birth	13/08/1996
Occupation	INDOOR
Date Of Driving Pass	07/07/2015
Driving Experience	2 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81138423
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	25 CANBERRA DRIVE #13-52
Postcode	768078
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - COMPANY OWNER'S SON
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

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH7795B
Vehicle Make/Model/Colour	NTUC
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM HOCK SENG
NRIC/Passport Number	
Contact Number	93221761
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKA7992E
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Vehicle Make/Model/Colour	VOLKSWAGEN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHONG CHIA HON
NRIC/Passport Number	
Contact Number	96227043
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

From: FURNITURE CLUB HOLDINGS PL

To: 64583895

23/04/2018 16:02

#438 P.003/005

2018 04/23 MON 16:15 FAX 64583895 K. KIM HIN AUTO

0003/004

SKETCH PLAN

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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: 23/04/2018

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

23/4/2018
3:15pm

Sketch Plan Pg. 2

From: FURNITURE CLUB HOLDINGS PL

To: 64583895

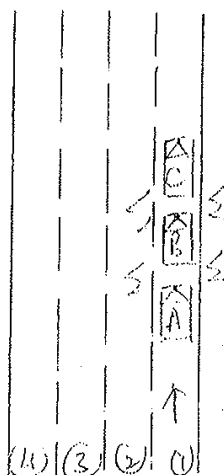
23/04/2018 16:02

#438 P.002/005

2018 04/23 MON 16:15 FAX 64583895 K. KIM HIN AUTO

0004/004

SKETCH PLAN



A: SLK 4148C

B: R1111956

C: SKA 7992E

(CTE - towards City)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On CTE expressway towards city on 21/04/2018 at around 1930,

1st vehicle (Volkswagen) came to a sudden halt even though there was no traffic jam nor was it congested. 2nd car (taxi) also had to emergency ~~break~~ ^{brake} and both cars were stationary on 1st lane. I tried to ~~break~~ ^{brake} as fast and hard as I could but unfortunately couldn't brake in time and had a minor collision. I wasn't tailgating nor speeding but circumstantially was unlucky and got into the accident at the mistake of others.

DECLARATION

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

Policyholder's Signature

Date & Time:

Company Chop (if applicable)

Driver's Signature

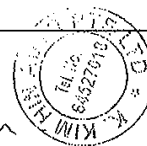
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

