

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	24/04/2018 15:46
Date Of Accident	23/04/2018 09:45
Exact Location Of Accident	ALONG HOLLAND DRIVE (OPPOSITE RD OF BLK 41)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	CB7562C
Insured/Policyholder	
Name Of Registered Owner	CHUA KIM HOE
NRIC No	S1615564J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97492808
Alternative Phone No	OFFICE-97492808

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE COMMUTER GL 3.0 AT 2WD 4DR LWB
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	VBX/P1602577
Cover Note Number	

Driver

Name of Driver	LIM SIEW HOON (LIN XIUYUN) @LIM SHU HOON
NRIC No	S7706110Z
Date Of Birth	13/03/1977
Occupation	OUTDOOR
Date Of Driving Pass	03/02/1999
Driving Experience	19 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-84984098
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK687 JURONG WEST CENTRAL 1 #01-155 SINGAPORE 640687
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - EMPLOYEE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	2
Passenger 1	NAME: : EMPLOYEE GENDER: : MALE

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 SKETCH PLAN.

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	SKU708B
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN CHIA HOE
NRIC/Passport Number	S1308173E
Contact Number	96731032
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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: 24/4/18

Driver's Signature

(If driver is not the policyholder)
Date & Time: 24/4/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Toh Khar Kian

SKETCH PLAN

Refer to Sketch Plan A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

BOTH VEHICLE WAS IN YELLOW BOX WAITING FOR GREEN LIGHT THEN WE CAN COMPLETE THE TURN. ~~TO~~ WHEN IT TURNS GREEN, I MOVE SLIGHTLY MEANWHILE HE WILL DEFFINATELY RUB AGAINST MY VEHICLE IF HE DIDNT MOVE FORWARD THEN TURN. WHEN I HEARD THE SCRATCH SOUND I STOP IMMEDIATELY, BUT HE STILL MOVES HIS CAR THEN STOP IS UNTIL THE TWO VEHICLE SEPERATED THEN HE STOP.

Important: You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.	✓	- Reporting Only
		- Claim OD
		- Claim TP
		- Claim OD/ TP at other workshop

DECLARATION


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

x 

Policyholder's signature
Date & Time



Driver's Signature
(if driver not the policyholder)
Date & Time

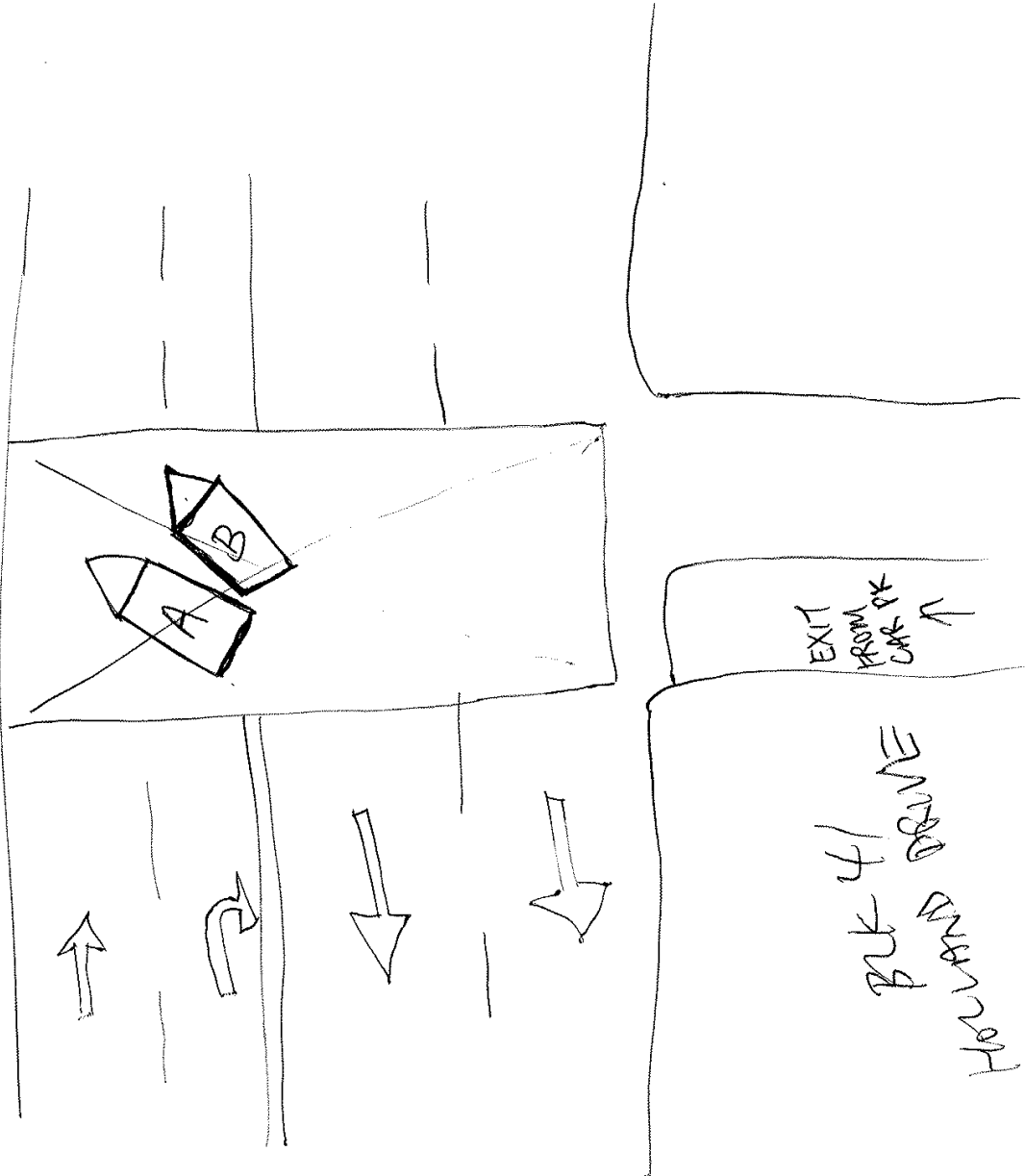


Reporting Centre Personnel's Signature
Name: Toh Khar Kian
Nric/Fin No.

A : is Driver moving to left lane.
B : is 3rd party moving to right lane

Sketch Plan
[Signature]

HOLLAND DRIVE



Sketch Plan A

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel:(65)63387288 Fax:(65)63382522
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.service@axa.com.sg



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)

CERTIFICATE NO. : **VBX/P1602577** Account No. : **03830**
 Coverage : **Comprehensive**
 Sum Insured : **Market Value At The Time Of Loss**
 Name of Policy Holder : **CHUA KIM HOE**
 Vehicle Registration No. : **CB7562C**
 Period of Insurance : From **17/04/2018** To **16/04/2019** (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person provided he is in the Policyholder's employ and/or is driving on their 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.

LIMITATIONS AS TO USE*

- a) Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
 - b) Use only in the Republic of Singapore.
- The Policy does not cover
- (a) Use for racing, pace-making, reliability trial or speed-testing
 - (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle

(14)

EXCESS :

Sect I - Any Authorised Driver : SGD 2,000.00

Sect II-Any Authorised Driver : SGD 1,500.00

Windscreen Excess : SGD 200.00

(For Unnamed Driver Excess, please refer to your policy)

* 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.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions 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

[Signature]
 Authorized Signature


Issued by - **SGILHAM** on **15/03/2018**

IMPORTANT :

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 failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7706110Z**



Name
LIM SIEW HOON
(LIN XIUYUN)
@LIM SHU HOON
林淑雲

Race
CHINESE


Date of birth
13-03-1977

Sex
F


Country of birth
SINGAPORE

S7706110Z

3864196




NRIC No. **S7706110Z**



Date of issue
10-04-2006

Address
APT BLK 687 JURONG WEST CENTRAL 1
#01-155
SINGAPORE 640687


REPUBLIC OF SINGAPORE DRIVING LICENCE



LIM SIEW HOON (LIN XIUYUN)

Date of birth
13 Mar 1977


Issue date
03 Jan 2006



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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	03 Feb 1999

Licence No: **S7706110Z**



NP 426A

Land Transport Authority


VOCATIONAL LICENCE

Licence No.: **S7706110Z**

Name: **LIM SIEW HOON**


Issue Date: **6/12/2005**

Please visit www.lta.gov.sg to check the status of this vocational licence



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	15/01/2002
04	BUS ATTENDANT	15/01/2002



This receipt is not valid unless amount paid is receipted in machine printed figures.
RENEWAL NOTICE FOR VOCATIONAL LICENCE

Name: MS LIM SIEW HOON

Licence No.: S7706110Z

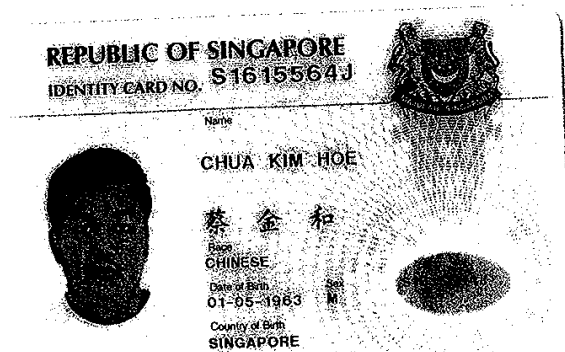
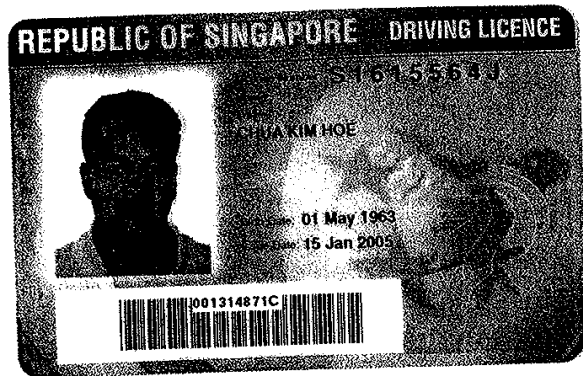
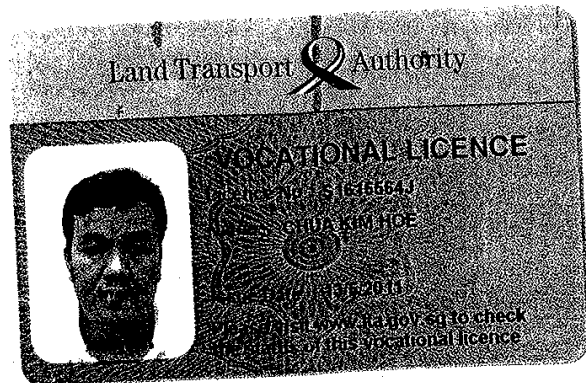
Licence Group: 03/04

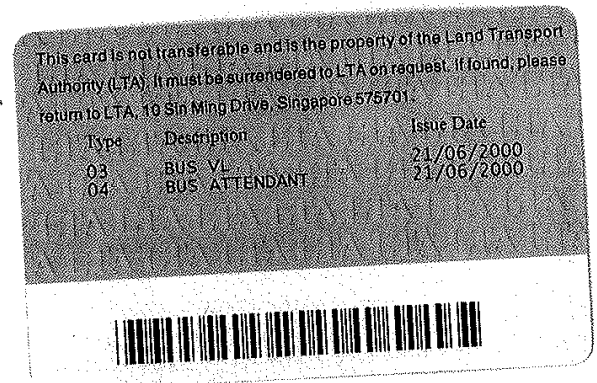
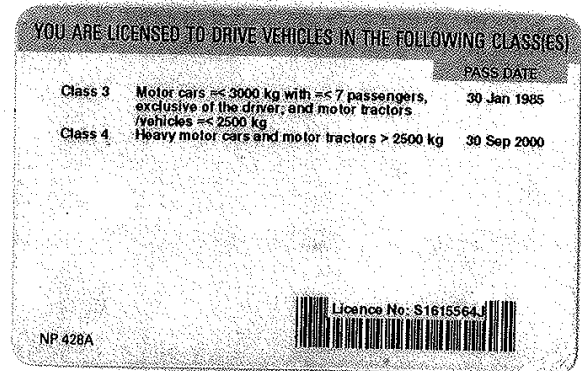
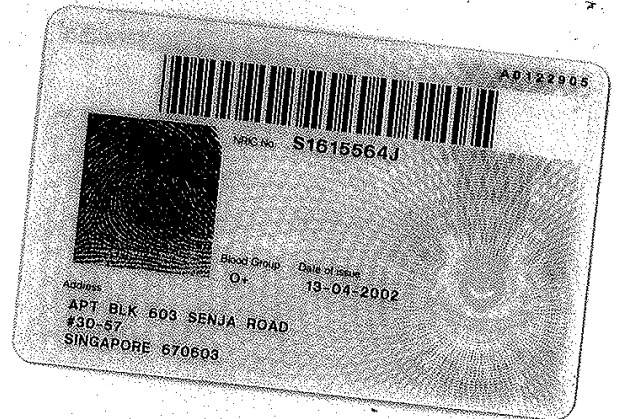
Next Expiry Date: **31/12/2017**

REG 18-11-2014 (TUE) 17:59
CO ADX33 0243
LTA CRN 940.1

Land Transport Authority

Please see overleaf for renewal instructions





OWNER LETTER OF CONSENT

I (Owner Name) CHUA KIM HOE i/c S1615564J owner of this
car no. CB-9562-C authorize the driver (Name) LIM SIEW HOON i/c no.
S7706110Z to file accident report which happened on (Accident Date)
23/4/18 at (Location) HOLLAND DRIVE.

Owner's Name : CHUA KIM HOE

Signature :

x 

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

