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 <u>truthful and accurate</u> 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	26/04/2018 16:27	
Date Of Accident	25/04/2018 17:50	
Exact Location Of Accident	AYE TWRDS JURONG	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKS1836T	
Insured/Policyholder		
Name Of Registered Owner	LOCK CHIN FOO	
NRIC No	S0040194C	
Email Address	CHIN-FOO.LOCK@EXXONMOBIL.COM	
Mobile Phone No	(LOCAL) +65-97832162	
Alternative Phone No	OTHERS-NOPHONE	
Vehicle Particulars		

Manufacturer SUBARU

Model FORESTER-2.0 XT (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 PRIVATE CAR

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number GA154064

Cover Note Number

Driver

Name of Driver

NRIC No

S0040194C

Date Of Birth

Occupation

Date Of Driving Pass

LOCK CHIN FOO

S0040194C

Inlumination INDOOR

20/06/1979

Driving Experience 38 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97832162

Fax Number

Contact Number OTHERS-NOPHONE

EMail Address CHIN-FOO.LOCK@EXXONMOBIL.COM

Address 13 BURGUNDY CRESCENT

Postcode 658726

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?

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 1

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

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 SJS1147K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver TOH XIN LONG
NRIC/Passport Number S9201161E

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHC7508X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TAXI

TAN HWA KOON PETER

S1408618H

93683669

Sketch Plan Pg. 1

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;

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

Accident Date: 25/4/18 Time: 1753/us Location: AYER RAJAH SYPESSENAY
My Vehicle A: SKS 1836T Vehicle B: SJS 1147K Vehicle C/Others SHC 7508
NUH AYE TO JURONG
EXTENDED LANGE A SECURITY OF THE PROPERTY OF T
- SJS+475 SHC7508X
SKS (A) (B) (Came)
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
I was travelling at about 80 km/m on 25/4/18 around
1753 his on Lane 1 of Ayer Rayah Expelse towards Front of me sits 1147 to
sto suddenly slam its brækes hittig uito and toxi
in front of him SHC 7508 . I could not stop
my car in time and bit & KS 1147 K at the rear
There was no personal injuries in this accident.
Miner damage was seen at rear bumper of
SHC 7508 x, front and near busper of STE114716
And front bumper of my can SKS 18367 Downege to all 3 vachicles were minor,
Damage to all 3 'vachicles were minor,
() 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: MOTOR IMAGE ENTERPRISE PTS LITD Email Address: daniel motor image. net & Myself: LOCK CHIN FOO Email Address: chin-foo. 18ck @ exxonmobil, 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: 26 4 18 Date & Time: Date & Time Date & Time: Date & Time Date & Time: Date & Time



redefining / insurance



LOCK CHIN FOO 13 BURGUNDY CRESCENT SINGAPORE 658726

Renewal date

06/12/2017

your servicing distributor

AXA insurance Pte Ltd

(65) 6880 4740 ☑ customer.care@axa.com.sg www.axa.com.sg

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

WINNER INSURANCE AGENCIES PTE

LTD / 04460

your servicing distributor contact

62838611

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name

LOCK CHIN FOO

Comprehensive

Policy number FIN / NRIC

VA1 / GA154064 S0040194C

Period of Insurance

from 18/01/2018 to 17/01/2019 (both dates inclusive)

Premium breakdown

Gross Premium after 50% NCD

Total Discounts 7% GST

Final Premium

SGD 1.304.25 - SGD 69.53 SGD 86.43

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Legal Liability
- Workshop of Your Choice
- Medical and dental expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

- Add-on/Benefits

 Personal accident benefit of up to \$ 50,000.00 for you and your named drivers
- Courtesy car Standard in Singapore up to ten (10) days
- Personal accident benefit of up to \$20,000 per passenger

Vehicle details

Make & Model of Vehicle Vehicle registration number Body type

Seating capacity (excl driver)

SKS1836T SUV

Year of manufacture Type of Use. Engine capacity (c.c.) Engine number

Chassis number

2016 Private use 1998

Off-Peak car

FA20B860746 JF1SJGK85GG080099

Insured's Estimated Market Value Limitation to use Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts) As per Certificate of Insurance

HL BANK

SUBARU FORESTER 2.0XT

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

Basic Own Damage Excess Windscreen Excess

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

1 of 2

INS NRIC & DL Pg. 1

















































