## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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 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

	ACCIDENT STATEMENT
Date Of Report	02/05/2018 13:54
Date Of Accident	02/05/2018 06:45
Exact Location Of Accident	SLIP RD FR BISHAN ST 21 INTO MARYMOUNT RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKU658L
Insured/Policyholder	
Name Of Registered Owner	LINA TAN
NRIC No	S7316822H
Email Address	MISSLTAN@YAHOO.CO.UK
Mobile Phone No	(LOCAL) +65-97828151
Alternative Phone No	OTHERS-NOPHONE
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	TOURAN-1.6 TDI (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	P1634569
Cover Note Number	
Driver	

Name of Driver LINA TAN NRIC No S7316822H Date Of Birth 13/05/1973 Occupation **INDOOR** Date Of Driving Pass 17/11/1994

23 YEARS AND 5 MONTHS **Driving Experience** 

**FEMALE** Gender

Mobile Number (LOCAL) +65-97828151

Fax Number

Contact Number OTHERS-NOPHONE

**EMail Address** MISSLTAN@YAHOO.CO.UK

68 GOLDHILL AVE Address

Postcode 309036 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 COLLISION - HEAD TO REAR

Weather Conditions **CLEAR** Road Surface DRY

Other Information

NO Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

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)

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

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SGF8686D Vehicle Make/Model/Colour TOYOTA WISH

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver **EDWIN YEO WAN SONG** 

NRIC/Passport Number S6872721I 97473575 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

#### SKETCH PLAN

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- 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.
- 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 Fersonnel's Signature

Name:

NRIC/FIN No.:

GIARMC SketchPlanForm\_V3

i.

# Sketch Plan Pg. 2

Date of Assident: 2/5/2	OLS Time: 0645 Location: Slip rd From Bithau St 2.	101
My Vehicle A: Sku 658 L	018 Time: 0645 Location: Supred from bishan St 2,  Vehicle B: SGF 866D Vehicle C/Others: nil	ntecuji
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	Sku658/1	
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into the Wan	yment hoad but The car 14 front	
had not move	off.	
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) Claim OD/TP at Ah Lim	n Motor ( ) Claim OD/TP at other workshop ( ) Reporting Only	
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emarks: Please forward a y workshop: nail address: myself: nail address: ote: Please take note that y aim under your own policy	your insurer have 14 days timeframe for you to submit own damage y. Kindly check with your own insurer for more information.  Pers are true in every respect.  Driver's Signature (If driver is not the policyholder) Name:  Date & Time: 2/5/1/F	

AXA INSURANCE SINGAPORE PTE LTD 8 Shenton Way, #27-01 AXA Tower, Singapore 068811

Customer Service Centre #B1-01 Tel:(65)63387288 Fax:(65)63382522 Website:www.axa.com.sg
GST Registration Number: M2-0009922-2 customer.service@axa.com.sg



PRIVATE MOTOR POLICY SCHEDULE NEW BUSINESS Duplicate

POLICY INFORMATION Policy No.: VPA/P1634569 Source : (01) 07894 ARF (AP) PTE LTD (VW) Insured : LINA TAN Address : 68 GOLDHILL AVENUE SINGAPORE 309036 Business/Profession : HOUSE WIFE Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.

Period of Insurance : From 29/06/2015 To 28/06/2016 (Both Dates Inclusive) Any subsequent period for which the Insured shall pay and the Company shall

agree to accept a renewal premium.

PREMIUM

Premium After 50.00%: SGD 1,042.37

NCD

Extra Coverage : SGD 150.00

Safe

Driver Disc : SGD 95.39

8.00%

GST 7.00%

: SGD 76.79

Annual Premium

: SGD 1,173.79

Total Payable

: SGD 1,173.79

RISK DETAILS THE MOTOR VEHICLE

Type Of Cover

: Comprehensive

Regn No.

: SKU658L

Type Of Use

: Private Car

Make/Model

Year of Manufacture : 2015

: VOLKSWAGEN TOURAN 1.6 TDI

Seating Capacity (excl. Driver) : 07

Body Type

: MULTI - PURPOSE VEHICLE

Engine C.C. : 1598

Engine No.

: CAYBA6976

Chassis No.: WVGZZZ1TZFW064730

Insured's Estimated : Market Value At The Time Of Loss

Markét Value

(including Accessories and Spare Parts)

Limitations as to Use: As specified in Certificate of Insurance

Hire Purchase

: DBS BANK LTD

Extra Coverage (Premium Breakdown)

Limits (SGD)

Premium (SGD)

Equipment - Refer Memo

150.00

Excess Applicable

Own Damage Excess

: SGD 800.00

Named Drivers

1 LINA TAN

MAKE & MODEL: VOLKSWAGEN TOURAN 1.6 TDI AT 1T332Z

Page 1

## INS NRIC & DL Pg. 1





Race
CHINESE
Court Both
13-05-1973
County of Both
SING APORE



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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 17 Nov 1994

NOCNO S7316822H

Bood Group Care of issue O+ 21-06-1994

68 GOLDHILL AVENUE SINGAPORE 309036 MRIC No: \$7316822H

Ref: 205398

2164708

Date: 03-06-2005 No: 5128245

Nº 428A





















