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 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.

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	ACCIDENT STATEMENT
Date Of Report	04/05/2018 17:08
Date Of Accident	04/05/2018 08:40
Exact Location Of Accident	OLD TAMPINES ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SCK882C
Insured/Policyholder	
Name Of Registered Owner	TEE KOK LUAN
NRIC No	S2501366B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96302081
Alternative Phone No	OFFICE-96302081
Vehicle Particulars	
Manufacturer	LEXUS
Model	GS350
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	GA178221
Cover Note Number	
Driver	

Name of Driver TEE KOK LUAN S2501366B NRIC No Date Of Birth 07/08/1953 Occupation **INDOOR Date Of Driving Pass** 18/08/1975

Driving Experience 42 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96302081

Fax Number

OFFICE-96302081 Contact Number

EMail Address NOEMAIL

212 LOYANG AVENUE #01-02 Address

Postcode 509064

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

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

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 4

Passenger 1

NAME: : TEE WEI KANG

GENDER: : MALE

Passenger 2 NAME: : ONG SONG CHEON

> **GENDER:** : FEMALE

Passenger 3 NAME: : TEE PEI JI

> GENDER: : FEMALE

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

NO

If Yes, against whom?

Circumstances of Accident

MY VEHICLE WAS STATIONARY AT TRAFFIC LIGHT. SUDDENLY, VEHICLE B HIT ONTO MY VEHICLE REAR.

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 SH8532L

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B TAXI Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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 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:
 - 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, sow enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for consolying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 18

Driver's Signature (If driver is not the policyholder) Date & Time:

Name: NRIC/FIN No.:

Reporting Centre Personnel's Signature

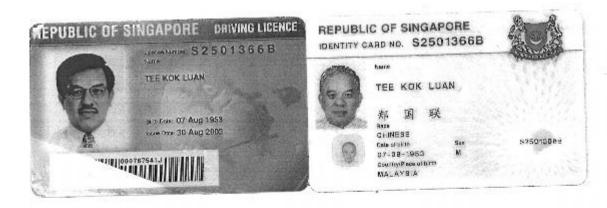
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I/We declare the foregoing par			
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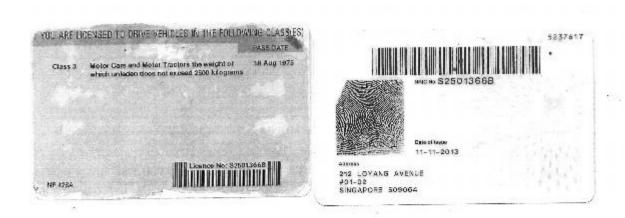
Date & Time:

LETTER OF UNDERTAKING

I/We,	786 F	06	CAAN	, the ov	wner of vehicle no.	201 0	
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Signed a	and Acknowl	ledge k		Company S		04(05	12018

Driving License









AXA Insurance Pte Ltd

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

÷ [85] 6580 4740

M contonnersamenta.com.sq

Www.axa.com.sg

account number 00084

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Policy details

PuBeyinhiler name Corer

TEE KOKILLAN Comprehensive Peace 50%

Certificate of Insurance

Cortificate as other Chaasts number Engine number

64178221 / 1 #FIRE18005005412 2078/01908

Plan came NGD applicable Validate registration number

SCK8820

from 30/04/2018 to 29/04/2019 (noth cates inclusive) Period of Insurance

CONSAND SINGAPORE LIMITED Figanco Isan company

Persons or classes of persons entitled to drive*

ias the Policyholder

Any Number Driver as estated in the Policy TIMPE 300 Y RIAR

9 TEE WE MANG For kny person who is driving on the Rothyholder's order or with their pertir legion.

Provided that the person directly is over used in experience with the idensity of other lows or regulations to drive the factor value of a real branch no mined and is not discuss field by order of a Count of Janvier by recent of on, anactment or regulation in that bonnif from driving the Motor Website.

Limitation as to use*

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Windscreen Excess

Not Applicable

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- 2. 985000 for dealered inving and mesperiorized Driver
- 3. São BIXI ter undeclared roung and his personness & very This additions, serves is reduced to 932,500 in vita have present A&A Frentrum Norkshous

Additional clauses & endorsements to your policy

2.0

5 Walferet, certify Car, the concept version this Certificate relation is expected in accordance with the provision of the Motor Velocies (Tind Perty Risks and Controlledon; An. (Chapter 199) and Port IV of the Rose Renaport Act. (1987) (Malaysia)

AXA Insurance Pte Ltd

Authorised agreeme

Important note

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APA insurance Pts Ltd (199905610M) Sighanton Way #34-01, AKA Rower Singapore 068811 Oustomer Centre, #E1 05.

Accident Photo









Accident Photo









