

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	31/05/2018 15:33
Date Of Accident	30/05/2018 15:50
Exact Location Of Accident	QUEEN ST @ MIDDLE ROAD JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCX787B
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Insured/Policyholder

Name Of Registered Owner	CHIA WEE KIANG
NRIC No	S1486916F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96365345
Alternative Phone No	OTHERS-90094218

Vehicle Particulars

Manufacturer	LAND ROVER
Model	FREELANDER 2 LF-3.2 L ABS A/B G/D SR (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	GA164026
Cover Note Number	16/02/2018 - 15/02/2019

Driver

Name of Driver	CLARE CALEAN CHIA YULING
NRIC No	S9015141Z
Date Of Birth	01/05/1990
Occupation	INDOOR
Date Of Driving Pass	14/06/2016
Driving Experience	1 YEAR AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90094218
Fax Number	
Contact Number	OTHERS-96365345
EEmail Address	CALAEN_FROSKY@HOTMAIL.COM

Address	31 SPRINGSIDE LINK 786595
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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
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: : POH SEOK LAY GENDER: : FEMALE

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 THE SKETCH PLAN BY DRIVER

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	SHB8616R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

GRANT NOTICE

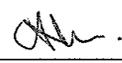
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- 8. **Consent under the Personal Data Protection Act (PDPA)**

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:



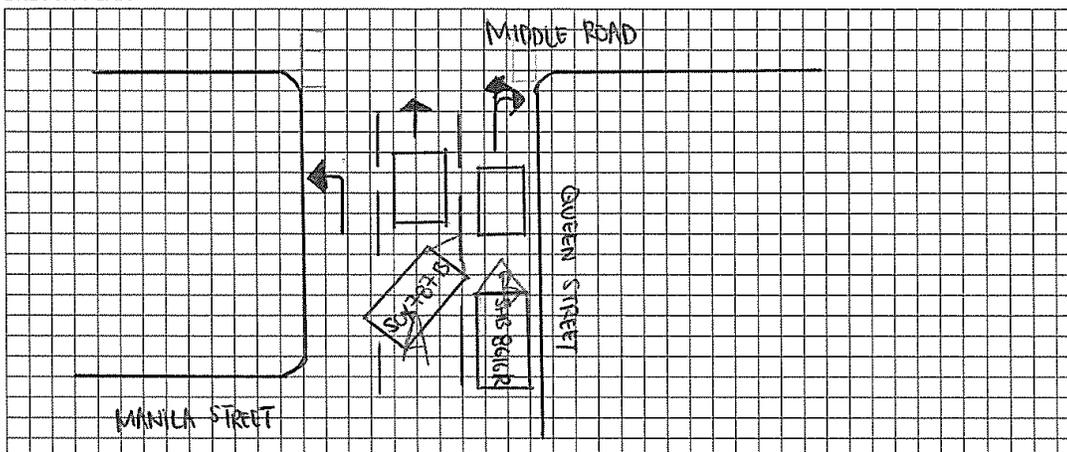
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:



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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

RIGHT AFTER I TURNED OUT FROM SIDE ROAD (MANILA STREET) TO QUEEN STREET, IT WAS A SHORT DISTANCE TO THE TRAFFIC LIGHT AND IT WAS TURNING RED AS I FILTERED OUT. AS I HAD TO GO TO THE EXTREME RIGHT TO MAKE A RIGHT TURN, I HAD MY SIGNAL ON THE MOMENT I MOVED OUT FROM THE SIDE ROAD. AS THERE WAS A CAR BLOCKING MY VEHICLE ON THE 2ND LANE, I WAS UNABLE TO FILTER OUT FULLY, HENCE I WAITED, STILL, WITH MY SIGNAL ON TO FILTER TO THE FIRST LANE. THEN CAME THE TAXI DRIVER OF VEHICLE (SHB 8616 R), WHO CLEARLY KNEW MY INTENTIONS OF FILTERING TO HIS LANE. ^{WHEN TRAFFIC TURNED GREEN,} I GESTURED TO HIM, ONLY BECAUSE HE SIGNALLED BACK TO ASK ME TO GO, I PROCEEDED TO MOVE MY VEHICLE. INITIALLY, HE PAUSED TO LET ME PASS, BUT AS I WAS MOVING MY VEHICLE, HE MOVED HIS VEHICLE AS WELL, CAUSING THE COLLISION.

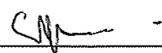
DATE OF ACCIDENT : 30 MAY 2018
 TIME : ~~7:25 HRS~~ 1550 PHRS.
 LOCATION : QUEEN STREET @ MIDDLE ROAD JUNCTION
 WEATHER : FINE

DECLARATION

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



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.



redefining / insurance

AXA Insurance Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

CHIA WEE KIANG
 31 SPRINGSIDE LINK
 SINGAPORE 786595

Renewal

date
 12/02/2018

your servicing distributor
 VC INSURANCE AGENCY PTE LTD /
 04675

your servicing distributor contact
 8686 4886

Policy Schedule
 Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name	CHIA WEE KIANG	Policy number	VA1 / GA164026
Cover	Comprehensive	FIN / NRIC	S1486916F
Period of Insurance	from 16/02/2018 to 15/02/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,258.18
Total Discounts	- SGD 67.07
7% GST	SGD 83.38
Final Premium	SGD 1,274.49

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Flexi Benefits

- 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
- Loss or Damage
- 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

- Courtesy car Standard in Singapore up to ten (10) days
- No Claim Discount Protector

Vehicle details

Make & Model of Vehicle	LAND ROVER FREELANDER 2 LF 3.2	Year of manufacture	2012
Vehicle registration number	SCX787B	Type of Use	Private use
Body type	SUV	Engine capacity (c.c.)	3192
Seating capacity (excl driver)	4	Engine number	B6324S12101120053
Off-Peak car	No	Chassis number	SALFA2AA7BH278241

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	OCBC BANK LIMITED

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

Basic Own Damage Excess	SGD 400.00
Windscreen Excess	SGD 100.00

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9015141Z



Name
CLARE CALEAN CHIA YULING
谢 玉 玲

Race
CHINESE

Date of birth
01-05-1990

Sex
F

Country of birth
SINGAPORE



S9015141Z

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9015141Z**
Name: **CLARE CALEAN CHIA YULING**

Birth Date: **01 May 1990**
Issue Date: **14 Jun 2016**



002578216H

90094213 | 96365345 (owner)

D/c
NO W/M
CARIA
W/M W MUM

Poh Seok Lay

Email: CALEAN_FROSKY@HOTMAIL.COM.

3713228



NRIC No. **S9015141Z**



Date of Issue
12-05-2005

Address
**31 SPRINGSIDE LINK
SINGAPORE 786595**

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

	EFFECTIVE DATE
Class 3A Motor cars without clutch pedals (Auto) with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight =< 2500kg	14 Jun 2016

NP 428A

Licence No: S9015141Z



Sketch Plan Pg. 5

To Whom It May Concern,

Accident involving my vehicle no. SCK789B on 30/5/18 (date) with
SHB8616R (other vehicle no) along Queen St @ Middle Rd Junction

I, POH SEOK LAY Nric No. S1916302G

Named
Driver

~~Owner~~ of vehicle no. SCK789B am aware of the accident of my vehicle on
30/5/18 (Date) while car was driven by Clare Calen Chia Yuling

Nric No. S9015741E. I hereby, authorise him / her to make the report.

X



Name Poh Sok Lay

Date: 31/5/18

.....
..
To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.

X

Name

Date:







Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

