

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 18:48
Date Of Accident	31/05/2018 17:15
Exact Location Of Accident	GRANGE ROAD TURNING INTO ONE TREE HILL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA2898C
Insured/Policyholder	
Name Of Registered Owner	HEOK KAY HENG, ADRIAN
NRIC No	S7242498J
Email Address	ADRIAN.HEOK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83821888
Alternative Phone No	OTHERS-83821888

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
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?	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	VA1/GA343737
Cover Note Number	

Driver

Name of Driver	HEOK KAY HENG, ADRIAN
NRIC No	S7242498J
Date Of Birth	13/11/1972
Occupation	INDOOR
Date Of Driving Pass	14/06/1994
Driving Experience	23 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83821888
Fax Number	
Contact Number	OTHERS-83821888
Email Address	ADRIAN.HEOK@GMAIL.COM

Address	BLK 188 PUNGGOL CENTRAL #16-281
Postcode	820188
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	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?	
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: : FRIEND 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

PLEASE REFER TO STATEMENT

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	EJ1999A
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MARK EVAN LIM AN WEI
NRIC/Passport Number	S9405254H
Contact Number	9674 0778
Address	36 TOMLINSON ROAD #15-36 S(247856
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Individual Statement

☒ Owner
☐ Driver

ACCIDENT STATEMENT

Date of Accident: 31/5/2018 Time: 17.15pm Location of Accident: Grange Road turning into One tree Hill

INSURED/ POLICY HOLDER (VEHICLE A)

Vehicle Registration Number: SKA 2898C
Name of Policyholder: HEOK KAY MENG, ADRIAN
NRIC/ FIN/ Passport/ ROC (if Policyholder is company): S726 24983
Address: BK188 PUNGGOL CANTONMENT 16-281 (820188)
Contact Number: Tel: Hp 83821888
Occupation:

VEHICLE PARTICULARS (VEHICLE A)

Vehicle Make / Model: NISSAN QASHQAI
Type of Vehicle: ☒ Saloon ☐ MPV ☐ CRV ☐ Van ☐ Lorry ☐ Bus ☐ Motorcycle ☐ Others
Exact Purpose for which vehicle was being used at the time of accident: PRIVATE USE
Are you claiming under your own insurance policy? ☒ Yes ☐ No
Vehicle category: ☒ Private ☐ Commercial ☐ Motorcycle

INSURANCE COMPANY (VEHICLE A)

Name of Insurance Company: AXA
Type of Policy: ☒ Comprehensive ☐ TP Fire & Theft ☐ Third party
Fleet Policy: ☐ Yes ☒ No
Policy Number: WA19A343737

DRIVER

Name of Driver: =
NRIC/ FIN/ Passport: =
Date of Birth: 13-11-1972
Occupation: INDUSTRY
Driving Pass Date: 14-06-1994
Gender: ☒ Male ☐ Female
Contact Number: Tel: Hp 83821888
Address: BK188 PUNGGOL

Was driver an employee of the Insured's Company? ☐ Yes ☒ No
If No, relationship of Driver with the Insured: OWNER

Vehicle Number of Driver's Own Vehicle (if applicable):

Insurance of Driver's Own Vehicle (if applicable):

GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (E.g. Chain Collision/ Head-On, etc): 2 PRX (F) S1P2 by S1P2
Weather Conditions: ☒ Clear ☐ Raining ☐ Others
Road Surface: ☐ Wet ☒ Dry ☐ Others
Damage Area:

OTHER INFORMATION

Was there any foreign vehicle(s) involved? ☒ No ☐ Yes
Was anybody injured in the accident? (including Witness) ☒ No ☐ Yes
Was any other vehicle(s) or property damaged? ☒ No ☐ Yes
Was there any camera video footage (in car)? ☐ No ☒ Yes

DETAILS OF POLICE ACTION

Was the accident reported to the Police? ☒ No ☐ Yes
If Yes, please state which police station & Report No:
Was notice of intended Prosecution given? ☒ No ☐ Yes
If Yes, against whom?

adrian.heok@gmail.com

Individual Statement

OWN VEHICLE REGISTRATION NUMBER

SKA2898C

DETAILS OF OTHER VEHICLES OR PROPERTY DAMAGED

Other Vehicle or Property 1 (VEHICLE B)

Vehicle Registration Number

EJ1999A

Vehicle Make/ Model/ Colour

BMW

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

Mark Evan Lim An Wei

NRIC/ FIN/ Passport

S9405254M

Contact Number / Email Address

9674 0778

Address

36 Tomlinson Road #15-36 S(247856)

Name of Insurance Company

Other Vehicle or Property 2

Vehicle Registration Number

Vehicle Make/ Model/ Colour

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

NRIC/ FIN/ Passport

Contact Number / Email Address

Address

Name of Insurance Company

DETAILS OF WITNESS

Name

Phone / Email Address

Address

NRIC/ FIN/ Passport

DETAILS OF INJURED PERSON 1

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐ Yes

☐ No

Was Injured conveyed to hospital by ambulance?

☐ Yes

☐ No

DETAILS OF INJURED PERSON 2

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐ Yes

☐ No

Was Injured conveyed to hospital by Ambulance?

☐ Yes

☐ No

Declaration

(We declare that the above particulars & information provided above are true in every aspect.)



Signature of Policy Holder
(Company Chop if applicable)

Date & Time

31/5/2018 18:30

Signature of Driver / Date & Time
(If Driver is not the Policy Holder)

Date & Time

Individual Statement


SKETCH PLAN

IMPORTANT NOTICE

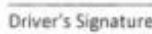
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8. **Consent under the Personal Data Protection Act (PDPA)**

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:

31/5/2018 18:30


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


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

Individual Statement



redefining insurance

Date 31/05/2018

To: Owner of Vehicle Number SKA 2898C

The following has been advised to you via your workshop, BH Auto through their staff, Yap Ing

Please tick the applicable box if you had been advised on the content as seen below:

- ☐ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☐ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is _____ The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- ☐ For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using any combination of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.

☒ Others Own Damage claim

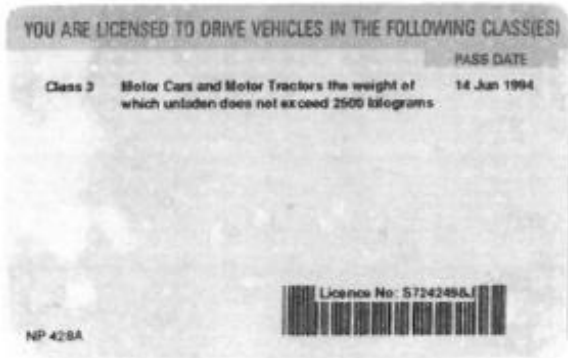
Signed and acknowledged by:

HEOK KAY HENG, AUCIHN

Name and signature of policyholder/authorised driver

Name and signature of workshop personnel including company stamp

IDENTITY CARD & DRIVING LICENCE



CERTIFICATE OF INSURANCE

M1 4G

6:42 PM

69%

Done

GA343737-New Policy.pdf



redefining / insurance

HEOK KAY HENG ADRIAN
BLK 188 #16-281
PUNGGOL CENTRAL
SINGAPORE 820188

AXA Insurance Pte Ltd
1800 890 4888 (Within Singapore)
(65) 6880 4888 (International)
(65) 6880 4740
customer.care@axa.com.sg
www.axa.com.sg

New business

date
13/04/2018

your servicing distributor
FUN KWANG CHENG / 00618

your servicing distributor contact
68338265

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name	HEOK KAY HENG ADRIAN	Policy number	VA1 / GA343737
Cover	Comprehensive	FIN / NRIC	57242498J
Period of Insurance	from 14/04/2018 to 13/04/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 0% NCD	SGD 1,777.79
Total Discounts	- SGD 188.90
7% GST	SGD 111.22
Final Premium	SGD 1,700.11

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)

Vehicle details

Make & Model of Vehicle	NISSAN QASHQAI 1.2	Year of manufacture	2015
Vehicle registration number	SKA2898C	Type of Use	Private use
Body type	SUV	Engine capacity (c.c.)	1197
Seating capacity (excl driver)	4	Engine number	HRA2208946A
Off-Peak car	No	Chassis number	SJNFEAJ11U1533513

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	Nil

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

Basic Own Damage Excess	SGD 600.00
Windscreen Excess	SGD 100.00

Drivers details

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

1 of 2

VA1 / GA343737



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card TP



Accident Photo





Accident Photo





REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9405254H



Name

MARK EVAN LIM AN WEI

林安伟

Race

CHINESE

Date of birth

27-01-1994

Sex

M

Country of birth

SINGAPORE



Accident Photo

