

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	13/06/2018 12:12
Date Of Accident	12/06/2018 18:00
Exact Location Of Accident	DUNEARN ROAD TOWARDS CITY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBM3818X
Insured/Policyholder	
Name Of Registered Owner	TAN HAN POH
NRIC No	S1339898D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91462639
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA-2.4 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	GA0789233
Cover Note Number	

Driver

Name of Driver	HENG KWEE TZE
NRIC No	S7112886E
Date Of Birth	26/04/1971
Occupation	INDOOR
Date Of Driving Pass	30/05/2005
Driving Experience	13 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91462639
Fax Number	
Contact Number	
EEmail Address	KWEETZEH26@GMAIL.COM

Address	24 BURGUNDY DRIVE
Postcode	658827
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - U-TURN
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	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 SKETCH PLAN AND STATEMENT ATTACHED

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	SLK9028L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE ENG HWEE
NRIC/Passport Number	S1635050H
Contact Number	90281920
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

VEHICLE NO: **SBM3818X**
ACCIDENT DATE: **12/6/18**


IMPORTANT NOTICE

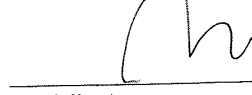
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8. Consent under the Personal Data Protection Act (PDPA)

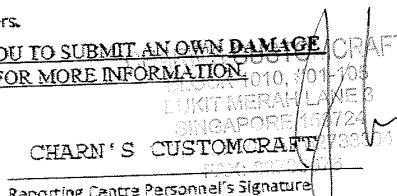
I understand, acknowledge, agree and consent that:

- (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.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.


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.:

On 12 June 2018 at about 6.00pm, I was driving my vehicle, SBM 3818 X, along Dunearn Road towards City, in front of the Caltex petrol kiosk. I was on the right most lane before the U-Turn. I signalled left to move to the second lane as there were vehicles queuing up to make a U-turn and I was driving straight. I checked that the traffic was clear and I slowly drove out. Suddenly, a white Toyota SLK 9028 L, which was behind my vehicle in the rightmost lane, suddenly hit my vehicle on the left side.

No one was injured. It was not raining at the time. The road was dry at the time. Traffic was moderate at the time. No government property was damaged.

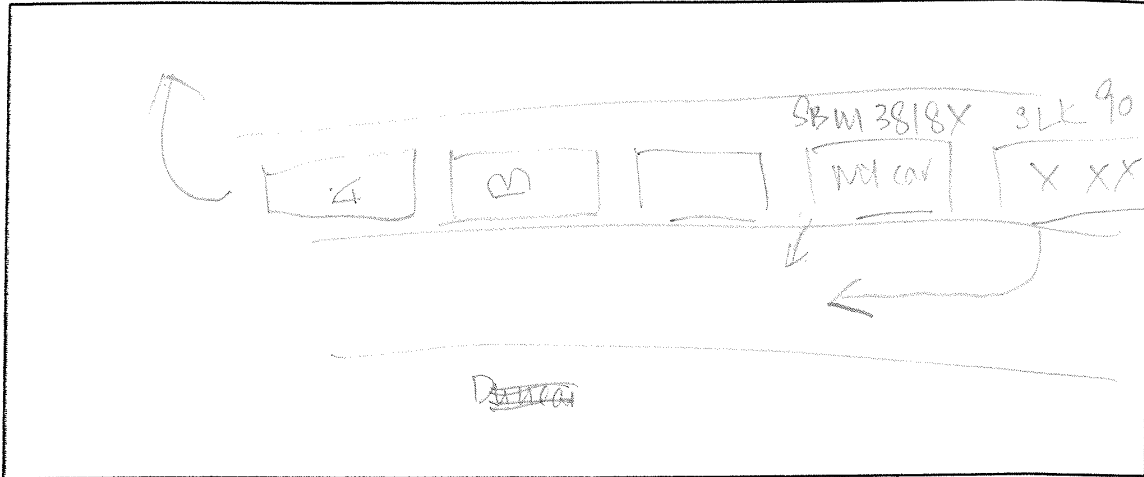
I am lodging this report to claim against the other party for the damages to my vehicle.



Heng Kwee Tze.
S 7112886/E

13/6/18.

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

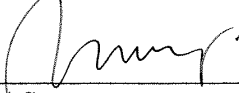
Peter to Sketch / Statement.


OWN DAMAGE () 3RD PARTY CLAIM () REPORTING ONLY () OWN WORKSHOP ()

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:


CHARN'S CUSTOMCRAFT
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

TAN HAN POH
 24 BURGUNDY DRIVE
 BURGUNDY HILL
 SINGAPORE 658827

Renewal

date
 20/11/2017

your servicing distributor
 INXPURE SOLUTIONS / 04242

your servicing distributor contact
 6295 6108

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name	TAN HAN POH	Policy number	VA1 / GA079233
Cover	Comprehensive	FIN / NRIC	S1339898D
Period of Insurance	from 07/12/2017 to 06/12/2018 (both dates inclusive)		

Premium breakdown

Gross Premium after 40% NCD	SGD 1,303.17
Total Discounts	- SGD 69.47
7% GST	SGD 86.36
Final Premium	SGD 1,320.06

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

- Personal accident benefit of up to \$ 50,000.00 for you and your named drivers
- Personal accident benefit of up to \$20,000 per passenger

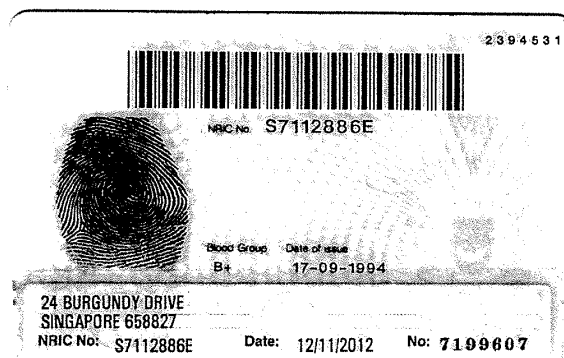
Vehicle details

Make & Model of Vehicle	TOYOTA ESTIMA 2.4	Year of manufacture	2015
Vehicle registration number	SBM3818X	Type of Use	Private use
Body type	MPV	Engine capacity (c.c.)	2362
Seating capacity (excl driver)	0	Engine number	2AZJ151785
Off-Peak car	No	Chassis number	ACR500191378

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	DBS BANK LTD

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

Basic Own Damage Excess	SGD 400.00
Windscreen Excess	SGD 100.00



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

