

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	11/06/2018 08:57
Date Of Accident	10/06/2018 15:50
Exact Location Of Accident	PIE TOWARDS TUAS AFTER WHITLEY RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ6913J
Insured/Policyholder	
Name Of Registered Owner	TAN CHIA YI
NRIC No	S8018476Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83836889
Alternative Phone No	OTHERS-NOPHONE

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
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	VA1/GA154236
Cover Note Number	

Driver

Name of Driver	LI SIU HUI
NRIC No	S8088283A
Date Of Birth	16/01/1980
Occupation	INDOOR
Date Of Driving Pass	24/10/2015
Driving Experience	2 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82857313
Fax Number	
Contact Number	
Email Address	LEOLISIUHUI@GMAIL.COM

Address	63 CHESTNUT AVENUE #02-12
Postcode	679523
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	CHAIN COLLISION
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

-

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	SGX459B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEO GUAT KHIM
NRIC/Passport Number	S0085180I
Contact Number	97989315
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLZ5183T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TABN YU SHU
NRIC/Passport Number	S9616670B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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. 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.
7. 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:

11 Jun 2018
9:05 am

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



**SINGAPORE
POLICE FORCE**



T/20180610/7005

1 of 4

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20180610/7005

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/06/2018 20:31	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: LI SIU HUI			Address: 63 CHESTNUT AVENUE #02-12 SINGAPORE 679523		
ID Type / ID No.: NRIC NO / S8088283A			Contact No.: Home/Office: Mobile: 82857313		
Nationality: HONG KONG			Email: leolisiuhui@gmail.com		
Sex: Male	Age: 38	Date of Birth: 16/01/1980	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: OTHERS - PROJECT MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/06/2018 15:50	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY PIE towards TUAS, after Whitley Road Exit				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Policeman Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGX459B	Car	TOYOTA		Silver	Seriously Damaged	2
SKZ6913J	Car	MAZDA	MAZDA 3	White	Seriously Damaged	1
SLZ5183T	Car	SUBARU		Brown	Slightly Damaged	4

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
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T/20180610/7005

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180610/7005

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKZ6913J	AXA INSURANCE SINGAPORE PTE LTD	VA1 / GA154236	29/01/2018	28/01/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TEO GUAT KHIM		ID No.	S0085180I
Related Vehicle	SGX459B (Car)		Contact No.	97989315
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	LI SIU HUI		ID No.	S8088283A
Related Vehicle	SKZ6913J (Car)		Contact No.	82857313
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Vehicle Owner				
Name	TAN BOON PIN		ID No.	S1462634D
Related Vehicle	SLZ5183T (Car)		Contact No.	91834438
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL



**SINGAPORE
POLICE FORCE**



T/20180610/7005

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180610/7005

CONTINUATION OF REPORT

Driver			
Name	TAN YU SHU		ID No. S9616670B
Related Vehicle	SLZ5183T (Car)		Contact No. 91834438
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date, time and location. I was driving along the PIE towards TUAS direction, after the Whitley Road Exit, on the third lane from the left.

Traffic at the time was moderate and traffic was not fast. My car stopped due to cars in front was stopped, and I felt a sudden impact, my body moved forward and my car moved forward colliding into SLZ5183T. We then exit our vehicles and exchanged particulars. The front car were slightly damaged, but my car and back car were damaged quite bad. The car behind me, SGX459B, did not inform me why the collision happened.



**SINGAPORE
POLICE FORCE**

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T/20180610/7005

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Report No. T/20180610/7005

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 10/06/2018 20:31
Officer In Charge Of Case: TP / TPHQ / YAN MINGSHENG DANIEL Contact No.: 65476252	Classification Of Case:

Authentication Stamp
NP168



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 CHIA YI
 63 CHESTNUT AVENUE
 #02-12
 SINGAPORE 679523

Renewal

date
 29/01/2018

your servicing distributor
 HSBC BANK (SINGAPORE) / 05583

your servicing distributor contact
 6880 4070

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name	TAN CHIA YI	Policy number	VA1 / GA154236
Cover	Comprehensive	FIN / NRIC	S8018476Z
Period of Insurance	from 29/01/2018 to 28/01/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 20% NCD	SGD 1,624.71
Total Discounts	- SGD 172.63
7% GST	SGD 101.65
Final Premium	SGD 1,553.73

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	MAZDA 3 1.5 SALOON	Year of manufacture	2015
Vehicle registration number	SKZ6913J	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	1496
Seating capacity (excl driver)	4	Engine number	P520336446
Off-Peak car	No	Chassis number	JM6BM42A8G0328017

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	UNITED OVERSEAS BANK LIMITED

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

Basic Own Damage Excess	SGD 800.00
Windscreen Excess	SGD 100.00

Drivers details

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,

1 of 2

VA1 / GA154236

Driver type	Driver name	Date of birth	Driving experience
Main Driver	TAN CHIA YI	08/06/1980	10 year(s)
Additional Driver	LI SIU HUI	16/01/1980	3 year(s)

Additional clauses & endorsements to your policy

Nil

What you should do

- Keep this Policy Schedule as record of insurance cover for your vehicle
- This Schedule should be read in conjunction with the Terms and Conditions of the Policy Wording

AXA Insurance Pte Ltd

This is an auto-generated document and hence no signature is required

Driving License

REPUBLIC OF SINGAPORE DRIVERS LICENSE

License Number: **S8088283A**

Name: **LI SIU HUI**

Birth Date: **16 Jan 1960**

Issue Date: **01 Aug 2017**

Barcode: **S8088283A**

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8088283A**

Name: **LI SIU HUI**

Chinese Name: **李 小 燕**

Gender: **CHINESE**

Date of Birth: **16-01-1960**

Country of Birth: **CHINA**

Issue Date: **01 Aug 2017**

Barcode: **S8088283A**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

- Class 3** Motor cars with a gross weight up to 3,500kg with up to 4 seats and a maximum speed of 180km/h. Valid until 31 Dec 2018.



Barcode: **S8088283A**

Issue Date: **01 Aug 2017**

Valid Until: **31 Dec 2018**

Address: **61 CHESTNUT AVENUE
UNIT - 12
SINGAPORE 672523**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : mmov18075153 Vehicle Registration No: SKZ 69137
Name(as shown in NRIC) : Jan Chia Yi NRIC/FIN/Passport No : 080184762
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 83836889
Email Address : _____
Date of Accident : 10/06/18 Time of Accident : 15:50
Place of Accident : PIE towards Tuas after Whitley Road Exit.
Insurance Company: AXA

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

- upload video footage.
- scene photos.

Policyholder / Driver's Signature
Date:

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

