

## 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	27/06/2018 17:45
Date Of Accident	27/06/2018 13:45
Exact Location Of Accident	CROSS JUNCTION-JLN KEMBAGAN /CHANGI RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH7222E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WU JUNJIE
NRIC No	S8716911A
Email Address	CHRISTCOOL41@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92367510
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT 1.5
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	GA239199
Cover Note Number	

### Driver

Name of Driver	WU JUNJIE
NRIC No	S8716911A
Date Of Birth	24/05/1987
Occupation	OUTDOOR
Date Of Driving Pass	02/06/2009
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92367510
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	CHRISTCOOL41@HOTMAIL.COM

Address	APT BLK 463B SEMBAWANG DRIVE, #18-387
Postcode	752463
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 - MAJOR/MINOR RD
Weather Conditions	DRIZZLE
Road Surface	WET

#### 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)	4
Passenger 1	NAME: : WENDY CHENG GENDER: : FEMALE
Passenger 2	NAME: : HAZEL TAN GENDER: : FEMALE
Passenger 3	NAME: : LIM MARY 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 SKETCH PLAN

#### 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	SHB1305J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	HIRAMAT KHAN S/O MOKLIS KHAN
NRIC/Passport Number	S1357320D
Contact Number	94575651

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**SKETCH PLAN**

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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.

AccA  
Vehicle:- SGH 7222E

Policyholder's Signature

Date & Time:

29/6/2018, 3.40pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

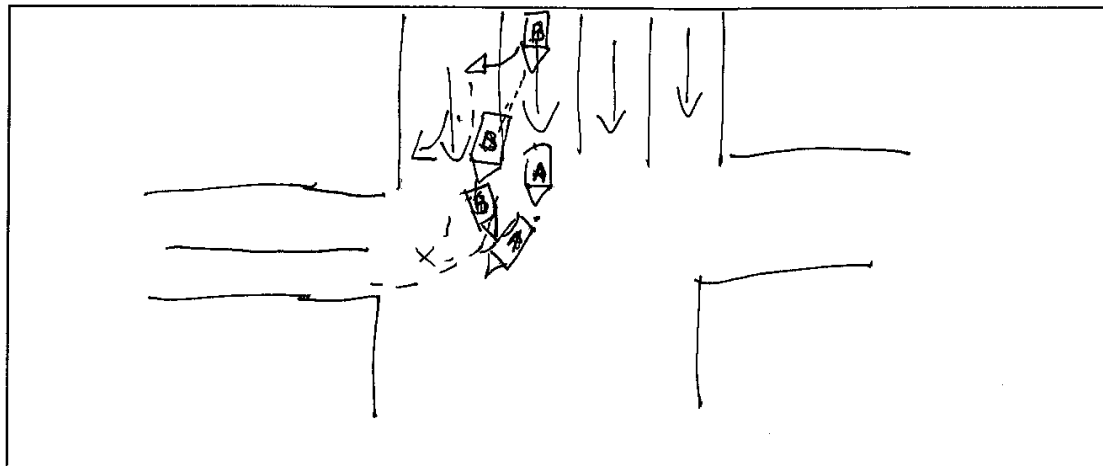
Name:

NRIC/FIN No.:

Thay,  
27/06/18

# Sketch Plan Pg. 2

Date of accident: 27/6/2018 Time: 1.45pm Location: (cross Junction along Jalan Kembangan and Changi Road)  
 My Vehicle A: SGH 7222E Vehicle B: SHB1305J Vehicle C: \_\_\_\_\_  
 SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Before the accident occurred, I was at the going straight lane. Before I filter to the right turning lane, I checked the blind spot and after confirming no car approaching, I attempted to make a right turn. The taxi ~~then~~ suddenly dashed out and hit my vehicle. Believed that he changed his lane same as me and step on his accelerator and increased his speed in the right turning and hit my car.

\* I turned on the right signal to indicate right turning.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address : christcool41@hotmail.com

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

## 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

WU JUNJIE  
 BLK 463B SEMBAWANG DRIVE  
 #18-387  
 SINGAPORE 752463

New business

date  
 05/07/2017

your servicing distributor  
 DICKSON AUTO AGENCY / 08028

your servicing distributor contact  
 63447667

## Policy Schedule

Your SmartDrive Comprehensive Essential

### Your policy snapshot

Policyholder name	WU JUNJIE	Policy number	VA1 / GA239199
Cover	Comprehensive	FIN / NRIC	S8716911A
Period of Insurance	from 01/07/2017 to 08/09/2018 (both dates inclusive)		

### Premium breakdown

Gross Premium after 0% NCD	SGD 1,425.36
7% GST	SGD 99.78
<b>Final Premium</b>	<b>SGD 1,525.14</b>

### Your benefits highlights

(refer to Policy Wording for full terms and conditions)

#### SmartDrive Comprehensive Essential 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
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

### Vehicle details

Make & Model of Vehicle	SUZUKI SWIFT 1.5	Year of manufacture	2006
Vehicle registration number	SGH7222E	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	1490
Seating capacity (excl driver)	4	Engine number	M15A1134039
Off-Peak car	No	Chassis number	JSAE2C21S00151244

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	HONG LEONG FINANCE LIMITED

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

Basic Own Damage Excess	SGD 600.00
Windscreen Excess	SGD 100.00

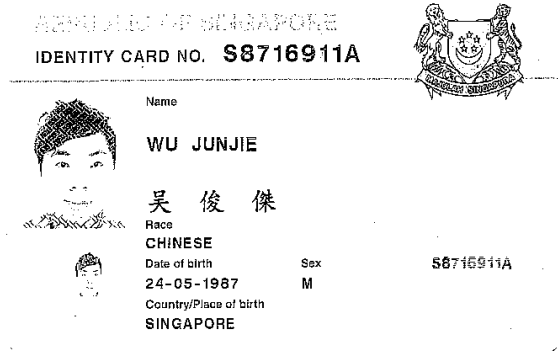
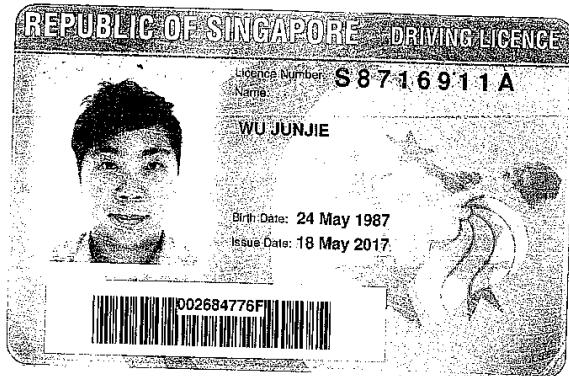
### Drivers details

Driver type	Driver name	Date of birth	Driving experience
Main Driver	WU JUNJIE	24/05/1987	9 year(s)

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

1 of 2

Policy Holder-Driver's Particulars & Briefings Pg. 2



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

Class 3 Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg

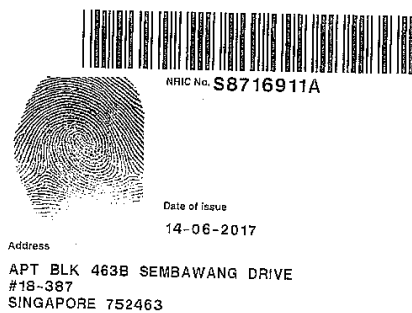
EFFECTIVE DATE

02 Jun 2009

NP 428A



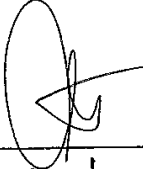
Licence No: S8716911A



To Whom It May Concern,


Accident involving my vehicle no SGH 7222 E on 27/06/18 (date) with  
SHB 13055 (other veh no) along Cross Junct - Jln Kembangan / Changi Rd

I, Wu Junjie NRIC No: S8716911A  
owner of vehicle no - SGH 7222 E am aware of the accident of my vehicle on  
\_\_\_\_\_ (Date) while car was driven by \_\_\_\_\_  
IC No: \_\_\_\_\_. I hereby authorise him/her to make the report.

  
Name Wu Junjie / S8716911A  
Date: 27/06/2018

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.

  
Name Wu Junjie / S8716911A  
Date 27/06/2018



Policy Holder-Driver's Particulars & Briefings Pg. 4



redefining / insurance

Date: 27/06/2018

To: Owner of Vehicle Number: SG11 7222E

The following has been advised to you via your workshop, An Lim Motor Co through their staff, Ma Li.

Please tick the applicable box if you had been advice 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 \_\_\_\_\_

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

Ma Li 27/06/2018

Name and signature of workshop personnel including company stamp

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





Accident Photo



Accident Photo





Accident Photo



Accident Photo



scene





scene



scene





scene



scene



scene

