

## 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	02/07/2018 13:01
Date Of Accident	01/07/2018 21:10
Exact Location Of Accident	TRAFFIC JUNCTION OF SIMS WAY & GEYLAND RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU6026J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO TET
NRIC No	S1303608Z
Email Address	MATTHEWHT195@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90229297
Alternative Phone No	OFFICE-90229297

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 (A)
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?	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	VPA/P2040014
Cover Note Number	

### Driver

Name of Driver	HO TET
NRIC No	S1303608Z
Date Of Birth	10/08/1957
Occupation	INDOOR
Date Of Driving Pass	30/01/1981
Driving Experience	37 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90229297
Fax Number	
Contact Number	OFFICE-90229297
Email Address	MATTHEWHT195@GMAIL.COM

Address	BLK 972 HOUGANG STREET 91 #12-194
Postcode	
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)	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 ATTACH SKETCH PLAN AND PHOTO

#### 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	SLE3983A
Vehicle Make/Model/Colour	HONDA/RED
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YAP QIANG WEI DARREN
NRIC/Passport Number	S9236843B
Contact Number	83997622
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

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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: 2 July 2018  
1300 hours

Driver's Signature

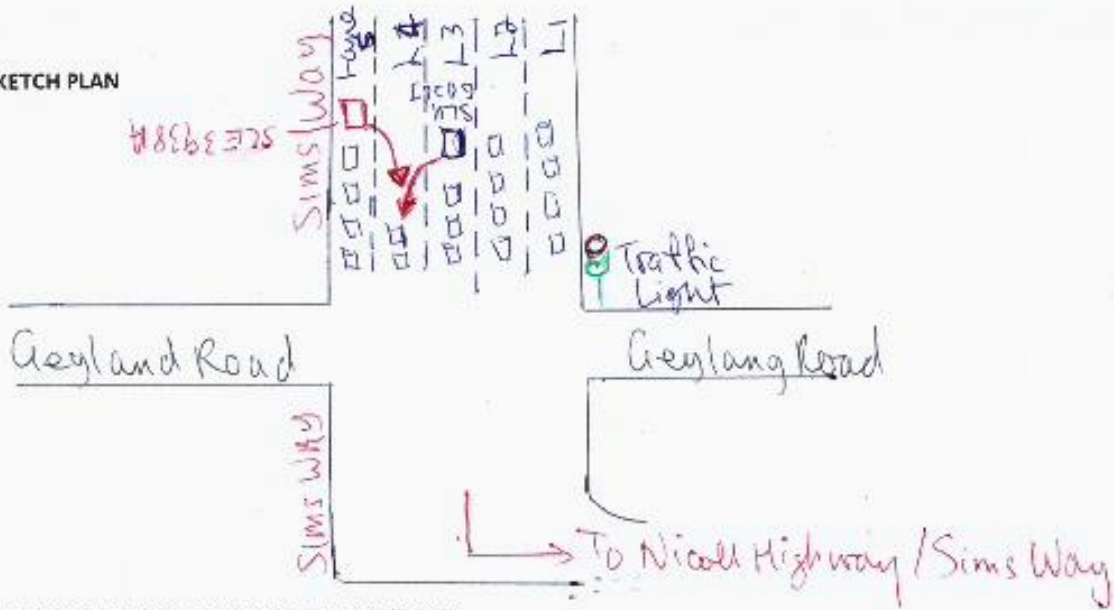
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:  
NRIC/FIN No.:

## Sketch Plan #2

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car SLU6026J was at the traffic junction of Sims Way and Geyland Road towards the traffic direction of Nicoll Highway, waiting for the traffic light to turn green. In front of my car were some cars and on my right lane was empty space. My car was on the 3rd lane of a 5 lane Sims Way. Upon noticing the empty space on my right which was the 4<sup>th</sup> lane, I decided to signal and turn right. Suddenly the Honda SE3983A sliced <sup>led</sup> into the 4<sup>th</sup> lane from the 5<sup>th</sup> lane and side swiped my right side rear door and right rear wheel as well as the right rear bumper. The Honda only sustained minor damage to its Front Left Bumper. The accident happened on 1st July 2018 at about 9:07 pm.

## DECLARATION

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

Policyholder's Signature

Date & Time: 02/07/2018  
1pm.

Driver's Signature

Date & Time:

Reporting Centre Personnel's Signature

Name: \_\_\_\_\_  
NRIC/FIN No. \_\_\_\_\_



### Sketch Plan #3

#### AXA INSURANCE PTE LTD

8 Shenton Way, #24-01  
AXA Tower, Singapore 088811  
Customer Service Centre #B1-01  
Tel:(65)63387268 Fax:(65)63382522  
Website:www.axa.com.sg  
GST Registration Number: 199903512M  
customer.service@axa.com.sg



#### CERTIFICATE OF INSURANCE

■ Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) ■ Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 ■ Road Transport Act, 1987 (Malaysia) ■ Motor Vehicles (Third-Party Risks) Rules, 1955 (Malaysia)

CERTIFICATE NO.	: VPA/P2040014	Account No. :	08260
Coverage	: Comprehensive		
Sum Insured	: Market Value At The Time Of Loss		
Name of Policy Holder	: HO TET		
Vehicle Registration No.	: SLU6026J		
Period of Insurance	: From 08/12/2017 To 07/12/2018 (Both Dates Inclusive)		

#### PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

- (a) The Policyholder  
The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner
- (b) Any other person who is driving on the Policyholder's order or with his permission  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

#### LIMITATIONS AS TO USE\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

(01)

An Additional Excess is applicable as follows:  
S\$500.00 for Unnamed Authorized Driver  
S\$2,500.00 for Undeclared Young and Inexperienced Driver.  
(Please refer to your policy on the terms & conditions)

\* Limitations rendered inoperative by Section 9 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

**N.B :**  
Your authorised workshop is Komoco Motors Pte Ltd.

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOVGBP on 15/12/2017

#### IMPORTANT :

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189).  
The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.

### Sketch Plan #4



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





**Accident Photo**



**Accident Photo**

