

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	30/07/2018 10:33
Date Of Accident	29/07/2018 18:15
Exact Location Of Accident	20 GHIM MOH ROAD CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM9841U
Insured/Policyholder	
Name Of Registered Owner	CHIANG SEE POH
NRIC No	S0043081A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96331425
Alternative Phone No	OFFICE-96331425

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-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/P1929871
Cover Note Number	

Driver

Name of Driver	CHIANG SEE POH
NRIC No	S0043081A
Date Of Birth	02/08/1947
Occupation	INDOOR
Date Of Driving Pass	18/11/2003
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96331425
Fax Number	
Contact Number	OFFICE-96331425
Email Address	NOEMAIL

Address	37 FABER WALK
Postcode	128969
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	3
Passenger 1	NAME: : HO HERN SHIN GENDER: : FEMALE
Passenger 2	NAME: : CHIANG PAK XIONG GENDER: : MALE

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 SKETCH PLAN.

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	SLU3332U
Vehicle Make/Model/Colour	BMW WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	REGAN HEE
NRIC/Passport Number	S8331894E
Contact Number	94596549
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGU8108C
Vehicle Make/Model/Colour BMW WHITE
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver SUN XIAO XIN
NRIC/Passport Number S8275858E
Contact Number 98006877
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

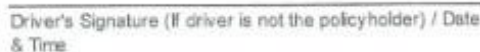
Accident Sketch Plan

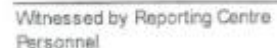
SKETCH PLAN

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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.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan



Common Statement

Describe Circumstances of the Accident

On 29/7/18, around 6.13pm I was coming out from my car plot, and I was on the way out of the car park (facing 20 Ghini Moh Road Food Market) on seeing a truck parked in front of my direction I moved to my right and I thought the car (SHU 3332H) was moving and so I went forward; my car surged forward and hit the back of the car and skidded to hit the other parked car (SHU 810PC)

Although shaken, I went to check the welfare of the people in SHU 3332H and confirmed that there were no other passengers except the driver Mr Regan Lee and he confirmed he was not hurt.

As the other was a parked car, there was no sight of the driver. So I left a note on the SHU 810PC window screen giving my particulars and contact. I got the Curian teller to call for the owner of SHU 810PC but no response.

Although it has stopped raining, the road was wet and it was slightly overcast.

Declaration

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



Witnessed by Reporting Centre Personnel

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel:(65)63387288 Fax:(65)63382522
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.service@axa.com.sg



DUPLICATE COPY FOR
 FINANCE / BANK

Private Cars COMP
 POLICY SCHEDULE
 NEW BUSINESS
 Duplicate

POLICY INFORMATION		Policy No. : VPA/P1929871	
Source	: (01) 14885 BMS-AXA TOYOTA NB		
Insured	: CHIANG SEE POH		
Address	: 37 FABER WALK FABER HILLS SINGAPORE 128969		
Business/Profession	: OTHER OCCUPATION Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.		
Period of Insurance : From 19/04/2017 To 18/04/2019 (Both Dates Inclusive)			
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			
PREMIUM			
Premium After 30.00% : SGD 1,101.23			
NCD			
Extra Coverage	: SGD 267.00		
GST 7.00%	: SGD 95.77		
Annual Premium	: SGD 1,464.00		
Total Payable	: SGD 2,928.02		
RISK DETAILS THE MOTOR VEHICLE			
Type Of Cover	: Comprehensive		
Regn No.	: SLM9841U		
Type Of Use	: Private Car		
Make/Model	: TOYOTA ALTIS 1.6		
Year of Manufacture	: 2017	Seating Capacity (excl. Driver)	: 05
Body Type	: SALOON	Engine C.C.	: 1598
Engine No.	: 1ZRX587190	Chassis No.	: MR053REH104555026
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)		
Limitations as to Use : As specified in Certificate of Insurance			
Hire Purchase	: DBS BANK LTD		
<u>Extra Coverage(Premium Breakdown)</u>		<u>Limits (SGD)</u>	<u>Premium (SGD)</u>
No Claim Discount Protection			267.00
Basic Own Damage Excess		: SGD 500.00	
<u>Named Drivers</u>			
1 CHIANG SEE POH			
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS			
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:			
Sales Agent ID : BSTL043			

Nric And Driving Licence

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0043081A



Name
CHIANG SEE POH
張齊波

Race
CHINESE

Date of birth
02-08-1947

Country/Place of birth
SINGAPORE

Sex
M

50043081A

REPUBLIC OF SINGAPORE DRIVING LICENCE



Name
CHIANG SEE POH

Birth Date: 02 Aug 1947

Issue Date: 01 Sep 2003

000788641D

5776001



NRIC No S0043081A



Date of issue
12-07-2017

Address
37 FABER WALK
SINGAPORE 120969

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
is No.

NP 428A

000788641A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Scene Photo



Accident Scene Photo



Accident Scene Photo

