## 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.				
	ACCIDENT STATEMENT			
Date Of Report	10/08/2018 15:21			
Date Of Accident	07/08/2018 18:15			
Exact Location Of Accident	SENGKANG EAST ROAD			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SKE3003R			
Insured/Policyholder				
Name Of Registered Owner	TOH SOCK HUI			
NRIC No	S8010190B			
Email Address	NOEMAIL			
Mobile Phone No	(LOCAL) +65-93213004			
Alternative Phone No	OFFICE-93213004			
Vehicle Particulars				
Manufacturer	VOLKSWAGEN			
Model	JETTA			
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	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	GA065535			
Cover Note Number				

## Driver

Name of Driver TOH SOCK HUI
NRIC No S8010190B
Date Of Birth 30/03/1980
Occupation INDOOR
Date Of Driving Pass 30/07/1999

Driving Experience 19 YEARS AND 0 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-93213004

Fax Number

Contact Number OFFICE-93213004

EMail Address NOEMAIL

**BLK 257 TAMPINES STREET 21 #08-212** Address

Postcode 520257

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 - HEAD TO REAR** 

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 YES

NO

2

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

: ANDRE LEE JIONG CHENG NAME:

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**

BOTH VEHICLES ARE STATIONARY WHEN MY VEHICLE ROLLED FORWARD AND TOUCHES SLIGHTLY INTO VEHICLE B REAR PORTION.

## 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 SKA3326E

Vehicle Make/Model/Colour

**Details Of Properties VEHICLE B** Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

#### SKETCH PLAN

## **IMPORTANT NOTICE**

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- 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:

10/8/2018

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

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

# Sketch Plan #2 Pg. 1

SKETCH PLAN		
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	-	-
DECLARATION		
I/We declare the foregoing particulars	are true in every respect.	
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(if driver is not the policyholder)  Date & Time:	Name: NRIC/FIN No.:

Date & Time:

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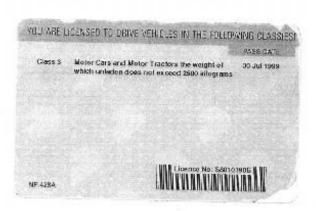
# Sketch Plan #3 Pg. 1

# LETTER OF UNDERTAKING

I/We, Toff Sock	+(U(	the owner of vehicle r	10. <u>RE3003</u> K			
My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.						
My/Our Third Party claim	is handle by my/or	ur preferred workshop,				
Signed and Acknowledge I	oy:					
Soll -			10/08/2018			
Nric no. and signature of p	olicyholder	Company Stamp	Date			

# **Driving License**





## **INSURANCE**



AXA Insurance Pte Ltd. 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6980 4740 🖂 custemer,care 8axa,com.sg Aww.axa.com.sg

Renewal

date 02/10/2017

your servicing distributor WATERBANK AGENCIES / 04049

your servicing distributor contact. 93853768

TOH SOCK HUI ILR 257 JAMPINES STREET 21 #05-212 SINGAPORE 520257

**Policy Schedule** 

Your SmartDrive Comprehensive Private APW

## Your policy snapshot

Policyholder name

TOH SOCK HU!

VA1 / GA065535

Cover

Comprehensive

FIN / NRIC

\$8010190B

Period of Insurance

from 19/10/2017 to 18/10/2018 (both dates: natusive)

## Premium breakdown

Gross Promium after 50% NCD

SGD 874.47) - SGD 46.63 SGD 57,951

Total Discounts 7% GST

SGD 885.79

**Final Premium** 

(refer to Policy Wording for full terms and conditions)

## SmartDrive Comprehensive Private, APW Benefits

Your benefits highlights

- 2477 Joving & Transportation in Singapore of Overseas
- Quaranteed Repairs for twolve (12) Months
- Loss or Damago .
- Legal Liability
- Loss of Personal Effects in Singapore up to \$3,000.
- Daily Transport Allowance of \$50 for a maximum of five (5) they a
- Personal accident benefit of up to \$30,000 for you or your named drivers while driving .
- Medical and dental exponses up to \$500 per person for either you as the driver or your authorised driver and a passanger
- Basic Own Damago Exposa Koduction for AXA Premium Workshop
- Windsproon Replacement with Excess OR Repair your windspream of your preferred location and get \$50 cash reward with no excess

## Vehicle details

Make & Model of Vehicle Vehicle registration number

Body type Secting capacity (excl driver) SKE3003R

SALDON 4

YOLKSWAGEN JETTA 1.4 TSI SPORTS Year of manufacture Type of Use Engine capacity (c.c.)

2011 Private use 1390 CAV288005

Off-Peak car

10

Engine number

WWWZZZ16ZBM106301.

Insured's Estimated Market Value Limitation to use

Finance Loan Company

Market Value at the time of Loss (including scosssories and spare parts)

As per Cartificate of Insurance

Excess applicable (color to Policy Wording for rather applicable Excesses)

Basic Own Damage Excess

900 0.00

1 of 2

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #81-01

## **Accident Photo**



# **Accident Photo**









