

## 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	01/08/2018 10:00
Date Of Accident	31/07/2018 16:00
Exact Location Of Accident	CHOA CHU KANG AREA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDJ7000D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHEW AH GUAN
NRIC No	S1671820C
Email Address	AGCHEW@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97623233
Alternative Phone No	OFFICE-97623233

### Vehicle Particulars

Manufacturer	LEXUS
Model	ES250-2.5 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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/P1954944
Cover Note Number	

### Driver

Name of Driver	CHEW AH GUAN
NRIC No	S1671820C
Date Of Birth	27/02/1964
Occupation	INDOOR
Date Of Driving Pass	28/04/1988
Driving Experience	30 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97623233
Fax Number	
Contact Number	OFFICE-97623233
Email Address	AGCHEW@YAHOO.COM

Address	BLK 436 CHOA CHU KANG AVE 4 #12-497
Postcode	680436
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
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	CHOA CHU KANG NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 116 TECK WHYE LANE , <b>POSTCODE:</b> 680116 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7629999 - <b>FAX NO:</b> 67636615
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER AS ATTACHED

#### 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	FP8522C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	NANDA
NRIC/Passport Number	
Contact Number	88165575
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	RHS PORTION

No. Of Passenger (Including Driver)

## Accident Sketch Plan

### SKETCH PLAN

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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 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.
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' law firms/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' law firms/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

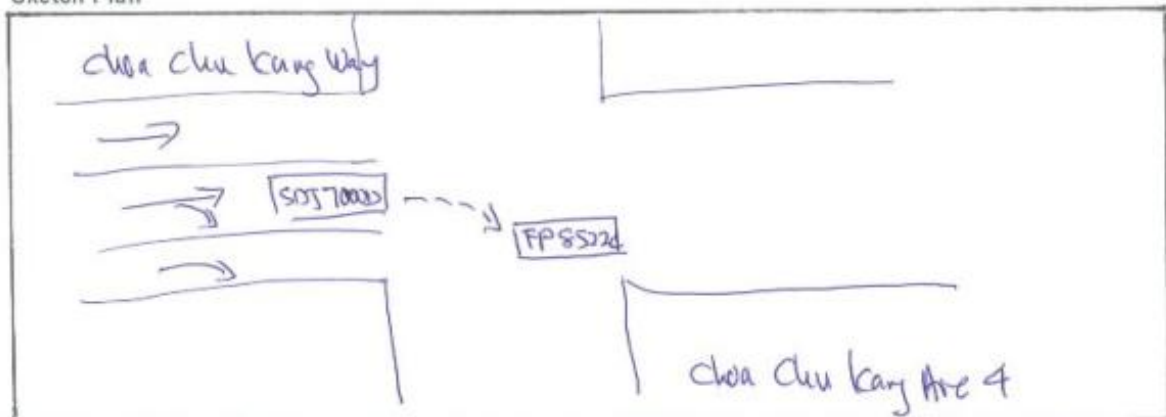
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel

#### Sketch Plan



### Accident Sketch Plan

## Describe Circumstances of the Accident

Refer to police report  
also

### 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

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180731/2115

Police Station Of Origin:  
Choa Chu Kang NPP  
116 Teck Whye Lane #01-740 SINGAPORE  
680116  
Tel No: 1800-7629999

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Report No. T/20180731/2115

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/07/2018 17:24	Vide Report No.: J/20180731/0124	Station Diary No.: 73
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### Informant's Particulars

Name of Informant: CHEW AH GUAN			Address: APT BLK 436 CHOA CHU KANG AVENUE 4 #12-497 SINGAPORE 680436	
ID Type / ID No.: NRIC NO / S1671820C			Contact No.: Home/Office: Mobile: 97623233	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 54	Date of Birth: 27/02/1964	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: 3,4,5 Date of Expiry:	

### General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 31/07/2018 16:00	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 CHOA CHU KANG WAY CHOA CHU KANG AVENUE 4				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FP8522C	Motorcycle				Slightly Damaged	0
SDJ7000D	Car	TOYOTA	LEXUS ES250 LUXURY A/T S/R	Silver	Slightly Damaged	0

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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## Police Report



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Choa Chu Kang NPP  
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680116  
Tel No: 1800-7629999

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Report No. T/20180731/2115

CONTINUATION OF REPORT



## Police Report

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



### 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, 1959 (Malaysia)

CERTIFICATE NO. : VPA/P1954944 Account No. : 14888  
Coverage : Comprehensive (SmartDrive Lexus Prestige)  
Sum Insured : Market Value At The Time Of Loss  
Name of Policy Holder : CHEW AH GUAN  
Vehicle Registration No. : SDJ7000D  
Period of Insurance : From 29/09/2017 To 28/09/2019 (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)

Basic Own Damage Excess : SGD 700.00

An Additional Excess is applicable as follows:

S\$2,500.00 for Young or Inexperienced Driver.

Young or Inexperienced Driver is defined as any driver whom is aged below 23 years old and/or less than one year of driving experience.

(Please refer to your policy on the terms & conditions)\* Limitations rendered inoperative by Section 8 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).

AXA INSURANCE PTE LTD

Issued by - SGOAGPH on 21/07/2017

IMPORTANT :

  
Authorized Signature

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.



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1671820C



Name  
CHEW AH GUAN

Race  
CHINESE

Date of birth  
27-02-1964

Sex  
M

Country of birth  
SINGAPORE

S-271820C

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S1671820C

Name: CHEW AH GUAN

Birth Date: 27 Feb 1964

Issue Date: 24 Mar 2003



000321717E

4734721



NRIC No. S1671820C



Date of issue  
31-05-2011

Address  
APT BLK 436 CHOA CHU KANG AVENUE 4  
#12-497  
SINGAPORE 680436

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

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	26 Apr 1998
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	17 Sep 1990
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	23 Oct 1990

AP 426A

License No. S1671820C



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680116  
Tel No: 1800-7629999

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Report No. T/20180731/2115

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J / Staff Sgt MUHAMMAD HASIF BIN KAMARI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 31/07/2018 17:24
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476365	Classification Of Case:

Authentication Stamp  
NP168

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680116  
Tel No: 1800-7629999

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Report No. T/20180731/2115

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDJ7000D	AXA INSURANCE SINGAPORE PTE LTD	P1954944	29/09/2017	28/09/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	NANDA	ID No.	NIL
Related Vehicle	FP8522C (Motorcycle)	Contact No.	88165575
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	CHEW AH GUAN	ID No.	S1671820C
Related Vehicle	SDJ7000D (Car)	Contact No.	97623233
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4,5 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 and time, I was at the Junction of Choa Chu Kang Way (towards Bukit Batok Road) and Choa Chu Kang Avenue 4. I wanted to make a right turn from Choa Chu Kang Way to Choa Chu Kang Avenue 4. There was one motorcycle in front of my vehicle. On the opposite road, there was one bus also wanted to make a right turn from Choa Chu Kang Way (towards Sungei Kadut), towards Choa Chu Kang Avenue 4. As such, the bus was blocking my view of the incoming traffic. As the motorcycle in front of mine made a right turn, I also proceed to make a right turn. The traffic light was green at that point of time. Upon make the turn, I observed that there was one motorcycle from the incoming traffic, approaching me. The rider tried to evade my vehicle however our vehicles collided. The rider fell. I then stopped my vehicle and assisted the rider and call for Ambulance. Ambulance came and conveyed the rider to Ng Teng Fong Hospital. Traffic Police was also at the accident site.



Accident Photo



Accident Photo



**Accident Photo**





Accident Photo





Accident Photo



Accident Photo



Accident Photo

