

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	17/09/2018 15:11
Date Of Accident	13/09/2018 22:00
Exact Location Of Accident	BLK 223 YISHUN ST 21 OSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW5509M
Insured/Policyholder	
Name Of Registered Owner	TAN SIEW HOON PAULINE
NRIC No	S7424370C
Email Address	PAULINETAN@STAFFINGNETWK.COM
Mobile Phone No	(LOCAL) +65-97651987
Alternative Phone No	OTHERS-96999665

Vehicle Particulars

Manufacturer	HONDA
Model	S2000-2.2 (A)
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA257513
Cover Note Number	23/07/2018 - 22/07/2019

Driver

Name of Driver	ON SHAW MING
NRIC No	S7714070J
Date Of Birth	07/05/1977
Occupation	INDOOR
Date Of Driving Pass	05/01/2004
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96999665
Fax Number	
Contact Number	OTHERS-97651987
Email Address	ONFERRE@GMAIL.COM

Address	BLK 223 YISHUN ST 21 #09-475
Postcode	760223
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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 THE SKETCH PLAN BY DRIVER

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	SFF8583D
Vehicle Make/Model/Colour	
Details Of Properties	
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

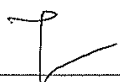
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8. **Consent under the Personal Data Protection Act (PDPA)**


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:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 15/09/18

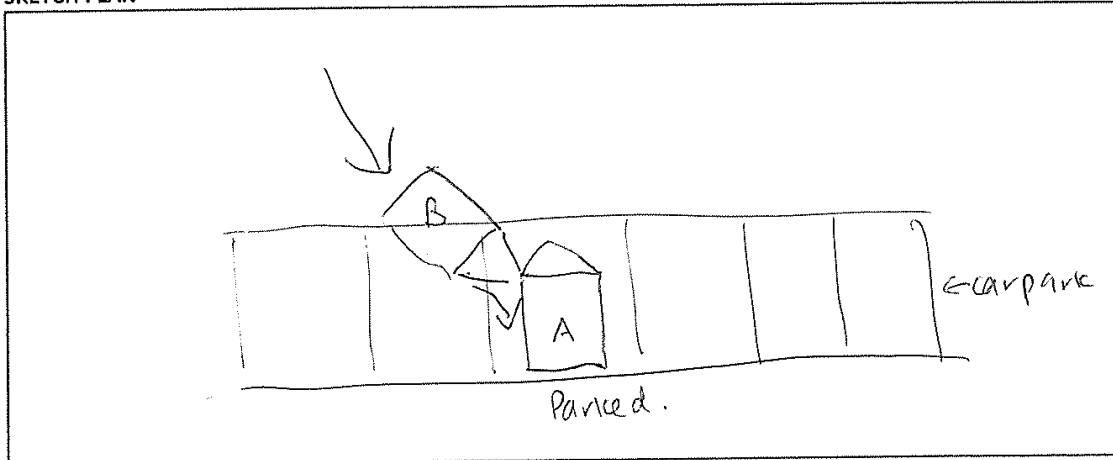
~~18/09~~ 1042


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

Sketch Plan Pg. 2

Date of accident: 130918 Time: 2200hrs Location: Blk 223 Yishun St 21 OSCP
 My Vehicle A: SGW 5509 M Vehicle B: SFF 8583 D Vehicle C: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

which was
On 130918 at about 2200hrs, my car is parked at Yishun St 21 carpark, just next to Blk 223 got hit by another car, vehicle B.
i was not inside the car, vehicle A.
On 140918 in the morning when i got into my car, i realized there was damage and my in car camera prompted me of an accident. i also found a note on my windscreen stating that the driver had accidentally hit my car and would like to request for private mutual settlement.
i called AXA to report and subsequently went to the authorized workshop Ah Lim Motors to provide details.

☒ 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 : Orferie@gmail.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: 15/09/18
10001042

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



AH LIM MOTOR COMPANY



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

TAN SIEW HOON PAULINE
 1 ESSEX ROAD
 #19-04 THE STRATA
 SINGAPORE 309329

Renewal

date
21/07/2018

your servicing distributor
INTRADE AGENCY AND SERVICES /
04279

your servicing distributor contact
62551404

Policy Schedule

Your SmartDrive Comprehensive For Her

Your policy snapshot

Policyholder name	TAN SIEW HOON PAULINE	Policy number	VA1 / GA257513
Cover	Comprehensive	FIN / NRIC	S7424370C
Period of Insurance	from 23/07/2018 to 22/07/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,096.47
Total Discounts	- SGD 58.45
7% GST	SGD 72.66
Final Premium	SGD 1,110.68

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive For Her 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
- Medical and dental expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Daily Transport Allowance of \$50 for a maximum of ten (10) days
- Basic Own Damage Excess Waiver from Third Year if you are accident-free during the first two (2) years.
- Phone assistance and roadside support
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

Add-on Benefits

- Personal accident benefit of up to \$ 50,000.00 for you and your named drivers
- Courtesy car Standard in Singapore up to ten (10) days
- No Claim Discount Protector

Vehicle details

Make & Model of Vehicle	HONDA S2000 2.2	Year of manufacture	2007
Vehicle registration number	SGW5509M	Type of Use	Private use
Body type	COUPE	Engine capacity (c.c.)	2156
Seating capacity (excl driver)	4	Engine number	F22C1001885
Off-Peak car	No	Chassis number	AP21001878

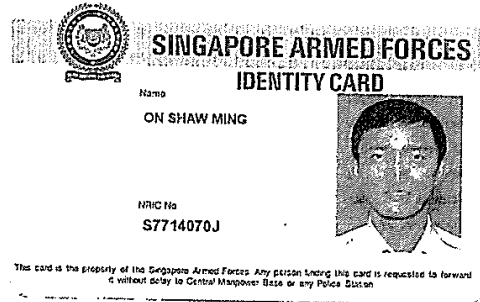
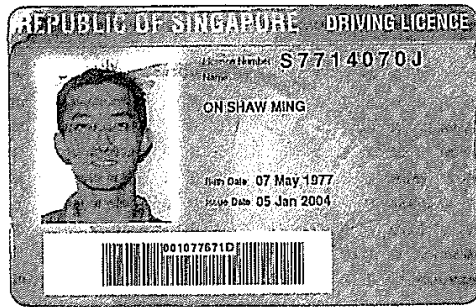
Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	Nil

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

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

Sketch Plan Pg. 4

Sketch Plan Pg. 7



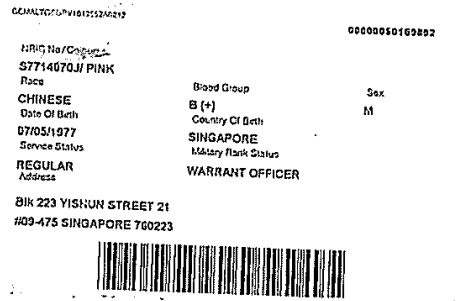
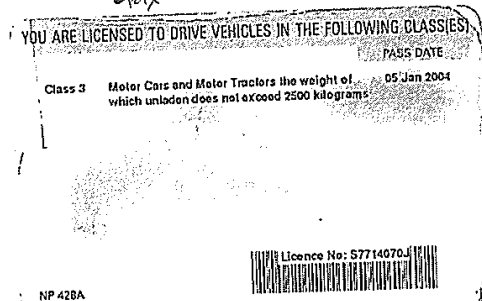
Car owner: Name: Pauline Tan Siew Hoon

NRIC: S7424370 C

Contact: 9765 1987

email: paulinetan@staffingnetwork.com

96999665
DLC Not drawing
YES camera
NO injury
OK



for ~~license~~ sketch
96999665

dear Sir,

I accidentally
bump into your car. So far
I see there is no dent
but scratches on your left
side front bumper. We would
like to settle privately.
Pls call my husband @
9889 9055. I'm very
sorry for the scratched.

To Whom It May Concern,

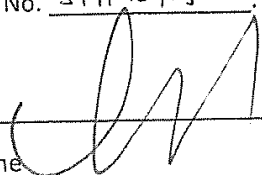
Accident involving my vehicle no. SGW5509M on 13/09/18 (date) with
SFFB503D (other vehicle no) along Blk 223 Yishun Ring Rd OSCP

I, Tan Sui Hoon Parli Nric No. S7424370 C

Owner of vehicle no. SGW5509M am aware of the accident of my vehicle on
13/09/18 (Date) while car was driven by on SGW Ming

Nric No. S7740705. I hereby, authorise him/her to make the report.

X


Name

Date:

To fill in if there is a OD claim

N.A

I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.

X


Name

Date:

Sketch Plan Pg. 7



redefining / insurance

Date: 17/2/18

To: Owner of Vehicle Number: SGW5541A

The following has been advised to you via your workshop, Ah Lim Motor Company through their staff, Zila / Eileen / Mui Hong.

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 Claim Travel Party

Signed and acknowledge by:

ON SHAW MINH
Name and signature of policyholder/authorised driver

u/p
Name and signature of workshop personnel including company stamp



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



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