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 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.

	ACCIDENT STATEMENT	
Date Of Report	24/09/2018 15:05	
Date Of Accident	22/09/2018 18:55	
Exact Location Of Accident	JCT OF TELOK BLANGAH RD TWDS BT. CHERMIN RD	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		

Vehicle Registration Number	SDV8886U
Insured/Policyholder	
Name Of Registered Owner	ONG GEOK LAN LANDY
NRIC No	S1754553A
Email Address	LANDY.PANCAKE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96818886
Alternative Phone No	OFFICE-96818886
Vehicle Particulars	

Vehicle Particu	lars
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MERCEDES-BENZ Manufacturer

Model C180

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

PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number GA056815/1

Cover Note Number

Driver

Name of Driver LIM CHIN TONG NRIC No S1651980D Date Of Birth 23/11/1964 Occupation INDOOR Date Of Driving Pass 29/12/1983

Driving Experience 34 YEARS AND 8 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-96818866

Fax Number

Contact Number

EMail Address NOEMAIL Address 16 ANG MO KIO CENTRAL 3 #12-25

Postcode 567748

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

NO

NO

2

NO

NO

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 2

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.

Number of Passengers (Including Driver)

Passenger 1

NAME: : ONG GEOK LAN, LANDY

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

ACCIDENT HAPPENED ON 22 SEP 2018 AT APPROXIMATELY 6.55PM ALONG TELOK BLANGAH ROAD AT THE YELLOW BOX WHILE WE WERE TURNING RIGHT INTO BT CHERMIN ROAD. IT IS A 4 LANE RD AND FRONT 3 LANES STOPPED TO LET US TURN RIGHT BUT THE TAXI ON THE FOURTH LANE WENT STRAIGHT AHEAD THUS WE KNOCKED ONTO THE RIGHT SIDE OF HIS CAR.

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 SHC5316X
Vehicle Make/Model/Colour TRANSCAB RED

Details Of Properties

Vehicle Category TAXI

Name of Driver MOHD KEMARUDIN BINWAHID

NRIC/Passport Number S2020506G

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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
- 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
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
 - (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")
- 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
- 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.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and
- 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 24.09.18 14:00PM

Driver's Signature

(If driver is not the policyholder)

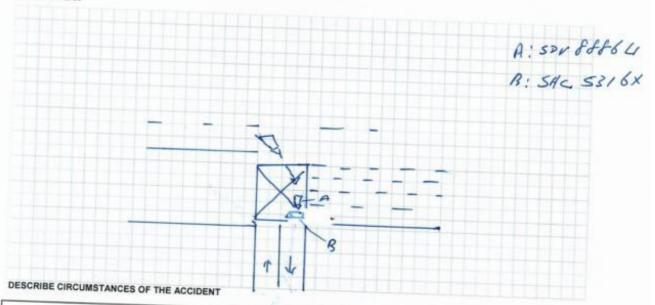
Date & Time 24.09.18 14:00PM

Reporting Centre Rerso

Name:

NRIC/FIN No.:





Accident happened on 22/9/18 at approx. 6.55 pm along Telde Telok Blangah road at the box while we were turning right into Bt Chermin Rat road. It is a 4 lane road and first 3 lanes stopped to let us turn right but the taxi on the fourth lane went straight ahead thus we knocked onto the right side of his vehicle.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's signature

Date & Time 24.09.18 14:00PM

Driver's Signature

(If driver is not the policyholder)

Date & Time 24.09.18 14:00PM

Reporting Centre Personnel's

Name:

NRIC/FIN No.:





Certificate number

Chassis number

Engine number

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

Certificate of Insurance

account number 0.4570

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 199) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960 -Road Transport Act. 1987 (Melaysia) - Motor Vehicles (Third-Party Risks) Rules. 1960 -Road Transport Act. 1987 (Melaysia)

Policy details

Policyholder name

Cover Plan name NCD applicable

Vehicle registration number Period of Insurance

Finance loan company

ONG GEOK LAN LANDY Comprehensive

Fledi+ 50%

SDV8886U

from 11/02/2018 to 10/02/2019 (both dates inclusive)

GA056815/1 WDD2050402R038594 27491030318343

Persons or classes of persons entitled to drive*

- (a) The Policyholder
- (b) Any Named Driver as stated in the Policy.
 - 1. LIM LIANG CHIN
- (c) Any person who is driving on the Policyholder's order or with their 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.

Limitation 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, speed testing, 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.

F 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.

EXCESS

Windscreen Excess

Not Applicable

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision 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

Authorised signature

Important note

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 Statutury Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no flability under the policy, renewal certificate.

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

1 of 3

Sketch Plan #4

























