

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 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	23/10/2017 15:07
Date Of Accident	21/10/2017 19:30
Exact Location Of Accident	UPPER SERANGOON TWDS POTONG PASIR RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ2668C
Insured/Policyholder	
Name Of Registered Owner	CHUN FONG LENG
NRIC No	S1503983C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91209123
Alternative Phone No	Office-91209123

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI
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	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	GA211202/1
Cover Note Number	

Driver

Name of Driver	CHUN FONG LENG
NRIC No	S1503983C
Date Of Birth	22/05/1961
Occupation	INDOOR
Date Of Driving Pass	09/02/1998
Driving Experience	19 YEARS AND 8 MONTHS
Gender	FEMALE

Mobile Number	(LOCAL) +65-91209123
Fax Number	
Contact Number	OFFICE-91209123
E-Mail Address	NOEMAIL
Address	BLK 850 HOUGANG CENTRAL #04-51
Postcode	530850
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 - U-TURN
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
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)	2

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

ON THE ABOVE MENTIONED DATE AND TIME, I WAS DRIVING ALONG UPPER SERANGOON ROAD TOWARDS POTONG PASIR ROAD ON THE RIGHT LANE OF 2 LANES ROAD. SOMEWHERE AFTER BARTLEY ROAD AT THE NON-SIGNALISED T-JUNCTION, VEHICLE B (SLG3434H) THAT WAS MAKING A U-TURN, FAILED TO GIVE WAY TO ONCOMING TRAFFIC. THUS, CAUSING THE FRONT PORTION OF VEHICLE B (SLG3434H) TO COLLIDE ONTO THE RIGHT PORTION OF MY 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	SLG3434H
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Name of Driver	ZELDA HE
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name PASSENGER

Approximate Age

Injuries Sustain

Injured person in which vehicle? SJQ2668C

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

Address

Postcode

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 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.

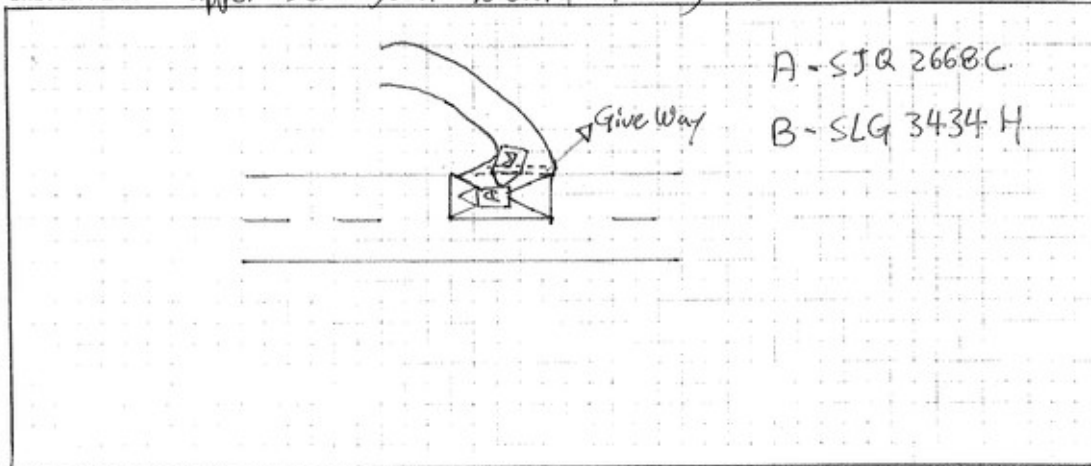

Policyholder's Signature
Date & Time:


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

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

SKETCH PLAN

Upper Seremban Toward Potong Pasir Road



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above date and time, I was driving along upper Seremban road toward potong pasir road on the right lane of a 2 lanes road. Somewhere after bantley road at the non-signalised T-junction, vehicle B (SLG 3434H) that was making a U turn, failed to give way to oncoming traffic, thus causing the front portion of vehicle B (SLG 3434H) to collided onto the right portion of my car.

A-SJQ 2668C

B-SLG 3434H

DECLARATION

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

Juoh
Policyholder's Signature
Date & Time:

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

23/10/17 p 10.35AM
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

LETTER OF UNDERTAKING

I/We, Chua Fang Leng, the owner of vehicle no. SSQ 2668C

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/our preferred workshop, Twin car Automotive Pte Ltd

Signed and Acknowledge by:

J. Oh
Nric no. and signature of policyholder

Company Stamp

23/10 2017
Date

0434751



NRIC No: **S1503983C**



Blood Group: **O+** Date of Issue: **20-07-1992**

APT BLK 850 HOUGANG CENTRAL #04-51
SINGAPORE 530850
NRIC No: **S1503983C** Date: **30/03/2010** No: **6519283**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(E

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

PASS DATE
09 Feb 1998



NP 428A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1503983C**



Name
CHUN FONG LENG

陳風鈴

Race
CHINESE

Date of Birth
22-05-1961

Sex
F

Country of Birth
SINGAPORE



S1503983C

REPUBLIC OF SINGAPORE DRIVING LICENCE

S1503983C



CHUN FONG LENG

Birth Date: **22 May 1961**

Issue Date: **14 Jan 2003**



000120129A



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

Certificate of Insurance

account number
 04066

-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)

Policy details

Policyholder name	CHUN FONG LENG	Certificate number	GA211202 / 1
Cover	Comprehensive	Chassis number	SJNFBAJ10U2392544
Plan name	Essential	Engine number	MR20096330W
NCD applicable	0%		
Vehicle registration number	SJQ2668C		
Period of Insurance	from 31/05/2017 to 30/05/2018 (both dates inclusive)		
Finance loan company	Nil		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) 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.

* 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.



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Accident Photo



Accident Photo



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