

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 liability.
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 | 30/10/2018 16:14 |
| Date Of Accident | 12/10/2018 15:10 |
| Exact Location Of Accident | EU TONG SEN ST (OUTSIDE THE MAJESTIC) |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------------|
| Vehicle Registration Number | SFT1411P |
| Insured/Policyholder | |
| Name Of Registered Owner | STEVE B C TIAN |
| NRIC No | S7009430D |
| Email Address | STEVE_TIAN_NL@YAHOO.CO.UK |
| Mobile Phone No | (LOCAL) +65-92356356 |
| Alternative Phone No | OTHERS-82600909 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | MERCEDES-BENZ |
| Model | E CLASS 250 |
| 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 | 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 | GA365986 |
| Cover Note Number | 16/06/2018 TO 15/06/2019 |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | RYAN TIAN |
| NRIC No | S9632428F |
| Date Of Birth | 15/09/1996 |
| Occupation | INDOOR |
| Date Of Driving Pass | 11/07/2018 |
| Driving Experience | 0 YEAR AND 3 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-82600909 |
| Fax Number | |
| Contact Number | OTHERS-92356356 |
| Email Address | RYAN_TIAN@YAHOO.CO.UK |

| | |
|---|-------------------------|
| Address | 5 LEEDON HEIGHTS #13-08 |
| Postcode | 267952 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | CHILDREN |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|----------------------------|
| Type Of Accident | COLLISION - MAJOR/MINOR RD |
| 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) | 3 |
| Passenger 1 | NAME: : JERALD TAN GENDER: : MALE |
| Passenger 2 | NAME: : DARREN CHEN ZHI JIE 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

REFER TO SKETCH PLAN

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 | SHD1663P |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | TAXI |
| Name of Driver | GOH AI PHENG |
| NRIC/Passport Number | S0113464G |
| Contact Number | 82991888 |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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 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:

30/10/2018

443048

Driver's Signature

(If driver is not the policyholder)

Date & Time: 30/10/2018

443048

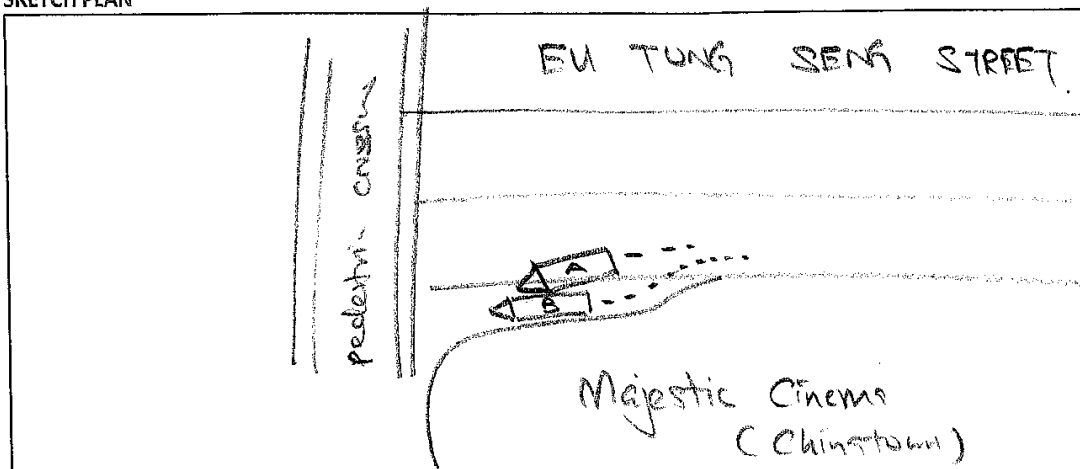
Reporting Centre Personel's Signature

Name:

NRIC/FIN No.: 30/10/18

Sketch Plan Pg. 2

Date of accident: 12/10/2018 Time: 15:10 Location: EU TUNG SENG STREET (OUTSIDE MAJESTIC)
 My Vehicle A: SFT 1411P Vehicle B: SHD 1663P Vehicle C: —
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1. The vehicles in front were stationary at the traffic light.
2. Wanted to change lane. Checked the side mirror and signalled left.
3. Started turning into the lane.
4. Saw the taxi outside the left window.
5. Stopped the car.
6. Front part of the taxi passed by, the taxi did not slow down.
7. As the mid-point of the taxi passed by there was contact.
8. The taxi stopped some distance away.

☐ 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: Steve-tian-n1@yahoo.co.uk

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.

Vehicle SFT 1411P

Policyholder's Signature

Date & Time:

3/10/2018

GARAGE Sketch Plan 1430 HK

Driver's Signature

(If driver is not the policyholder)

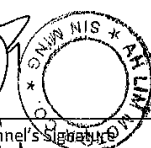
Date & Time: 30/10/2018

1430 HK

Reporting Centre 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

STEVE B C TAN
 5 LEEDON HEIGHTS
 #13-08
 SINGAPORE 267952

New business

date
14/06/2018

your servicing distributor
**DICKSON INSURANCE AGENCY PTE LTD /
 17120**

your servicing distributor contact
92991301

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

| | | | |
|----------------------------|--|----------------------|-----------------------|
| Policyholder name | STEVE B C TAN | Policy number | VA1 / GA365986 |
| Cover | Comprehensive | FIN / NRIC | S7009430D |
| Period of Insurance | from 16/06/2018 to 15/06/2019 (both dates inclusive) | | |

Premium breakdown

| | |
|----------------------------|---------------------|
| Gross Premium after 0% NCD | SGD 1,482.19 |
| 7% GST | SGD 103.75 |
| Final Premium | SGD 1,585.94 |

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential 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

Vehicle details

| | | | |
|---------------------------------------|----------------------|-------------------------------|-------------------|
| Make & Model of Vehicle | MERCEDES E250 | Year of manufacture | 2010 |
| Vehicle registration number | SFT1411P | Type of Use | Private use |
| Body type | SALOON | Engine capacity (c.c.) | 1796 |
| Seating capacity (excl driver) | 4 | Engine number | 27186030129437 |
| Off-Peak car | No | Chassis number | WDD2074472F083305 |

| | |
|---|--|
| 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)

| | |
|--------------------------------|------------|
| Basic Own Damage Excess | SGD 800.00 |
| Windscreen Excess | SGD 100.00 |

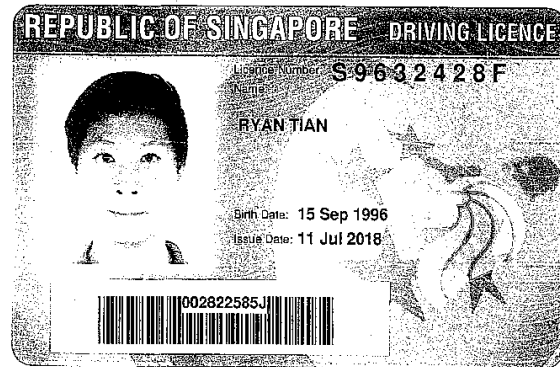
Drivers details

| | | | |
|--------------------|--------------------|----------------------|---------------------------|
| Driver type | Driver name | Date of birth | Driving experience |
| Main Driver | STEVE B C TAN | 13/03/1970 | 27 year(s) |

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

1 of 2

Driver of
Vehicle SFT 1411P



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

| | EFFECTIVE DATE |
|--|----------------|
| Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg | 11 Jul 2018 |

NP 428A



To Whom It May Concern,

Accident involving my vehicle no SFT 1411 P on 12/10/18 (date) with
SHP 1663 P (other veh no) along Eu Tong Sen St (Outside The Majestic)

I, Steve B C Tan NRIC No: S7009430 D
owner of vehicle no - SFT 1411 P am aware of the accident of my vehicle on
12/10/18 (Date) while car was driven by son, Ryan Tian
IC No: S9632428 F. I hereby authorise him/her to make the report.

Name Steve B C Tan / S7009430 D
Date: 30/10/2018
HP# 92356356

To fill in if there is a OD claim

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

Name

Date

Policy Holder's LA & Briefings Pg. 2



redefining / insurance

Date: 30/10/2018

To: Owner of Vehicle Number: SFT141P

The following has been advised to you via your workshop, Mhdin Motor Co through their staff, Ali.

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 Reporting only

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

Name and signature of workshop personnel including company stamp



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7009430D**



Name

STEVE B C TIAN

程文財

Race

CHINESE

Date of birth

13-03-1970

Sex

M

S7009430D

Country/Place of birth
SINGAPORE

Policy Holder

Vehicle : SFT 1411 P

5427123



NRIC No. **S7009430D**



Date of issue

23-02-2015

Address

**5 LEEDON HEIGHTS
#13-08
SINGAPORE 267952**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



scene



scene



scene



scene



scene



scene

