

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	10/10/2018 17:12
Date Of Accident	09/10/2018 15:45
Exact Location Of Accident	INSIDE ESSO HOLLAND ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU6612R
Insured/Policyholder	
Name Of Registered Owner	SONG JINTIAN
NRIC No	S8362332B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96587432
Alternative Phone No	OTHERS-96587432

Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER-2.0 AWD (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	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	GA137281
Cover Note Number	18/12/2017 - 17/12/2018

Driver

Name of Driver	SONG JINTIAN
NRIC No	S8362332B
Date Of Birth	28/09/1983
Occupation	INDOOR
Date Of Driving Pass	20/05/2013
Driving Experience	5 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96587432
Fax Number	
Contact Number	OTHERS-96587432
Email Address	NOEMAIL

Address	BLK 930 HOUGANG ST 91 #14-111
Postcode	530930
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	COLLIDED INTO PARKED VEHICLE
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?	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	SLM4343Z
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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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: 10/10/15

1708415

Driver's Signature

(If driver is not the policyholder)

Date & Time:



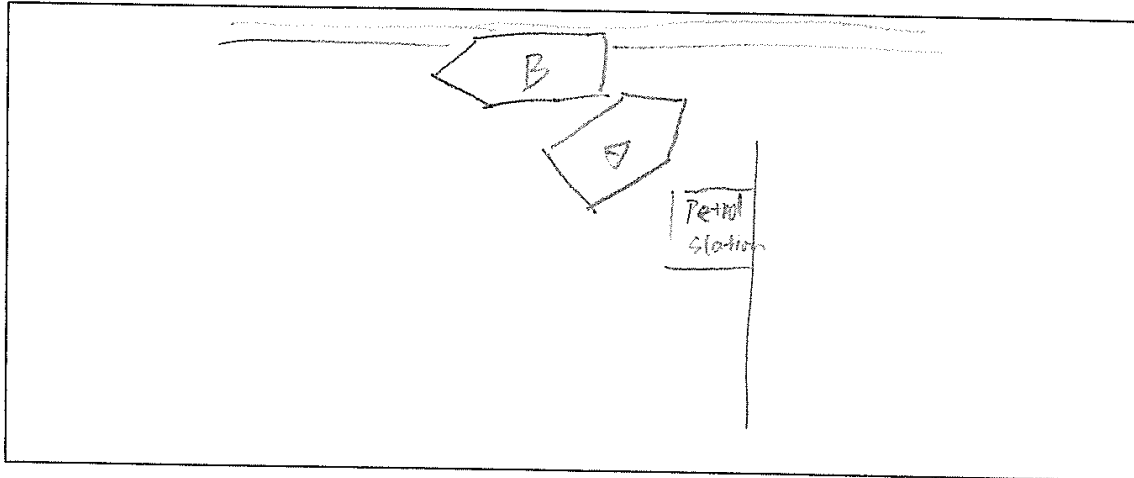
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

Date of accident: 9/10/2018 Time: 15:45 Location: inside ESSO Holland Road
 My Vehicle A: STU6612R Vehicle B: SLM 4343 Z Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The car (SLM 4343 Z) was park in petrol station ~~1st~~ 1st.
 My car hit his back bumper when I reverse to the petrol machine.

Car B - Muhammad Ibrahim Bin
 Ibrahim
 S79743 E

☐ 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 :

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: 10/10/18
008 hrs

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

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



AH LIM MOTOR COMPANY



redefining / insurance

SONG JINTIAN
BLK 930 HOUGANG STREET 91
#14-111
SINGAPORE 530930

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

Renewal

date
13/12/2017

your servicing distributor
INXPRESS INSURANCE AGENCY PTE
LTD / 04123

your servicing distributor contact
67913808

Policy Schedule

Your SmartDrive Comprehensive Peace

Your policy snapshot

Policyholder name	SONG JINTIAN	Policy number	VA1 / GA137281
Cover	Comprehensive	FIN / NRIC	S8362332B
Period of Insurance	from 18/12/2017 to 17/12/2018 (both dates inclusive)		

Premium breakdown

Gross Premium after 10% NCD	SGD 1 232.19
7% GST	SGD \$6.25
Final Premium	SGD 1,318.44

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Peace 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
- Loss of Personal Effects in Singapore up to \$3,000
- Delivery of repaired car to your preferred location
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

Vehicle details

Make & Model of Vehicle	SUBARU FORESTER 2.0	Year of manufacture	2009
Vehicle registration number	SJU6612R	Type of Use	Private use
Body type	SUV	Engine capacity (c.c.)	1994
Seating capacity (excl driver)	4	Engine number	EJ20D917177
Off-Peak car	No	Chassis number	JF1SH5KS5AG037182

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	MAYBANK

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

Basic Own Damage Excess	SGD 700.00
Windscreen Excess	SGD 100.00

Sketch Plan Pg. 4

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of a man with glasses.

Licence Number: **S8362332B**
 Name: **SONG JINTIAN**
 Birth Date: **28 Sep 1983**
 Issue Date: **20 May 2013**

Barcode: 002182426C

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8362332B

Portrait of a man.

Name: **SONG JINTIAN**
 宋 津 甜
 Race: **CHINESE**
 Date of birth: **28-09-1983** Sex: **M**
 Country of birth: **CHINA**

Barcode: 58362332E

96587432

1/c

no many
no video.

1/c

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

Class 3 Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

EFFECTIVE DATE: **20 May 2013**

NP 428A

Licence No: **S8362332B**

9179684

Barcode

NRIC No: **S8362332B**

Portrait of a fingerprint.

Nationality: **CHINESE**
 Date of issue: **02-10-2012**

APT. BLK 930 HOUGANG STREET 91 #14-111
 SINGAPORE 530930
S8362332B 18/05/2013

Sketch Plan Pg. 5



redefining / insurance

Date: 11/10/18

To: Owner of Vehicle Number: SJH 6612R

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 Reporting Only.

Signed and acknowledge by:

[Signature]

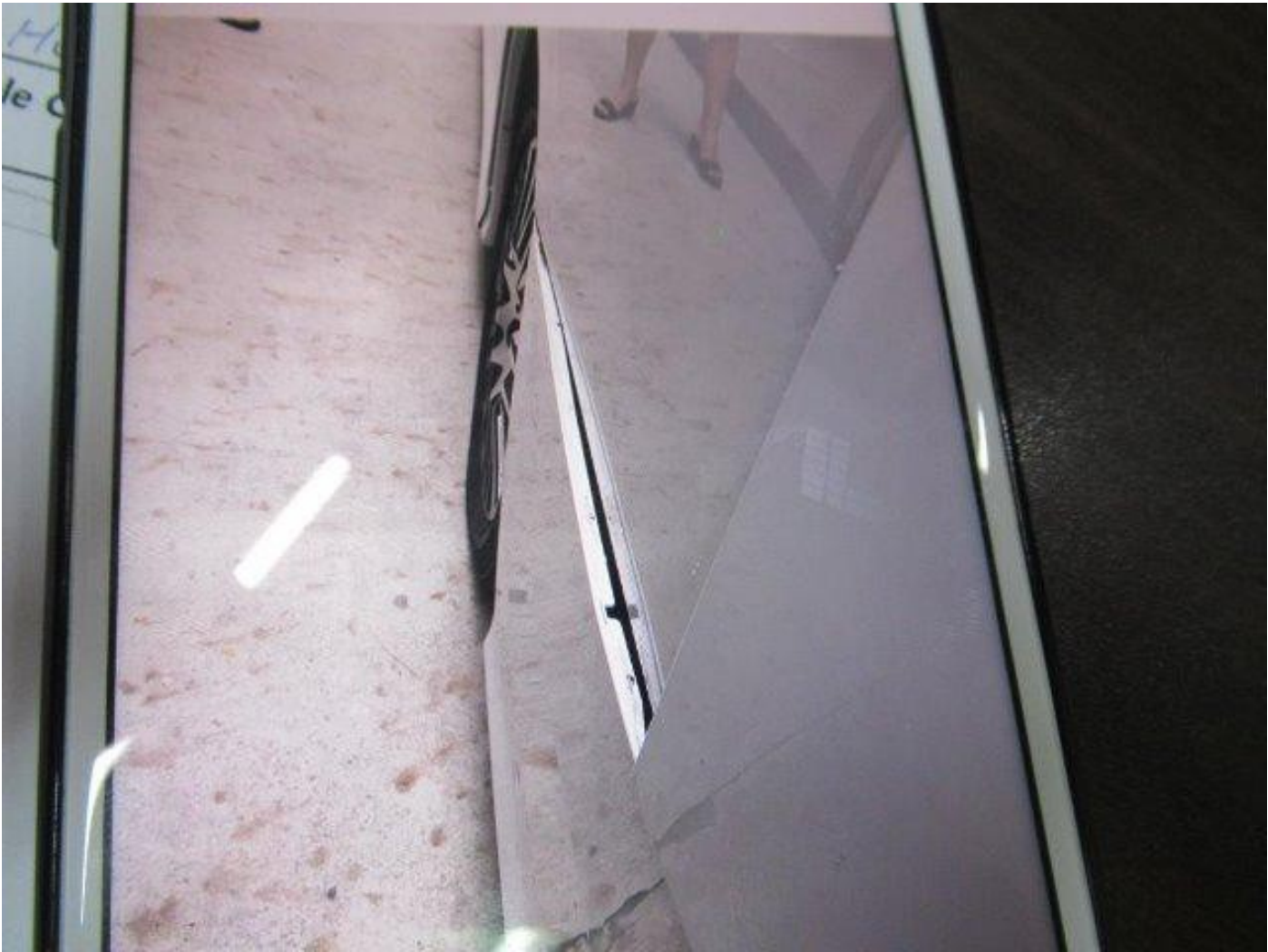
Name and signature of policyholder/authorised driver

[Signature]

Name and signature of workshop personnel including company stamp



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

