

## 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	15/10/2018 11:44
Date Of Accident	15/10/2018 07:45
Exact Location Of Accident	SLIP RD FROM UPPER EAST COST RD TO ECP
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF2377B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEONG HUEY YEE,CHRISTINE
NRIC No	S1836773D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98425748
Alternative Phone No	OTHERS-98425748

### Vehicle Particulars

Manufacturer	TOYOTA
Model	RAV4-2.0 (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	VA1/GA060939
Cover Note Number	

### Driver

Name of Driver	STEPHANIE HO JIA XIAN
NRIC No	S9810492E
Date Of Birth	17/03/1998
Occupation	INDOOR
Date Of Driving Pass	08/11/2017
Driving Experience	0 YEAR AND 11 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-81110433
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	34 PARBURY AVENUE #04-04 SPORE 467302
Postcode	
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 - 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	
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 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	SLU5236B
Vehicle Make/Model/Colour	HONDA HRV 1.5 LX CVT
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

### 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.

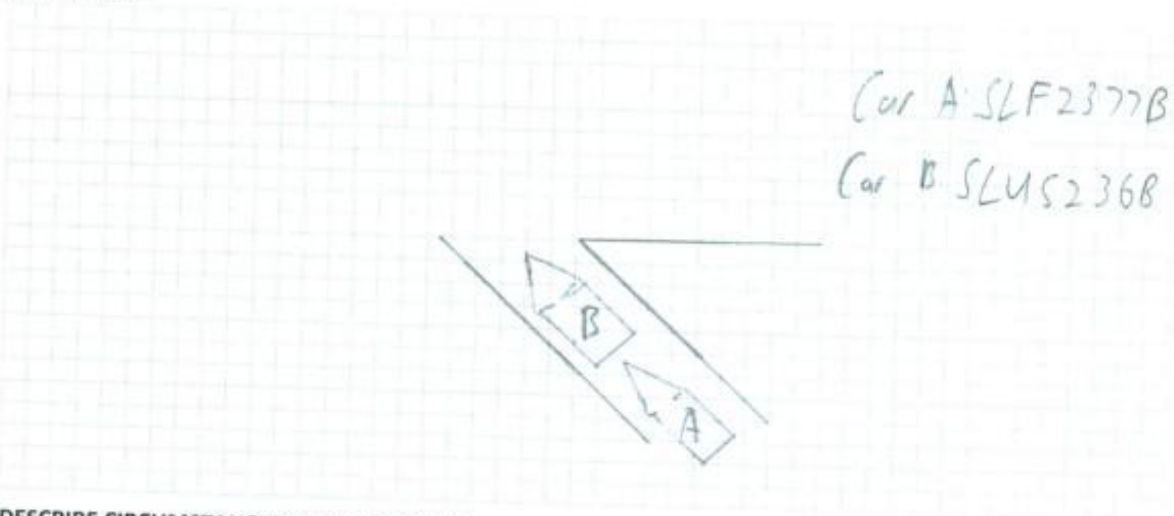
Policyholder's Signature  
Date & Time:

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

  
Reporting Centre Personnel's Signature  
Name: See Kai Min  
NRIC/FIN No.: S8040377A

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At the slip road from upper East Coast Road going towards ECP, car B in front stopped suddenly while I was checking for oncoming traffic and could not brake in time, hitting car B in the rear.

### 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:

Reporting Centre Personnel's Signature  
Name: S. L. L. L.  
NRIC/FIN No.: S2040377A



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Driving License



## Insurance policy



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

LEONG HUEY YEE CHRISTINE  
34 PARBURY AVENUE  
#04-04  
PARBURY HILL CONDOMINIUM  
SINGAPORE 467302

### Renewal

date  
**12/09/2018**

your servicing distributor  
**DIRECTACCOUNT-NON PIVOTAL / 03121**

your servicing distributor contact

## Policy Schedule

Your SmartDrive Comprehensive Private

### Your policy snapshot

Policyholder name	LEONG HUEY YEE CHRISTINE	Policy number	VA1 / GA060939
Cover	Comprehensive	FIN / NRIC	S1836773D
Period of Insurance	from 16/09/2018 to 15/09/2019 (both dates inclusive)		

### Premium breakdown

Gross Premium after 50% NCD	SGD 969.10
7% GST	SGD 67.84
<b>Final Premium</b>	<b>SGD 1,036.94</b>

### Your benefits highlights

(refer to Policy Wording for full terms and conditions)

#### SmartDrive Comprehensive Private Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Loss or Damage
- Legal Liability
- Workshop of Your Choice
- Daily Transport Allowance of \$50 for a maximum of five (5) days
- Medical and dental expenses up to \$500 per person for either you as the driver or your authorised driver and a passenger
- Personal accident benefit of up to \$20,000 for you and your named drivers
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess

### Vehicle details

Make & Model of Vehicle	TOYOTA RAV4 2.0	Year of manufacture	2004
Vehicle registration number	SLF2377B	Type of Use	Private use
Body type	SUV	Engine capacity (c.c.)	1998
Seating capacity (excl driver)	4	Engine number	1AZ1550833
Off-Peak car	No	Chassis number	JTEHH20V500300146

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	HSBC LTD

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

Basic Own Damage Excess	SGD 300.00
Windscreen Excess	SGD 100.00

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

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## Insurance policy

VA1 / GA060939

### Drivers details

Driver type	Driver name	Date of birth	Driving experience
Main Driver	LEONG HUEY YEE CHRISTINE	04/07/1967	33 year(s)
Additional Driver	HO JEE MENG ANDRE	21/08/1967	33 year(s)
Additional Driver	HO JUN WEN NICHOLAS	07/04/1996	3 year(s)

### Additional clauses & endorsements to your policy

Nil

### What you should do

- Keep this Policy Schedule as record of insurance cover for your vehicle.
- This Schedule should be read in conjunction with the Terms and Conditions of the Policy Wording.

AXA Insurance Pte Ltd

*This is an auto-generated document and hence no signature is required*

