

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	17/10/2018 19:11
Date Of Accident	16/10/2018 20:40
Exact Location Of Accident	ANSON ROAD - SPRINGLEAF MCDONALD DRIVETHRU
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ910D
Insured/Policyholder	
Name Of Registered Owner	POH BUAY HOON
NRIC No	S1590399F
Email Address	CLIM0126@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90081188
Alternative Phone No	OFFICE-90081188

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180K-1.6 (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	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	GA362277/1
Cover Note Number	

Driver

Name of Driver	POH BUAY HOON
NRIC No	S1590399F
Date Of Birth	26/07/1963
Occupation	OUTDOOR
Date Of Driving Pass	24/07/1987
Driving Experience	31 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90081188
Fax Number	
Contact Number	OFFICE-90081188
E-Mail Address	CLIM0126@GMAIL.COM

Address	68 JALAN GELENGGANG SINGAPORE 578242
Postcode	
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 - 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?	
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 STATEMENT

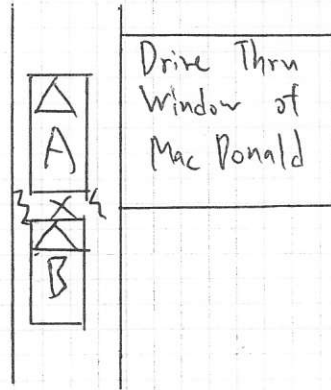
Attachment(s)

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	SHD8830C
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	FRONT PORTION
Vehicle Category	TAXI
Name of Driver	CHUA YONG TIAN JUSTIN
NRIC/Passport Number	S7516628A
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN



Springleaf Mac Donald at
Anson Road - Drive Thru
Vehicle A - SLJ 910D
Vehicle B - SHD 8830C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

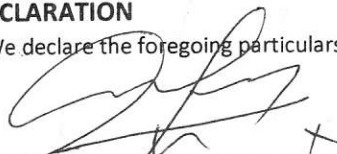
My car SLJ 910D was station in front
of the window of Macdonald (Springleaf Tower
at Anson Road) Drive Thru on 16 OCT 18
at 2040 waiting for my order to be
dispense to me. Suddenly, I felt a "Bang"
on the rear of my car. I was shocked
& alighted from my car & realised vehical
B collided onto the rear of my car.


Vehicle A - SLJ 910D


Vehicle B - SHD 8830C

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: Ngai Kar Kit
NRIC/FIN No.: G27433312

17 / 10 / 2018 @ 1815 HRS