

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	24/10/2018 14:48
Date Of Accident	22/10/2018 18:00
Exact Location Of Accident	6 SHENTON WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX4152A
Insured/Policyholder	
Name Of Registered Owner	ROYSTON IVAN HO
NRIC No	S9102675I
Email Address	RANDYISSAC@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90111409
Alternative Phone No	OTHERS-91717098

Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT-1.5 (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	GA342525
Cover Note Number	EXP 06/05/2019

Driver

Name of Driver	JEREMIAH RANDY ISSAC HO
NRIC No	S9340871C
Date Of Birth	27/10/1993
Occupation	INDOOR
Date Of Driving Pass	24/02/2014
Driving Experience	4 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91717098
Fax Number	
Contact Number	
EEmail Address	RANDYISSAC@GMAIL.COM

Address	BLK 539 SERANGOON NORTH AVE 4 #04-55
Postcode	550539
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	2
Passenger 1	NAME: : ANG WEE KIANG GENDER: : FEMALE

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 ATTACHED STATEMENT AND SKETCH

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF9693S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TRICIA WONG KAI YAN
NRIC/Passport Number	S9234840G
Contact Number	92203237
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLANIMPORTANT NOTICE

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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:

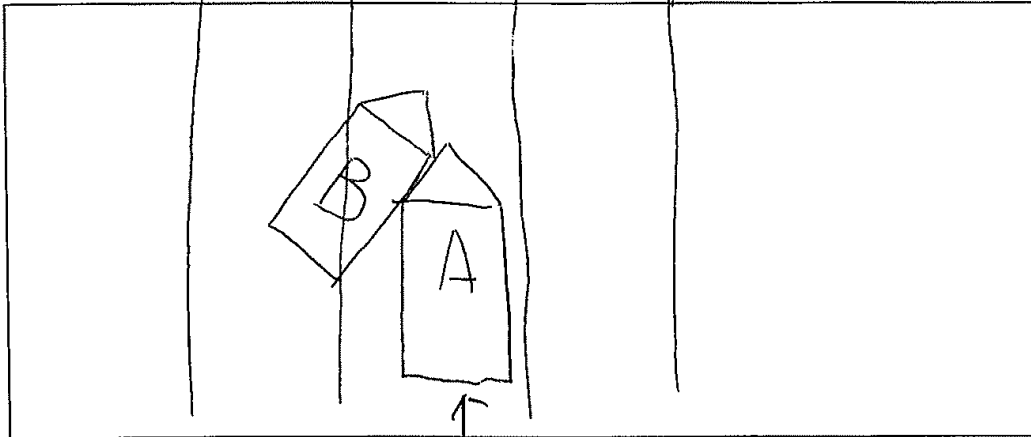
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan Pg. 2

Date of accident: 22/10/18 Time: 1800hrs Location: 6 Shenton way
 My Vehicle A: SLX 4152A Vehicle B: SLF 9693S Vehicle C: ✓

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22 Oct 2018 at about 1800hrs, AS I was driving at lane 1 along 6 Shenton way, after signalling left and after checking there was no vehicle, I filtered onto lane 2 and my vehicle was already fully out on lane 2 when suddenly, vehicle B from lane 3 cuts into my lane 2 and hits my bumper and continued to graze along my vehicle and moved to the front of lane 1. AS per the video, my vehicle was at lane 2 at a very slow speed while vehicle B from lane 3 cuts into my lane 2 and hits my vehicle.

☐ 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: randyissac@gmail.com

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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



REPUBLIC OF SINGAPORE DRIVING LICENCE

S9340871C

JEREMIAH RANDY ISSAC HO

Birth Date: 27 Oct 1993

Valid Date: 24 Feb 2014

002276279E

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9340871C

Name: JEREMIAH RANDY ISSAC HO

何 義 声

Race: CHINESE

Date of birth: 27-10-1993

Sex: M

Country of birth: SINGAPORE

S9340871C

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 24 Feb 2014

NP 428A

Licence No: S9340871C

4302832

NRIC No. S9340871C

Date of issue: 05-11-2008

Address: APT BLK 539 SERANGOON NORTH AVENUE 4 #04-65 SINGAPORE 550539



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

ROYSTON IVAN HO
 BLK 539 SERANGOON NORTH AVE 4
 #04-55
 SINGAPORE 550539

Endorsement

date
 11/04/2018

your servicing distributor
 ALLINK INSURANCE AGENCY / 04437

your servicing distributor contact
 6567 4722

Policy Schedule

Your SmartDrive Comprehensive Essential

Your Policy Schedule has been updated effective 09/04/2019.

Your policy snapshot

Policyholder name	ROYSTON IVAN HO	Policy number	VA1 / GA342525
Cover	Comprehensive	FIN / NRIC	S91026751
Period of Insurance	expiring 06/05/2019		

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

Add-on Benefits

- Personal accident benefit of up to \$ 50,000.00 for you and your named drivers
- Personal accident benefit of up to \$20,000 per passenger

Vehicle details

Make & Model of Vehicle	SUZUKI SWIFT 1.5	Year of manufacture	2008
Vehicle registration number	SLX4152A	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	1490
Seating capacity (excl driver)	4	Engine number	M15A1348273
Off-Peak car	No	Chassis number	JSAE2C21S00425656

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 600.00
Windscreen Excess	SGD 100.00

Drivers details

Driver type	Driver name	Date of birth	Driving experience
Main Driver	ROYSTON IVAN HO	27/01/1991	9 year(s)

Additional clauses & endorsements to your policy

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

1 of 2



redefining insurance

Date: 28/10/2018

To: Owner of Vehicle Number: SLX 4152 A

The following has been advised to you via your workshop, Ah Lim Motor Co through their staff, Ma Li.

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 go own Workshop.

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

28/10/18
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

