SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

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	ACCIDENT STATEMENT
Date Of Report	19/11/2018 14:56
Date Of Accident	17/11/2018 18:35
Exact Location Of Accident	ALONG BUKIT TIMAH RD HEADING TWD QUEENS STREET
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJB8301A
Insured/Policyholder	
Name Of Registered Owner	ONG ROY EU JIN
NRIC No	S6976213A
Email Address	BEEYOON.GIAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91272801
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	LEXUS
Model	RX450H-3.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VA1/GA155078
Cover Note Number	
Driver	
Name of Driver	CIAN REE VOON THERESE

Name of Driver GIAN BEE YOON THERESE

NRIC No S1459072B

Date Of Birth 17/06/1961

Occupation INDOOR

Date Of Driving Pass 13/10/2000

Driving Experience 18 YEARS AND 1 MONTH

Gender FEMALE

Mobile Number (LOCAL) +65-91272801

Fax Number

Contact Number

EMail Address BEEYOON.GIAN@GMAIL.COM

Address 90 HOLLAND ROAD #01-01

Postcode 278535 Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

1

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.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACH STATEMENT

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 SLR559T

Vehicle Make/Model/Colour TOYOTA ALTIS

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver HAYATO OGURA
NRIC/Passport Number G3137335U

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO: 830 8301 A
ACCIDENT DATE: A | II | 16 0 16:35p-1

- 1. Please report correctly the details of the accident to speed up the claims process.
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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.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFERITO YOUR POLICY FOR MORE INFORMATION.

Policyholder's Signature

Date & Time: /C Alcar

19-NOV-W

12.10 appl

Driver's Signature

(If driver is not the policyholder)

Date & Time:

ne: 19/11/2018

2.00

CHARN'S CUSTOMCRAFT

Reporting Centre Personnel SSI Name:

NRIC/FIN No.:

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CRIBE CIRCUMSTAN	ICES OF THE ACCIDENT		
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WN DAMAGE ()	3RD PARTY CLAIM	REPORTING	G ONLY () OWN WORKSHOP ()
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(B)	Miles	407/10	CHARVES CUSTOMCRAFT
yholder's Signature & Time: 10 A l a 4 7	Driver's Signature	oolicyholder)	Reporting Centre Personnel's Signature
yholder's Signature & Time: 19 Nov 7	Driver's Signature (If driver is not the Date & Time:)	policyholder)	— [3] / <u>3</u>]

(SJB &301A)

On Sunday 17th November, I was driving along Bukit Timah Road, heading towards Queens Street at 6.35pm. I was queueing in the right lane. Seeing that there were fewer cars in the middle lane, I turned on my left indicator. After the blue taxi drove by and I checked that it was safe for me to switch to that lane, I turned left to make the switch. All of a sudden, a dark saloon car cut into my path. I stepped hard on my brakes to make an emergency stop.

Despite my quick reaction, the saloon car's right rear collided with the front left of my car.

Attached is a video of the accident, taken from my car cam.

From the front camera, you can see that my vehicle is already partially in the middle lane for a good two seconds before the black car accelerated to cut in front of me.

From the back camera, you can see that his black car was coming from my rear. Even though he was coming from behind me and could see that my car body was already partially in the lane, he blatantly chose to cut into my path, under estimated his car distance gap, in his attempt to overtake me and cut in front of my car in the middle lane. In the end, his car impacted the front left of my car.

GIAN BEE YOON THERESE

NRIC NO.: S1459072B Vehicle no: SJB 8301 A

19/11/2018

13:00















Accident Photo



Accident Photo



