

## 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	15/11/2018 10:10
Date Of Accident	14/11/2018 09:50
Exact Location Of Accident	LORNIE EXPRESSWAY TOWARDS FARRER ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT2348K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	JERRY TSO HAN
NRIC No	S7788572B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91014219
Alternative Phone No	OTHERS-91014219

### Vehicle Particulars

Manufacturer	HONDA
Model	AIRWAVE 1.5M 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	GA059425/1
Cover Note Number	

### Driver

Name of Driver	VALERIE WAN
NRIC No	S8188491I
Date Of Birth	08/03/1981
Occupation	INDOOR
Date Of Driving Pass	19/02/2014
Driving Experience	4 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92252287
Fax Number	
Contact Number	
Email Address	LISA.WAN@YMAIL.COM

Address	1 FARRER ROAD #05-06
Postcode	268817
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	-
	-
	-

#### 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)	2
Passenger 1	NAME: : DAUGHTER
	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

PLEASE 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	SLB177X
Vehicle Make/Model/Colour	SUBARU
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BOH TZE YIN, CHARLENE
NRIC/Passport Number	S7700521H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

↑

House	House	House	House
House	House	House	House A
House	House	House	House B
House	House	House	House

A: SJT 2348K  
B: SLB177X

Lorne Expressway towards Farrer Road

~~2~~ November 14, 2018 Roughly around 9:50 - 9:55 Am  
Vehicle SLB177X driven by Boh Tze Yin Charlene suddenly  
rear-ended my vehicle on Lornie expressway towards  
farrer road. Her SUV vehicle front bumper damaged  
the back of my car.

I/We declare the foregoing particulars are true in every respect.

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

9:20 AM 11/15/2018

# Individual Statement

☐ Owner  
☒ Driver

## ACCIDENT STATEMENT

Date of Accident: 14/11/2018 Time: 09:50am Location of Accident: Lornie expressway towards Farrer Road

### INSURED/ POLICY HOLDER (VEHICLE A)

Vehicle Registration Number: SJT2348K  
Name of Policyholder: Jerry TSO Han  
NRIC/ FIN/ Passport/ ROC (if Policyholder is company): S7788572B  
Address: indoor  
Contact Number: 9101 429  
Occupation: indoor

### VEHICLE PARTICULARS (VEHICLE A)

Vehicle Make / Model: Honda Amaze 1.5M A  
Type of Vehicle: Sedan, MPV, CRV, Van, Lorry, Bus, Motorcycle, Others: P11  
Exact Purpose for which vehicle was being used at the time of accident: private use  
Are you claiming under your own insurance policy? ☒ Yes ☐ No Remarks: TP  
Vehicle category: ☒ Private ☐ Commercial ☐ Motorcycle

### INSURANCE COMPANY (VEHICLE A)

Name of Insurance Company: AXA  
Type of Policy: Comprehensive ☒ TP Fire & Theft ☐ Third party  
Fleet Policy: ☐ Yes ☒ No  
Policy Number: GA059425/1

### DRIVER

Name of Driver: Valerie Wan  
NRIC/ FIN/ Passport: S81884911  
Date of Birth: 08-03-1981  
Occupation: indoor  
Driving Pass Date: 17-02-2014  
Gender: ☒ Male ☐ Female  
Contact Number: 9225 2287  
Address: 1 Farrer Road #05-06 (268817)  
Was driver an employee of the Insured's Company? ☐ Yes ☒ No  
If No, relationship of Driver with the Insured:

Vehicle Number of Driver's Own Vehicle (if applicable):  
Insurance of Driver's Own Vehicle (if applicable):

### GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (E.g. Chain Collision/ Head On, etc.): 2 cars (1P)  
Weather Conditions: TP Hit Insured (Front to Rear)  
Road Surface: ☒ Clear ☐ Raining ☐ Others  
Damage Area: ☐ Wet ☒ Dry ☐ Others

### OTHER INFORMATION

Was there any foreign vehicle(s) involved? ☒ No ☐ Yes  
Was anybody injured in the accident? (including Witness) ☒ No ☐ Yes  
Was any other vehicle(s) or property damaged? ☐ No ☒ Yes  
Was there any camera video footage (in car)? ☒ No ☐ Yes  
DETAILS OF POLICE ACTION  
Was the accident reported to the Police? ☒ No ☐ Yes  
If Yes, please state which police station & Report No:  
Was notice of intended Prosecution given? ☒ No ☐ Yes  
If Yes, against whom?

Lisa.Wan@gmail.com

## Individual Statement

OWN VEHICLE REGISTRATION NUMBER

SJT2348K

### DETAILS OF OTHER VEHICLES OR PROPERTY DAMAGED

#### Other Vehicle or Property 1 (VEHICLE B)

Vehicle Registration Number

SLB177X

Vehicle Make/ Model/ Colour

Subaru

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

Boh Tse Yin, Charlene

NRIC/ FIN/ Passport

57700521H

Contact Number / Email Address

Address

Name of Insurance Company

#### Other Vehicle or Property 2

Vehicle Registration Number

Vehicle Make/ Model/ Colour

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

NRIC/ FIN/ Passport

Contact Number / Email Address

Address

Name of Insurance Company

### DETAILS OF WITNESS

Name

Phone / Email Address

Address

NRIC/ FIN/ Passport

### DETAILS OF INJURED PERSON 1

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐ Yes

☐ No

Was Injured conveyed to hospital by ambulance?

☐ Yes

☐ No

### DETAILS OF INJURED PERSON 2

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐ Yes

☐ No

Was Injured conveyed to Hospital by Ambulance?

☐ Yes

☐ No

### Declaration

I/We declare that the above particulars & information provided above are true in every aspect.

Signature of Policy Holder  
(Company Check applicable)

Date & Time

Signature of Driver / Date & Time  
(If Driver is not the Policy Holder)

Date & Time

11/15/2018 9:20 AM

## Individual Statement

### SKETCH PLAN

#### IMPORTANT NOTICE

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.

Policyholder's Signature  
Date & Time:

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

9:20 AM 11/15/2018

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



## Individual Statement



Defining the process

Date: 15/11/2018

To: Owner of Vehicle Number: SJT2348K

The following has been advised to you via your workshop, BH Auto through their staff, ap-j

Please tick the applicable box if you had been advised 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: Third party claim

Signed and acknowledge by:

Valerie Wan  
Name and signature of policyholder/authorised driver

\_\_\_\_\_  
Name and signature of workshop personnel including company stamp



AUTHORIZATION FORM

Authorization Form

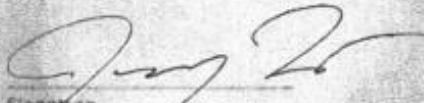
I (Name) JERRY Tso of (NRIC) S7788572B authorized

(Name) Valerie Wan of (NRIC) S8188491I to Repair/Reporting at

BH AUTO SERVICES PTE LTD located at BK1 Sin Ming Industrial Estate Sector C #01-111/113/115/117  
5575636

On behalf of me for my vehicle number SJT 2348K

My residential address is 1 Farrer Rd #05-06, 268817 and  
contact number is 91014217

  
Signature  
Owner Name: JERRY Tso

\_\_\_\_\_  
Signature  
Witness Name:



IDENTITY CARD (OWNER)

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7788572B

7788572B

JERRY TSO HAN

CHINESE  
Date of birth: 31-08-1977  
Country of origin: TAIWAN

Sex: M

9305631

OWNER

9305631

9305631

NPIC No: S7788572B

1 FABER ROAD #05-06  
SINGAPORE 208817  
NPIC No: S7788572B

10/02/2015

10/02/2015

# IDENTITY CARD & DRIVING LICENCE (DRIVER)

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S81884911**

Name: **VALERIE WAN**

Birth Date: **08 Mar 1981**

Issue Date: **19 Feb 2014**

0002277021K

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S81884911**

Name: **VALERIE WAN**

Race: **CHINESE**

Date of birth: **08-03-1981**

Country/Place of birth: **TAIWAN**

Sex: **F**

S81884911

Driver

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

Class	Description	EFFECTIVE DATE
Class 3A	Motor cars without clutch pedals (Auto) <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals <= 2500kg	19 Feb 2014

NP 428A

Licence No: S81884911

9305663

NRIC No: S81884911

Nationality: **AMERICAN**

Date of issue: **20-08-2013**

1 FARRER ROAD #05-06  
SINGAPORE 268817

NRIC No: S81884911 Date: 10/02/2015

# CERTIFICATE OF INSURANCE



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

account number  
03811

## Certificate of Insurance

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Road Transport Act, 1987 (Malaysia)  
-Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

### Policy details

Policyholder name	JERRY TSO	Certificate number	GA059425 / 1
Cover	Comprehensive	Chassis number	GJ11307135
Plan name	Private APW	Engine number	L15A5208685
NCD applicable	30%		
Vehicle registration number	SJT2348K		
Period of Insurance	from 29/09/2018 to 28/09/2019 (both dates inclusive)		
Finance loan company	UNITED OVERSEAS BANK LIMITED		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
(b) Any Named Driver as stated in the Policy:  
1. WAN VALERIE  
(c) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

### Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 250.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

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

1 of 3

Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo

