

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	22/11/2018 17:53
Date Of Accident	22/11/2018 11:40
Exact Location Of Accident	UPPER SERANGOON RD TWDS PUNGGOL.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKD5699A
Insured/Policyholder	
Name Of Registered Owner	HO WAI LEONG
NRIC No	S7625177J
Email Address	CHANNET@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96688906
Alternative Phone No	OFFICE-96688906

Vehicle Particulars

Manufacturer	BMW
Model	520I
Exact Purpose for which vehicle was being used at time of accident	
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	P1692922
Cover Note Number	

Driver

Name of Driver	CHAN ZHENGFEN PAULINE
NRIC No	S8200463G
Date Of Birth	17/01/1982
Occupation	INDOOR
Date Of Driving Pass	03/01/2003
Driving Experience	15 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96688906
Fax Number	
Contact Number	OFFICE-96688906
EEmail Address	NOEMAIL

Address	1 LEICESTER ROAD #13-05
Postcode	358828
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 - 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	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO POLICE REPORT NO.T/20181122/2101.

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	SBS6465D
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan Pg. 1

SKETCH PLAN

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5. Any false reporting may be referred to the Police for investigation.
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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:

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

channel @singnet.com.sg

SKETCH PLAN

SKETCH PLAN

The sketch plan is drawn on graph paper. It features a large rectangular area on the left side, which contains a smaller rectangle. Inside the smaller rectangle, there are two small triangles. To the right of this area, there is another rectangular area. The sketch is signed 'M. B. 1971' in the bottom right corner.

Refer to police report.

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

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

Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**



T/20181122/2101

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 3

Report No. T/20181122/2101

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/11/2018 14:50		Vide Report No.:		Station Diary No.: 74	
Informant's Particulars					
Name of Informant: CHAN ZHENGFEN PAULINE			Address: 1 LEICESTER ROAD #13-05 SINGAPORE 358828		
ID Type / ID No.: NRIC NO / S8200463G			Contact No.: Home/Office: Mobile: 90188135		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 36	Date of Birth: 17/01/1982	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Housewife			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/11/2018 11:40	Type of Location:
Location: Along Road 1 UPPER SERANGOON ROAD Along Upper Serangoon Road towards Punggol.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBS6465D	Bus/Coach/Mi nibus					0
SKD5699A	Car				Slightly Damaged	0



SINGAPORE
POLICE FORCE



T/20181122/2101

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

2 of 3

Report No. T/20181122/2101

CONTINUATION OF REPORT

Brief Details.

On 22/11/2018 I drove my vehicle bearing registration number SKD5699A along Upper Serangoon Road towards Punggol. At about 1440hrs, I was at the second lane, signaling to the left to make a change of lane (Towards third lane). My left part of the vehicle had already in the lane but however, there was a bus service number 136 bearing registration number SBS6465D traveled from the fourth lane drove very fast towards the lane which I am going to. As such, I made a halt to give way to him. While he was proceeding further in to the lane, the right rear side of the bus brushed against my left part of the car. The bus driver did not stop and I tailed him for over 2 other bus stops (All along Upper Serangoon Road. I then managed to stop at the right side of the bus at the junction of Buangkok Dr and Sengkang East Dr as the traffic light was red. The bus driver wind down the window and told me to stop at the next bus stop. When the traffic light turned green, I proceeded straight thinking that he would too but the bus turned left instead. I was not injured when the incident took place and there was also no passenger onboard my vehicle. Due to the impact, my front bumper was dislodged, there were a slight dents and also some scratches on it. That is all.

Accident Sketch Plan Pg. 1



SINGAPORE
POLICE FORCE



T/20181122/2101

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

3 of 3

Report No. T/20181122/2101

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /

Staff Sgt FARHAN BIN ABU

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No.: 65476145

Authentication Stamp

NP168



Signature Of Informant:

Date/Time:

22/11/2018 14:50

Classification Of Case:

SN 085

LETTER OF UNDERTAKING

I/We, HO Wai Long, the owner of vehicle no. SKD 5699A

My/Our Insurance is under M/s AXA Insurance Pte Ltd , I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Pte Ltd with all relevant facts and documents **within 14(fourteen) days of occurrence or discovery of damage.**

My/Our Third Party claim is handle by my/our preferred workshop, _____

Signed and Acknowledge by:



.....
Nric no. & signature of policyholder

.....
Company stamp

.....
Date

LETTER OF AUTHORIZATION

I, HO NAT LIONG OF NRIC S7625177J
HEREBY AUTHORIZE CHAN ZHENGFEN PAULINE
OF NRIC S8200463G TO FILE AN
ACCIDENT REPORT AND ACCIDENT CLAIM
ON MY BEHALF.



22 NOV 2018

HO NAT LIONG

S7625177J

Accident Sketch Plan Pg. 1

AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Service Centre #B1-01
Tel:(65)63387288 Fax:(65)63382522
Website:www.axa.com.sg
GST Registration Number: 199903512M
customer.service@axa.com.sg



CERTIFICATE OF INSURANCE

<p>■ 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)</p>		
CERTIFICATE NO.	: VPA/P1692922	Account No. : 14235
Coverage	: Comprehensive	
Sum Insured	: Market Value At The Time Of Loss	
Name of Policy Holder	: HO WAI LEONG (HE WEILIANG)	
Vehicle Registration No.	: SKD5699A	
Period of Insurance	: From 16/12/2017 To 15/12/2019 (Both Dates Inclusive)	
<p>PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*</p> <p>(a) The Policyholder The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner</p> <p>(b) Any other person who is driving on the Policyholder's order or with his 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.</p> <p>LIMITATIONS AS TO USE*</p> <p>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, speedtesting, 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.</p> <p style="text-align: right;">(01)</p>		
<p>Basic Own Damage Excess : SGD 300.00</p> <p>An Additional Excess is applicable as follows: S\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver. S\$5,000.00 for Undeclared Young and Inexperienced Driver. (Please refer to your policy on the terms & conditions)</p> <p>* 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.</p>		

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions 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

Authorized Signature

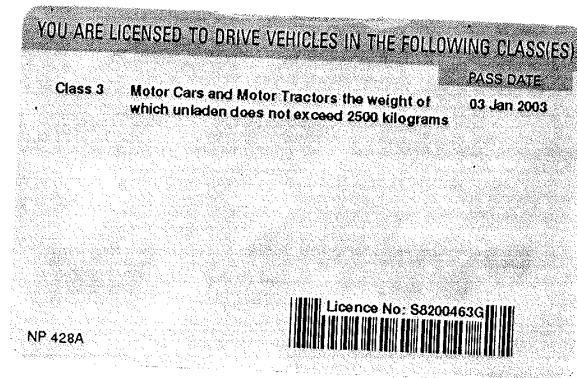
Issued by - SGOVKRS2 on 08/11/2017

IMPORTANT :

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, covernote and endorsement etc.

Accident Sketch Plan Pg. 1



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

