#### 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 <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

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	29/11/2018 12:41	
Date Of Accident	28/11/2018 21:20	
Exact Location Of Accident	CROSS JUNCTION BETWEEN YISHUN AVE 1	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKE9905Z	
Insured/Policyholder		
Name Of Registered Owner	FRANCIS MICHAEL MARK	

NRIC No S2661316G

Email Address FRANCISMMARK@GMAIL.COM

Mobile Phone No (LOCAL) +65-92310928
Alternative Phone No OFFICE-92310928

**Vehicle Particulars** 

Manufacturer VOLKSWAGEN

Model JETTA A6SPORT 1.4 TSI DSG118KW

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 VPA/P1261593

Cover Note Number

Driver

Name of Driver FRANCIS MICHAEL MARK

NRIC No S2661316G

Date Of Birth 18/05/1966

Occupation INDOOR

Date Of Driving Pass 11/04/1997

Driving Experience 21 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92310928

Fax Number

Contact Number OFFICE-92310928

EMail Address FRANCISMMARK@GMAIL.COM

556 MILTONIA CLOSE #01-79 Address

Postcode 768122

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 - CROSS JUNCTION** 

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? YES

Was any injured conveyed to hospital by

ambulance?

YES

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 2

Passenger 1

NAME: : CHUA HWEE LIANG

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE

NO

YES

ROAD: 31 YISHUN CENTRAL, POSTCODE: 768827, COUNTRY: Police Station Address

**SINGAPORE** 

TEL NO: 1800-8529999 - FAX NO: 68522299 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO SKETCH PLAN

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? YES

Was there any audio recorded? NO

**Details of Witness 1** 

MR LOKE Phone Number 9188 2372

**Email Address** 

Name

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SLB2097E Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

CHIN KIM HONG IRENE Name of Driver

NRIC/Passport Number S8002895D Contact Number 9029 6715

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF INJURED PERSON 1**

Name CHUA HWEE LIANG

Approximate Age Injuries Sustain

Injured person in which vehicle? SKE9905Z

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

#### **SKETCH PLAN**

#### **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 5. Any false reporting may be referred to the Police for investigation.
- The 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 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:
  - 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

Charles and the contract

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

29/11/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN		*** ;	en e
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DECLADATION			
DECLARATION  I/We declare the foregoing particu	ilars are true in eveny respect		
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Salianta Hari	- Yelling		Januarian Cantan Danier H. Carrier
Policyholder Signature Date & Time:	Driver's Signature (If driver is not the policy)		Reporting Centre Personnel's Signature Name:
29/11/18	Date & Time:		NRIC/FIN No.:
ground square property of	24/11/18		3

**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

■ 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)

CERTIFICATE NO.

: VPA/P1261593

Account No.: 13820

Coverage

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: FRANCIS MICHAEL MARK

Vehicle Registration No. : SKE9905Z

Period of Insurance

: From 23/04/2018 To 22/04/2019 (Both Dates Inclusive)

#### PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

(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

(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.

#### LIMITATIONS 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, 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 reign pace-making or such similar purposes. used for racing, pace-making or such similar purposes. (01)

Basic Own Damage Excess

: SGD 1,125.00

Windscreen Excess

: SGD 100.00

An Additional Excess is applicable as follows:

S\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver. \$\$5,000.00 for Undeclared Young and Inexperienced Driver. (Please refer to your policy on the terms & conditions)

\* 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.

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 - SGOTCAS2 on 20/04/2018

IMPORTANT .

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.

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.





Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

1 of 3 Report No. T/20181129/2033

REPORT	OF A	TRAFFIC	ACCIDENT
	•- • •		• • • • • • • • • • • • • • • • • • • •

Date/Time 29/11/2018		ıde:	Vide Report No.: L/20181128/0149	Station Diary No.: 28		
MACH THE RE	a dia Kali	4 (Sa. 17 (. d 17 - 18 )				
Name of Informant:			Address:			
FRANCIS I	MICHAEL	MARK	556 MILTONIA CLOSE #01-7	9 SINGAPORE 768122		
ID Type / II	O No.:		Contact No.:			
NRIC NO /	S2661316	3G	Home/Office: Mobile: 92310928			
Nationality:			Email:			
SINGAPORE CITIZEN						
Sex: Age: Date of Birth:		Date of Birth:	Type of Informant:			
Male	52	18/05/1966	Driver			
Race:		-	Language:	Institution / School Name:		
Tamil			English			
Occupation:			Driving Licence Information:			
UNEMPLOYED			Class: 3 Date of Expiry:			

Type of Accident:	Injury Attended by Police		Drink Drive: No	Date/Time of Accident: 28/11/2018 21:2	20	Type of Location: X-Junction	
Location: Along Road 1 Traveling Toward Road 2 YISHUN AVENUE 1 MILTONIA CLOSE CROSS JUNCTION BETWEEN YISHUN AVENUE 1 TOWARDS MILTONIA CLOSE							
Weather: Clear	Weather: Road		· I			Road Speed Limit:	
Traffic Flow: Traffic Control: Traffic Volume: One Way Traffic Light - Working Light							
Type of Collision: Between Moving Vehicles - Head To Side					one conveyed by pulance:		

				ii seyelidə	Mary ta	n ar Peasardar
SKE9905Z	Car	VOLKSWAGO N	JETTA 1.4 TSI AT 1623Q5	Black	Seriously Damaged	1
SLB2097E	Car				Seriously Damaged	0

	Distriction of the Control of the Co			
SKE9905Z	AXA INSURANCE SINGAPORE PTE LTD	CN000091	23/04/2018	22/04/2019





2 of 3

Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

Report No. T/20181129/2033

**CONTINUATION OF REPORT** 

#### **Brief Details.**

On 28/11/2018, at about 2120hrs, I was driving my car SKE9905Z along Yishun Street 41 towards Miltonia Close.

When I was approaching the cross junction, the traffic light shows green and I continue to drive ahead. Halfway inside the junction, suddenly, there was a car SLB2097E from my right travelling from Yishun Avenue 1 knocked onto the right side of my car.

My right side of my car was badly damaged. At the point of time, I was not injured but my wife Chua Hwee Liang, S1469778J sustained some pain on her right side of her body.

Shortly after that, traffic police and ambulance arrived. My wife was then conveyed to Khoo Teck Puat Hospital and was later given 3 days of MC from 28/11/2018 to 30/11/2018.

I also got to know the driver of SLB2097E as Chin Kim Hong Irene S8002895D Contact: 90296715.

Traffic police later given me a report case number of L/20181128/0149 and I was told to come to lodge a traffic accident report for this.

I wish to state that I had video evidence of what happened from another driver(Mr Loke HP: 91882372)who is a witness in another car.

## Sketch Plan #6 Pg. 1





Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

3 of 3 Report No. T/20181129/2033

**CONTINUATION OF REPORT** 

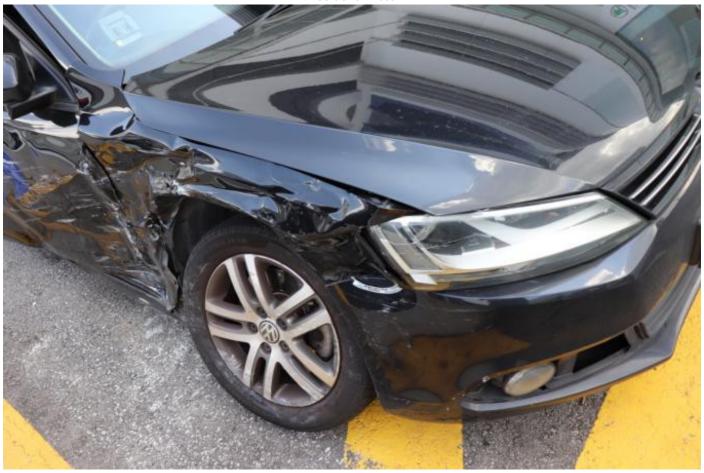
## Sketch Plan

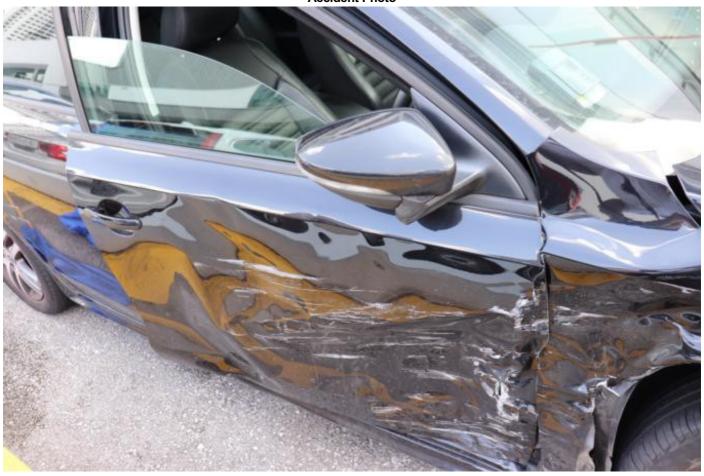
Informant is not able to provide sketch plan

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.

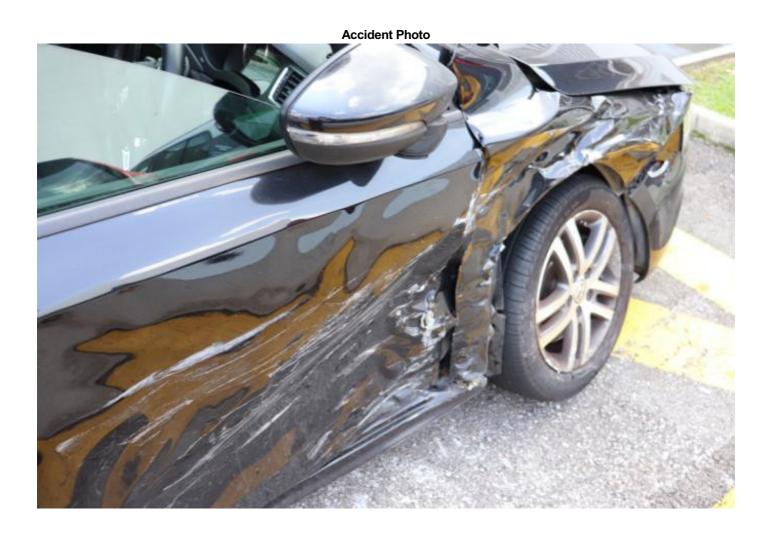
Signature Of Officer Recording The Report: L / Staff Sgt LEE TECK LENG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/11/2018 11:23
Officer In Charge Of Case: TP / GIT / Insp TAN CHIN YONG Contact No.: 65476178	Classification Of Case:
Authentication Stamp	

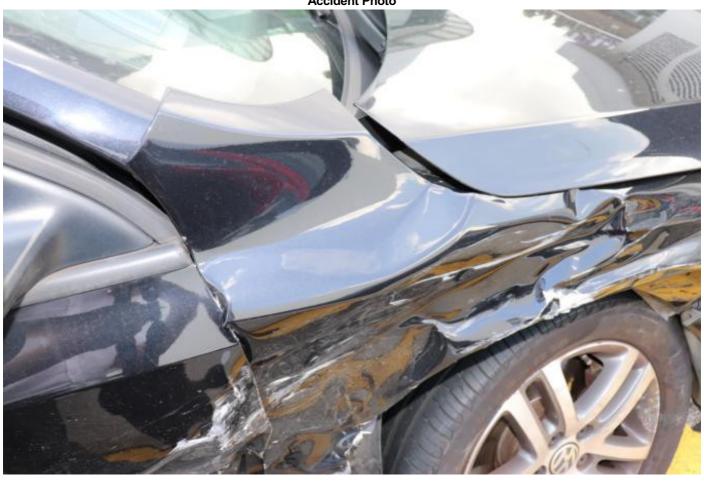


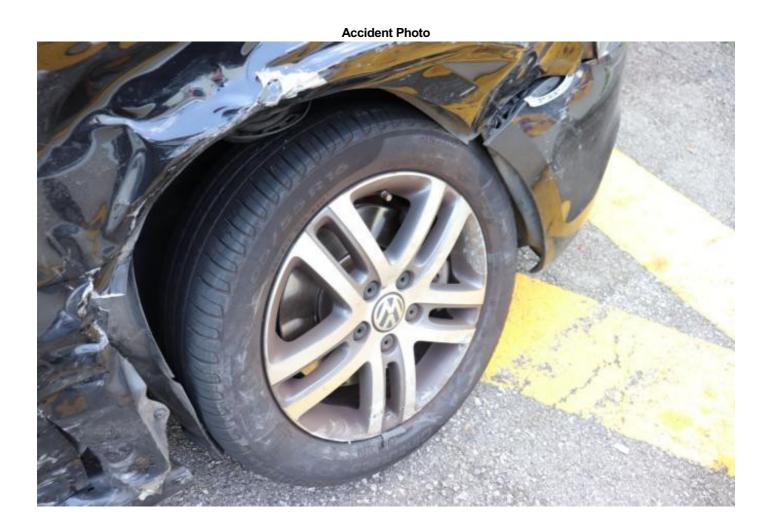


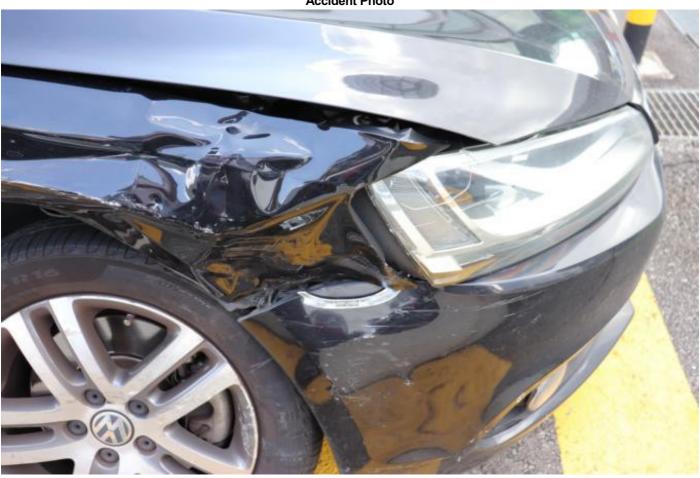


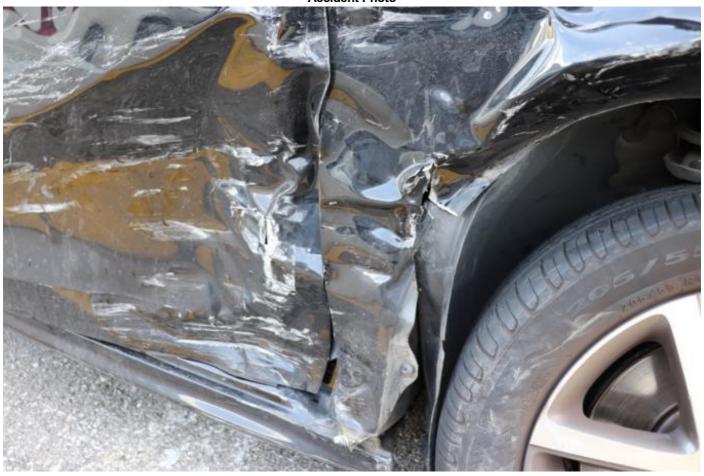


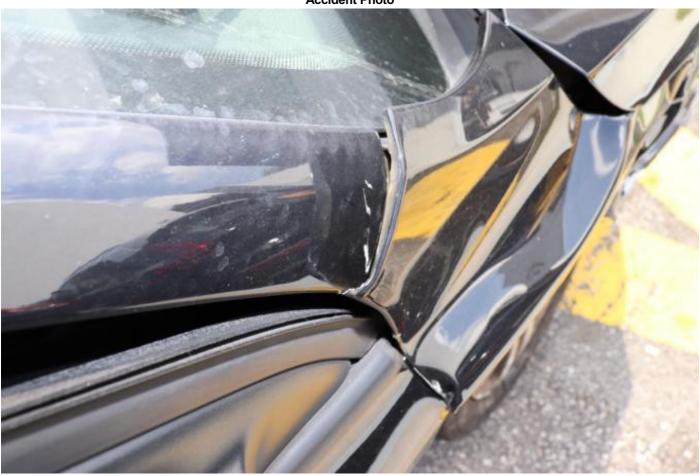














## **Driving License**



#### **Driving License**

