Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 12/12/2018 13:40

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

aforesaid.	sount to the distinting of this report at the sound and to sopios of the report boing made available
	ACCIDENT STATEMENT
Date Of Report	11/12/2018 16:15
Date Of Accident	09/12/2018 05:35
Exact Location Of Accident	TPE (CHANGI BEFORE AIRPORT BOULEVARD)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL1547B
Insured/Policyholder	
Name Of Registered Owner	TAN HUI HWA
NRIC No	S2192585C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97531104
Alternative Phone No	OFFICE-97531104
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ALTIS
Exact Purpose for which vehicle was being used at time of accident	t .
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA421671/1
Cover Note Number	
Driver	
Name of Driver	LIM QIU JI

Name of Driver

LIM QIU JI

NRIC No

T0022392H

Date Of Birth

02/06/2000

Occupation

INDOOR

Date Of Driving Pass

09/12/2018

Driving Experience 0 YEAR AND 0 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97338267

Fax Number

Contact Number

EMail Address NOEMAIL

2 FLORA DRIVE Address

#05-03 CARISSA PARK CONDOMINIUM

Postcode 507025

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **CHILDREN**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

THEFT Type Of Accident 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

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

Details of Police Action

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE HEADQUARTERS

ROAD: 10 UBI AVENUE 3 SINGAPORE, POSTCODE: 408865, Police Station Address

COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/20181209/2026 ------ (DRIVER DO NOT HAVE ANY DRIVING LICENCE)

NO

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 SH7113U

Vehicle Make/Model/Colour

Details Of Properties

TAXI Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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)

Lunderstand, 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)
 - (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
- (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
- 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.

Date & Time

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

Sketch Plan #2 Pg. 1

SINCIPULEMIN		a a second
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DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
REFER TO	POLICE REPORT.	
KNEK 10	LOUIS KEHOKI.	
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ECLARATION		
We declare the foregoing partic	ulars are true in every resmech	
January Constitution	to heart	
1) [2]	S) mil	
K TWY		
olicyholder's Signature ote & Time:	Driver's Signature	Reporting Centre Personnel's Signature
ne a nine:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:
	Date & Time.	mileji in non

POLICE REPORT Pg. 1





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20181209/2026

REPORT OF A TRAFFIC ACCIDENT					
Date/Time Report Made: 09/12/2018 12:01			Vide Report No.:		Station Diary No.:
Informant'	s Particul	ars			
Name of Informant: LIM BENG YEE			Address: 2 FLORA DRIVE #05-03 CARISSA PARK CONDOMINIUM SINGAPORE 507025		
ID Type / ID No.: NRIC NO / S1600183Z			Contact No.: Home/Office:	Mobile: 97338267	
Nationality: SINGAPORE CITIZEN		N	Email:		
Sex: Male	Age: 55	Date of Birth: 22/03/1963	Type of Informant: Vehicle Owner		
Race: Chinese			Language:	Institution /	School Name:
Occupation: OTHERS			Driving Licence Information: Class:	Date of Exp	oiry:

	Total and the second second second				
General Informat	ion of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 09/12/2018 05:35	Type of Location:	
Location: Along Road 1 TAMPINES EXP	RESSWAY				
(CHANGI BEF A	RPORT BOULEVARI)			
Weather:		Road Surface:		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SH7113U						0
SJL1547B						0 ,

POLICE REPORT Pg. 1





2 of 3

Report No. T/20181209/2026

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Brief Details.

ON THE ABOVE MENTIONED DATE & LOCATION ABT 1AM,

I HUNG MY PANTS AT THE COMMON CORRIDOR WITH MY CAR KEY TO THE CAR, SJL1547B IN THE FRONTT POCKET AND WENT TO THE BATHROOM .AT THAT TIME, MY SON, LIM QIU JI(JEREMY) WAS AT HOME AS WELL AND THE CORRIDOR IS ASSESSABLE BY HIM AFTER I FINISHED AT THE BATHROOM, I STAYED UP ACCOMPANIED JEREMY UNTIL ABOUT 1.30AM .I THEN TOOK MY PANTS THAT I HUNG ON AT THE CORRIDOR AND KEPT IT INSIDE THE STOREROOM. WHEN KEEPING THE PANTS. I DID NOT CHECK WHETHER OR NOT MY KEYS WAS STILL IN THE POCKET.AFTER WHICH, I ACCOMPANIED JEREMY TO SLEEP IN HIS ROOM AND THEN WENT TO SLEEP. WHEN I WENT TO SLEEP, I USUALLY PLACE MY HOUSE KEYS(A BUNCH) IN MY LEFT FRONT POCKET SO THAT MY JEREMY COULD NOT HAVE ACCESS TO IT.LATER ABOUT 0601AM, I RECEIVED A CALL FROM AIRPORT POLICE DIVISION INFORMED ME THAT MY CAR WAS DRIVEN BY JEREMY AFTER THE POLICE OFFICER IDENTIFIED HIM AS MY SON, I WAS TOLD TO GO TO THE AIRPORT POLICE HEADQUATERS CARPARK, I CHECKED THAT MY HOUSE KEYS WERE NO LONGER IN MY SLEEPING PANTS POCKET, I ALSO CHECKED THAT MY CAR KEY WAS ALSO MISSING FROM MY PANTS WHICH I KEPT IN THE STORE ROOM.AT ABOUT 0645 AM. I ARRIVED AT THE AIRPORT POLICE CARPARK AND SPOTTED MY CAR AND JEREMY WITH THE POLICE OFFICERS.

OFFICERS INFORM ME THAT THERE WERE 2 SERPARATE ACCIDENTS INVOLVING MY CAR AND ANOTHER VEHICLE.MY CAR WAS BADLY DAMAGED.I WAS INSTRUCTED TO TOW MY CARAND TO SEE IO SUFIAN IN TP.IO INFO ME THAT MY CAR WAS INVOLVED WITH A COLLISION WITH A TAXI SH7113U. THATS ALL

POLICE REPORT Pg. 1





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20181209/2026

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:	Signature Of Informant:
YOGENDRAN S/O RAJASAKARAN	Dannh
Signature Of Interpreter: Not applicable	Date/Time: 09/12/2018 12:01
Officer In Charge Of Case: TP / GIA /	Classification Of Case:
Staff Sgt WONG SIEU LUI Contact No.: 65476151	SINGAPORE POLICE FORCE
Authentication Stamp NP168	Signature:
86	The second secon

DRIVER IC Pg. 1

REPUBLIC OF SINGAPORE IDENTITY CARD NO. T0022392H





LIM QIU JI

林 秋 集
Race
CHINESE
Date of birth
02-06-2000
Country/Place of birth
SINGAPORE

T0022392H

5526742





29-10-2015

Address 2 FLORA DRIVE #05-03 SINGAPORE 507025

OWNER IC Pg. 1









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

Certificate of Insurance

account number 16766

GA421671 / 1

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

Cover

TAN HUI HWA Comprehensive Certificate number

Chassis number

MR053ZEE106122219 3ZZ4807051 Engine number

Plan name NCD applicable Vehicle registration number Essential 20%

SJL1547B

from 29/11/2018 to 28/11/2019 (both dates inclusive)

Period of Insurance MAYBANK SINGAPORE LTD Finance loan company

Persons or classes of persons entitled to drive*

- (a) The usage of the vehicle by the Policy Holder (Insured) is not covered under this policy.
- (b) Any Named Driver as stated in the Policy:
 - 1. LIM BENG YEE
- (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

Windscreen Excess

SGD 400 00

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. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

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-Parly 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,

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

Customer Centre, #B1-01

1 of 3

















