

## 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	28/12/2018 15:20
Date Of Accident	28/12/2018 09:45
Exact Location Of Accident	45 LORONG PENCHALAK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCP2022D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RICHARD LEE KAM YEN
NRIC No	S2566051Z
Email Address	PAULIN.YANG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98391063
Alternative Phone No	OTHERS-96361568

### Vehicle Particulars

Manufacturer	LEXUS
Model	IS-250 LUXURY SUNROOF (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	P1978186
Cover Note Number	

### Driver

Name of Driver	JOSHUA LEE XI XIAN
NRIC No	S9616335E
Date Of Birth	27/04/1996
Occupation	INDOOR
Date Of Driving Pass	06/04/2017
Driving Experience	1 YEAR AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97760555
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	36 LORONG PENCHALAK
Postcode	536273
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

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 (including own vehicle) 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.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : PAULINE YANG 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 THE ATTACHED SKETCH PLAN & VIDEO FOR THE CIRCUMSTANCE OF ACCIDENT.

#### 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	SLM1236U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident Sketch Plan

### SKETCH PLAN

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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

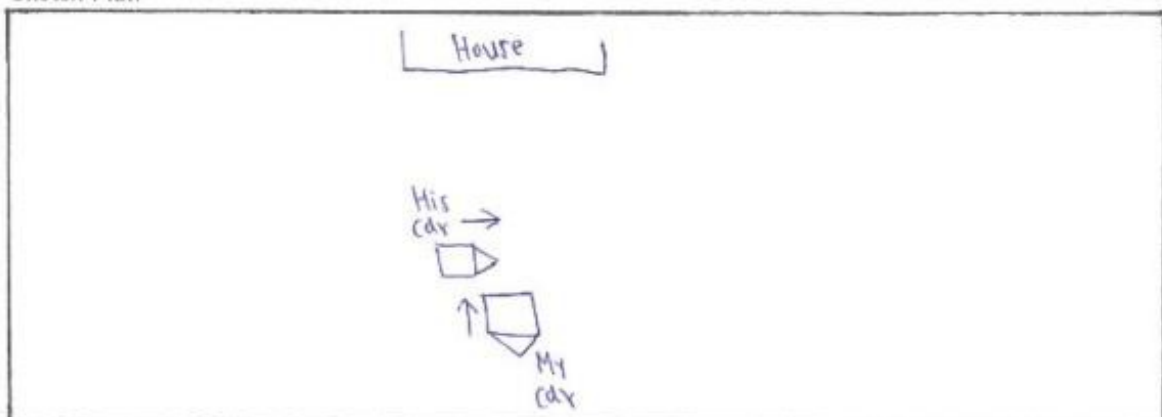
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

#### Sketch Plan



## Accident Sketch Plan


### Describe Circumstances of the Accident

While I was reversing, he tried to dash between and knocked into me.

### Declaration

We declare the foregoing particulars are true in every respect.

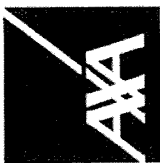
\_\_\_\_\_  
Policyholder's Signature / Date &  
Time

  
\_\_\_\_\_  
Driver's Signature (if driver is not the policyholder) / Date  
& Time

\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

**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



**Private Cars COMP**  
**TAX INVOICE**  
**NEW BUSINESS**  
**Original**

Tax Invoice No : P1978186-00001

POLICY INFORMATION		Policy No. : VPA/P1978186
Source	: (01) 14886 BMS-AXA LEXUS NB	
Insured	: LEE KAM YEW RICHARD	
Address	: 36 LORONG PENCHALAK SINGAPORE 536273	
Period of Insurance	: From 25/08/2017 To 24/08/2019 (Both Dates Inclusive)	
Transaction No.	: 00001	
Billing Currency	: SGD	Exchange Rate : 1.0000
Gross Premium Less Discount SGD		Total Payable SGD
2,920.56	GST 7.00% 204.44	3,125.00
Premium Details (SGD)		
Gross Premium	: 2,920.56	
Total Discount	: 0.00	
Gross Premium less Discount	: 2,920.56	

**Note: Discount is only applicable to limited products.**

## DRIVER - DRIVING LICENCE & NRIC

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9616335E



Name  
JOSHUA LEE XI XIAN  
李 希 賢  
Race  
CHINESE  
Date of birth  
27-04-1996  
Country of birth  
SINGAPORE

Sex  
M

S9616335E

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number  
S9616335E  
Name  
JOSHUA LEE XI XIAN  
Birth Date  
27 Apr 1996  
Issue Date  
06 Apr 2017

002673044C

4480107



NRIC No. S9616335E



Date of issue  
10-02-2011

35 LORONG PENCHALAK  
SINGAPORE 536273

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

	EFFECTIVE DATE
Class 3: Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	05 Apr 2017

NP 426A

Licence No. S9616335E



32851




NRIC No. S2566051Z

Blood Group - Date of issue 30-12-2002

Address  
32 LORONG PENCHALAK  
SINGAPORE 536271

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2566051Z





Name  
RICHARD LEE KAM YEW

李 金 耀

Race  
CHINESE

Date of Birth 10-01-1963 Sex M

Country of Birth  
MALAYSIA



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

