

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	09/01/2019 15:29
Date Of Accident	08/01/2019 19:25
Exact Location Of Accident	JCT AMBER RD & AMBER GARDEN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGF9818J
Insured/Policyholder	
Name Of Registered Owner	HO CHONG TSE IVAN
NRIC No	S0276552G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96288227
Alternative Phone No	OTHERS-96288227

Vehicle Particulars

Manufacturer	TOYOTA
Model	YARIS E AUTO
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	VA1/GA337856
Cover Note Number	

Driver

Name of Driver	HO CHONG TSE IVAN
NRIC No	S0276552G
Date Of Birth	18/10/1946
Occupation	INDOOR
Date Of Driving Pass	15/11/1966
Driving Experience	52 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96288227
Fax Number	
Contact Number	OTHERS-96288227
EEmail Address	NOEMAIL

Address 437 TANJONG KATONG ROAD #26-04 SPORE 437147
 Postcode
 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 (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: : CHAN FONG YUEN
 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

REFER TO SKETCH PLAN

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 SKL51J
 Vehicle Make/Model/Colour TOYOTA WISH 1.8X A
 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)

Sketch Plan

SKETCH PLAN

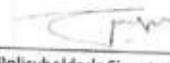
IMPORTANT NOTICE

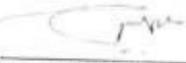
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8. Consent under the Personal Data Protection Act (PDPA)

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.
- (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.

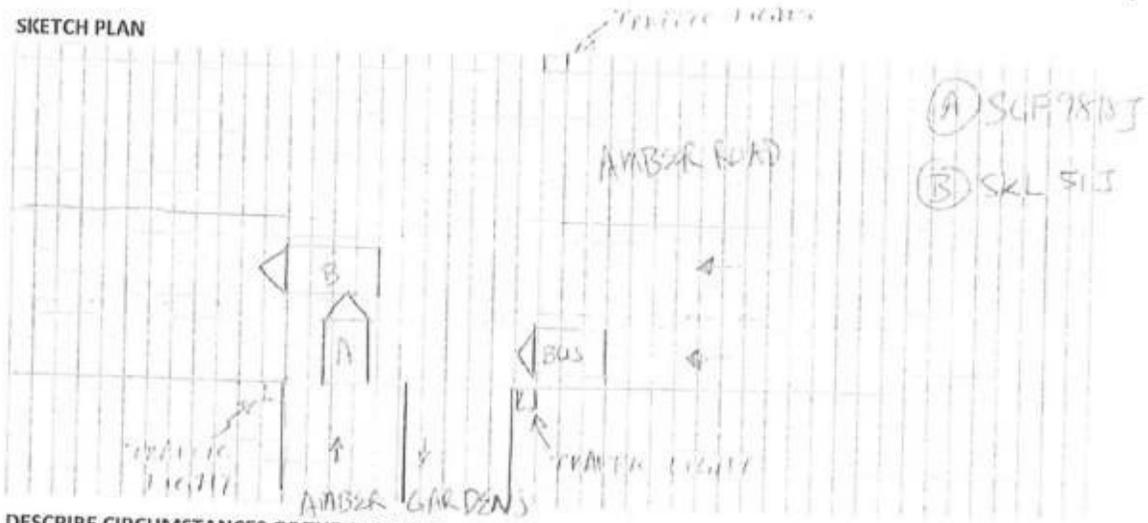

Policyholder's Signature
Date & Time:


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


Reporting Centre Personnel's Signature
Name: S. K. A.
NRIC/FIN No.: 9040377A

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE 03 JAN 2019 @ 1125 HRS I WAS DRIVING FROM AMBER GARDENS TURNING TO AMBER ROAD AS THE TRAFFIC LIGHT TURN GREEN I MOVED OFF SLOWLY SUDDENLY A VEHICLE B DASH ACROSS I WAS UNABLE TO STOP. I AM SURE VEHICLE B HAD DRIVEN RECKLESSLY AS THE BUS HAD STOPPED AT THE TRAFFIC LIGHT DUE RED LIGHT

DECLARATION

I/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:


 Reporting Centre Personnel's Signature
 Name: S. L. M.
 NRIC/FIN No.: 120403770

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Insurance policy



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

HO CHONG TSE IVAN
437 TANJONG KATONG ROAD
#26-04
SINGAPORE 437147

New business

date
27/03/2018

your servicing distributor
ACORN INTERNATIONAL NETWORK PTE
LTD / 11492

your servicing distributor contact
65926503

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name	HO CHONG TSE IVAN	Policy number	VA1 / GA337856
Cover	Comprehensive	FIN / NRIC	50276552G
Period of Insurance	from 29/03/2018 to 28/03/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 842.90
Total Discounts	- SGD 44.94
7% GST	SGD 55.86
Final Premium	SGD 853.82

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

Claim Protector Pack Benefits

- Basic own damage excess waiver
- No Claim Discount Protector

Vehicle details

Make & Model of Vehicle	TOYOTA YARIS 1.5 E AUTO	Year of manufacture	2006
Vehicle registration number	SGF9818J	Type of Use	Private use
Body type	HATCHB	Engine capacity (c.c.)	1497
Seating capacity (excl driver)	5	Engine number	1NZX374967
Off-Peak car	No	Chassis number	MR05-4HY9104000636

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	Nil

Excess applicable (refer to Policy Wording for other applicable Excesses)

Windscreen Excess	Not Applicable
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Drivers details

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