

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	17/01/2019 09:53
Date Of Accident	17/01/2019 08:00
Exact Location Of Accident	MND SURFACE CARPARK (M0050)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD9561M
Insured/Policyholder	
Name Of Registered Owner	LEONG WEY HSIEN
NRIC No	S7133309D
Email Address	LWXIAN@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97684415
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	TOYOTA
Model	PREVIA AERAS 2.4 CVT MR
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	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	BSTL066
Cover Note Number	

Driver

Name of Driver	LEONG WEY HSIEN
NRIC No	S7133309D
Date Of Birth	10/09/1971
Occupation	INDOOR
Date Of Driving Pass	06/03/1997
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97684415
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	LWXIAN@SINGNET.COM.SG

Address	APT BLK 81 REDHILL LANE #03-55
Postcode	150081
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	SIDE SWIPE
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: : WONG WAI KENG 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 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	SJS9742P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN CHIP SIN
NRIC/Passport Number	S1692275G
Contact Number	97549779
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

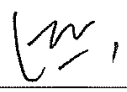
SKETCH PLAN

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 companies.
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)**


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:

17/1/19 10am

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

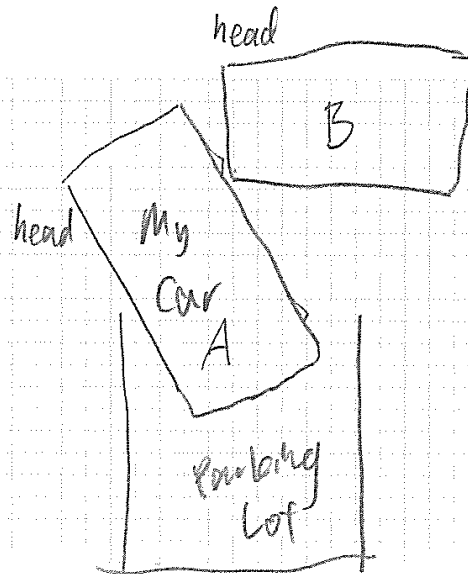

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN

Car A: SMD 9561M
(My Car)

Car B: SJS 9742P




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


LICENSE PLATE: SMD 9561M	ACCIDENT DATE & TIME: 17/1/19 8.00 am
CONTACT NUMBER: 97684415	E-MAIL ADDRESS: Lwxian@singnet.com.sg
LOCATION: MND Surface Carpark (M0050)	
<p>This morning (17/1/19) at 8 am, as I was parking to drop off my daughter at a childcare near MND Complex, At the MND Surface Carpark, a honda car (vehicle no. SJS 9742P) hit my front wheel. Luckily my car is not damaged as it hits my wheel only.</p>	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION	
Please state:	
<input type="checkbox"/> Claim Own Policy <input type="checkbox"/> Claim Third Party <input type="checkbox"/> Claim OD/TP at other workshop <input checked="" type="checkbox"/> Reporting Only	

DECLARATION

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


 Policyholder's Signature
 Date & Time:
 17/1/19 10am

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


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

Sketch Plan Pg. 3

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7133309D**
Name: **LEONG WEY HSIEN (LIANG WEIXIAN)**

Birth Date: **10 Sep 1971**
Issue Date: **08 Apr 2014**

002291277G

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7133309D**

Name: **LEONG WEY HSIEN (LIANG WEIXIAN)**
梁 炜 贤

Race: **CHINESE**
Date of birth: **10-09-1971** Sex: **M**
Country of birth: **SINGAPORE**

S7133309D

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 06 Mar 1997

NP 428A

Licence No: **S7133309D**

4583406

NRIC No: **S7133309D**

Date of issue: **04-06-2010**

Address: **APT BLK 81 REDHILL LANE #03-55 SINGAPORE 150081**

Sketch Plan Pg. 4

AXA INSURANCE PTE LTD

Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Centre #01-21
Tel:1800 8804888
Website:www.axa.com.sg
GST Registration Number : 199903512M
customer.care@axa.com.sg



Original

Agent Code: 14885

Policy No.(if any): BSTL066 CANDICE SIOW
New Business \$1,563.45

SmartDrive Quote Ref:

MOTOR COVER NOTE

No. CN012561

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) - Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	LEONG WEY HSIEN (LIANG WEIXIAN)
MAKE AND DESCRIPTION OF VEHICLE	TOYOTA PREVIA AERAS 2.4
VEHICLE REGISTRATION NO.	
YEAR OF MANUFACTURE	2018
ENGINE NO.	2AZ1A70774
CHASSIS NO.	JTEGD56M907161850
ENGINE CAPACITY/TONNAGE	2362
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	NIL
VALUE (S\$)	AS PER MARKET VALUE
PERIOD OF INSURANCE	FROM: 07/09/2018 TO: 06/09/2019
EXCESS (S\$)	600.00
AXA PREMIUM WORKSHOP?	NO (BORNEO MOTORS (S) PTE LTD)

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by INCHCAPE AUTOMATIVE SERVICES PTE. LTD. on 07/09/2018 4:06 pm

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum of S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
- An administrative fee of S\$26.75 (inclusive of GST) will be charged :
 - Cover note issued and cancelled before inception.
 - Retaining the old registration number for a new vehicle insuring with AXA.

PREMIUM WARRANTY

For Individual Customers:

Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

NTR/C/NOTE/V01/03

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo



Accident Photo



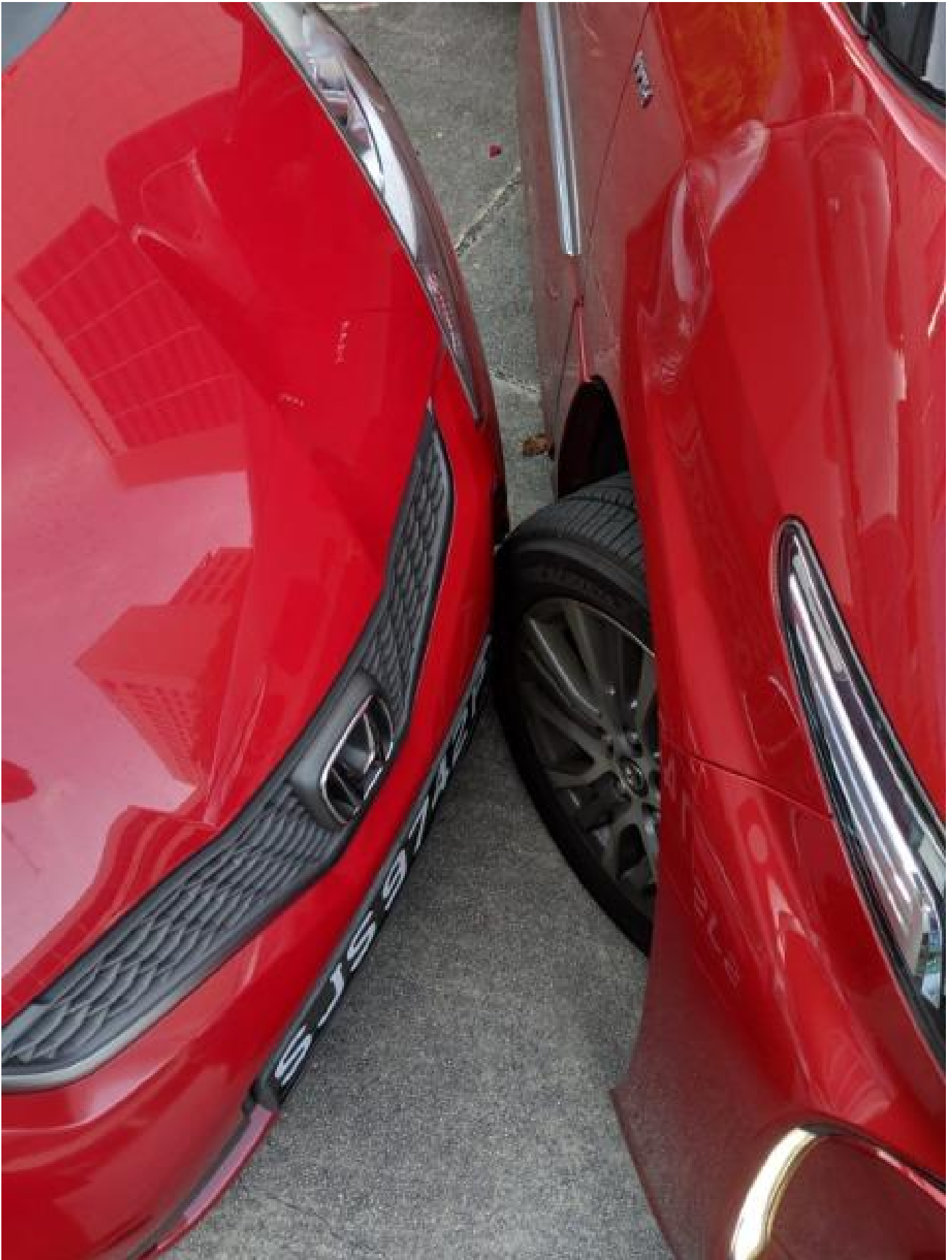
Accident Photo



Accident Photo



Accident Photo



Accident Photo

