

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	19/01/2019 07:29
Date Of Accident	18/01/2019 08:00
Exact Location Of Accident	BEDOK NORTH AVE 4 NEAR FENGSHAN MARKET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN6408C
Insured/Policyholder	
Name Of Registered Owner	LIEW CHIA LIN
NRIC No	S8240346I
Email Address	INRED27@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98814446
Alternative Phone No	OFFICE-98814446

Vehicle Particulars

Manufacturer	PEUGEOT
Model	2008-1.2 ACTIVE PURETECH (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1932520
Cover Note Number	

Driver

Name of Driver	TAN PENG HONG
NRIC No	S8243717G
Date Of Birth	27/12/1982
Occupation	INDOOR
Date Of Driving Pass	30/10/2004
Driving Experience	14 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98814446
Fax Number	
Contact Number	OFFICE-98814446
EEmail Address	INRED27@GMAIL.COM.SG

Address	168C SIMEL LANE #10-56
Postcode	523168
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HUSBAND
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: : LIEW CHIA LIN 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

Turning into the car park (fengshan market) along bedok north ave 4 and the lorry hit my car .

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN5941G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ABDUL RAHIM BIN MOHAMED
NRIC/Passport Number	S1389563E
Contact Number	86723152
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

GAAMC Sketchplanform V3

Policyholder's Signature
Date & Time: 18/1/19

Driver's Signature
(if driver is not the policyholder)
Date & Time: 18/1/19

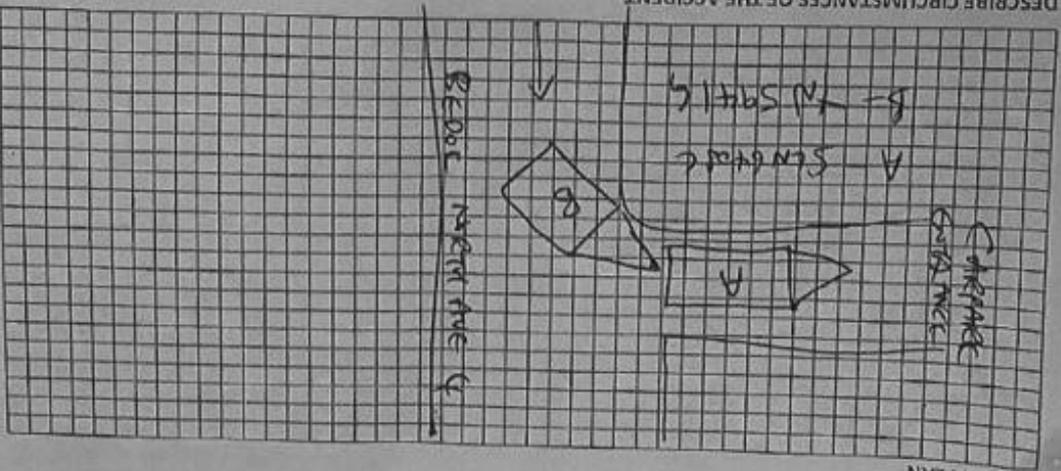
Reporting Centre Personnel's Signature
Name: [Signature]
NRC/FIN No.: 57553052/3

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

Large lined area for notes or description of the accident.

Turning into the carpark (Fongshan) and the lorry (B) hit onto my car.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT



SKETCH PLAN

Accident Sketch Plan

GIAMAC Sketch Plan Form - V3

1

Reporting Centre Personnel's Signature: *[Signature]*
 Name: *[Signature]*
 NRIC/FIN No.: *538830228*
 Date & Time: *18/1/19*
 Driver's Signature: *[Signature]*
 Date & Time: *18/1/19*
 Policyholder's Signature: *[Signature]*
 Date & Time: *18/1/19*

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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) 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.

SKETCH PLAN

IMPORTANT NOTICE

INSURANCE CERTIFICATE

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #81-01
 Tel: 65 63387200 Fax: 65 63382522
 Website: www.axa.com.sg
 GST Registration Number: U69901572M
 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, 1963 *Road Transport Act, 1987 (Malaysia) *Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)		
CERTIFICATE NO.	: VPA/P1932520	Account No. : 14285
Coverage	: Comprehensive	
Sum Insured	: Market Value At The Time Of Loss	
Name of Policy Holder	: LIEW CHIA LIN (LID CAILING)	
Vehicle Registration No.	: SLN6408C	
Period of Insurance	: From 12/05/2017 To 11/05/2019 (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 trader 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.		
(21)		
Basic Own Damage Excess	: SGD 400.00	
An Additional Excess is applicable as follows: S\$500.00 For Unnamed Authorized Driver 1/3r Declared Young & Inexperienced Driver. S\$5,000.00 for Undeclared Young and Inexperienced Driver. (Please refer to your policy on the terms & conditions)		
* Limitations rendered inoperative by Section 4 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 93 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 - SGOJREYZ on 19/05/2017

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 Vehicles (Third-Party 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, documents and endorsement etc.

INSURANCE CERTIFICATE

WORK ZONE	WEST ZONE	COMMERCIAL VEHICLES ZONE 2 (ROAD TO MOUNT)
<p>1. The above information is for your information only.</p> <p>2. The above information is for your information only.</p> <p>3. The above information is for your information only.</p> <p>4. The above information is for your information only.</p> <p>5. The above information is for your information only.</p> <p>6. The above information is for your information only.</p> <p>7. The above information is for your information only.</p> <p>8. The above information is for your information only.</p> <p>9. The above information is for your information only.</p> <p>10. The above information is for your information only.</p>	<p>1. The above information is for your information only.</p> <p>2. The above information is for your information only.</p> <p>3. The above information is for your information only.</p> <p>4. The above information is for your information only.</p> <p>5. The above information is for your information only.</p> <p>6. The above information is for your information only.</p> <p>7. The above information is for your information only.</p> <p>8. The above information is for your information only.</p> <p>9. The above information is for your information only.</p> <p>10. The above information is for your information only.</p>	<p>1. The above information is for your information only.</p> <p>2. The above information is for your information only.</p> <p>3. The above information is for your information only.</p> <p>4. The above information is for your information only.</p> <p>5. The above information is for your information only.</p> <p>6. The above information is for your information only.</p> <p>7. The above information is for your information only.</p> <p>8. The above information is for your information only.</p> <p>9. The above information is for your information only.</p> <p>10. The above information is for your information only.</p>

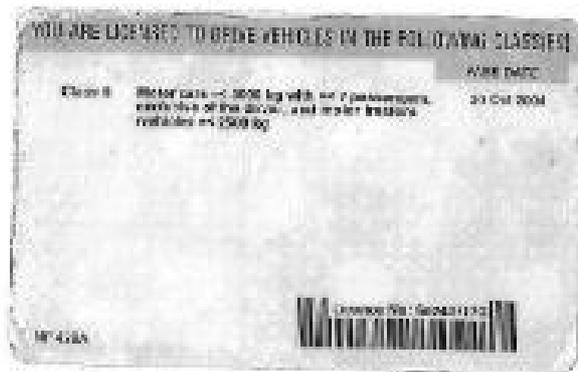
ANY PREMIUM WORKSHOPS

At the accident site

- Workshop participants with all parties involved in the accident including name, NRIC/IR number, telephone number, address and insurance company.
- Take note of the third party vehicle number. Please also take digital photographs (e.g. NGR) of all the third party vehicles involved in the accident and a view of the accident scene. These are to be included in the accident report to be filed later.
- If there are witnesses, note down their names, NRIC/IR number, telephone number and addresses.
- That to do immediately after
- Call our Customer Helpline at 1800-880741 or NCR's Premium Workshops listed below for further advice/assistance.
- Report the accident to one of NCR's Premium Workshops listed below, with your vehicle (unless damaged or not) within 24 hours of the accident or by the next working day.
- NCR's Premium Workshops are authorized to assist our policyholders the accident report.
- Lodge a police report for the following motor accident cases:
 - injury case;
 - non-injury case involving a government vehicle or damage to government property;
 - non-injury case involving a foreign vehicle;
 - non-injury case involving a pedestrian or cyclist;
 - any accident outside of Singapore.
- Record all unauthorised tow-truck operators or repair workshops.
- Forward all letters and communications received from third parties concerning the accident to NCR Insurance Ltd.

CLAIMS PROCEDURE

Identification Card



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. 88243717G



Name
TAN PENG HONG
(CHEN BINGFENG)
陈炳丰



Class
CHNS6P

Date of birth
07-12-1982

Sex
M

Country of birth
SINGAPORE

88243717G

88243717G



88243717G



Date of issue
20-11-2013

Address
APT BLK 100C 0000 LANE
#10-00
SINGAPORE 101000

Identification Card



Driving License



Accident Photo



Accident Photo



Accident Photo

