

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	18/02/2019 18:08
Date Of Accident	16/02/2019 09:10
Exact Location Of Accident	SENGKANG EAST AVE TOWARDS SENGKANG EAST DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFV807C
Insured/Policyholder	
Name Of Registered Owner	ANG TOON THAIN
NRIC No	S1397510H
Email Address	ANG_SHU_YI@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97519463
Alternative Phone No	OFFICE-97519463

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180-1.8 BLUE EFFICIENCY (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?	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	GA10555
Cover Note Number	

Driver

Name of Driver	ANG TOON THAIN
NRIC No	S1397510H
Date Of Birth	26/06/1959
Occupation	INDOOR
Date Of Driving Pass	05/05/1980
Driving Experience	38 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97519463
Fax Number	
Contact Number	OFFICE-97519463
EEmail Address	ANG_SHU_YI@HOTMAIL.COM

Address	113 RIVERVALE WALK #06-45
Postcode	540113
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?	
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	CANNOT VIEW
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5891B
Vehicle Make/Model/Colour	RENAULT LATITUDE
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

X Policyholder's Signature

Date & Time:

18/02/19.

1295485

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

[The page contains faint, illegible horizontal lines suggesting ghosting or extremely faded text.]

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

* SEE ATTACHED. POLICE REPORT

DECLARATION

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

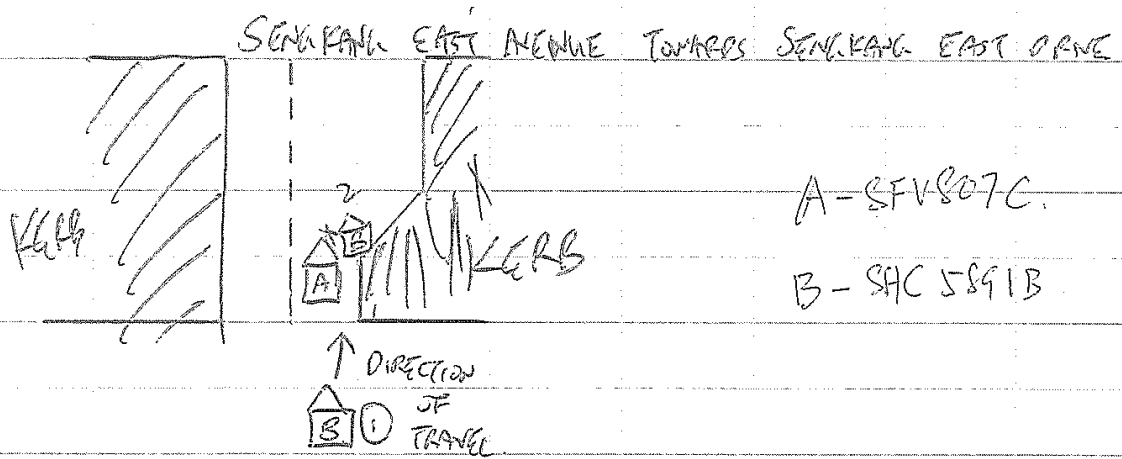
X Policyholder's Signature
Date & Time:

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

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

Sketch Plan Pg. 3

Page No. _____ Date _____





**SINGAPORE
POLICE FORCE**



T/20190218/7002

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190218/7002

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/02/2019 11:03		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ANG TOON THIAN			Address: APT BLK 113 RIVERVALE WALK #06-45 SINGAPORE 540113		
ID Type / ID No.: NRIC NO / S1397510H			Contact No.: Home/Office: Mobile: 97519463		
Nationality: SINGAPORE CITIZEN			Email: tanjingshen@yahoo.co.uk		
Sex: Male	Age: 59	Date of Birth: 26/06/1959	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Supervisor/General foreman (building and related trades)			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/02/2019 09:10	Type of Location: Straight Road
Location: SENGKANG EAST AVENUE				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFV807C	Car	MERCEDES BENZ	C180K	Brown	Slightly Damaged	1
SHC5891B	TAXI	RENAULT	LATITUDE	Red	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20190218/7002

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20190218/7002

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFV807C	AXA INSURANCE SINGAPORE PTE LTD	GA010555	14/01/2019	13/01/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ANG TOON THIAN		ID No. S1397510H
Related Vehicle	SFV807C (Car)		Contact No. 97519463
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	17/02/2019	Date Discharge	18/02/2019
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

DATE: 16 FEB 2019

TIME: ABOUT 0910HRS

LOCATION: SENGKANG EAST AVENUE TOWARDS SENGKANG EAST DRIVE

I stopped my vehicle due to red light junction ahead. Traffic was congested.

There are only 2 lanes on this road.

I stopped at the most right lane as in the picture.

Vehicle B (SHC5891B) drove past on my vehicle's right-hand side at a very high speed, cutting through the small space (horizontal yellow arrow) and immediately cut back into my lane in front of my vehicle. (Movement on Vehicle B is illustrated in blue arrow)

The driver of Vehicle B had misgauged the width of the his vehicle and squeezed through the filter lane and thus collided with my vehicle. The left side of the Vehicle B collided onto my vehicle's front right. The collision was a big impact. The driver subsequently stopped his vehicle abruptly in front of my vehicle and may have caused a second collision.



**SINGAPORE
POLICE FORCE**



T/20190218/7002

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190218/7002

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
SHARIFAH NOR FARIZAN BINTE SYED MOHD
SAID
Contact No.: 65476172

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
18/02/2019 11:03

Classification Of Case:

SFV807C & SHC5891B

DATE: 16 FEB 2019

TIME: 0910HRS

LOCATION: SENGKANG EAST AVENUE TOWARDS SENGKANG EAST DRIVE



Damage from the collision
impact by vehicle B





View from my vehicle's dashboard camera after the impact



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

Certificate of Insurance

account number
05109

-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	ANG TOON THIAN	Certificate number	GA010555 / 1
Cover	Comprehensive	Chassis number	WDD2040452A471105
Plan name	Flexi	Engine number	27191031340759
NCD applicable	50%		
Vehicle registration number	SFV807C		
Period of insurance	from 14/01/2019 to 13/01/2020 (both dates inclusive)		
Finance loan company	MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) 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 2 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 Windscreen Excess Not Applicable

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if you have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

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

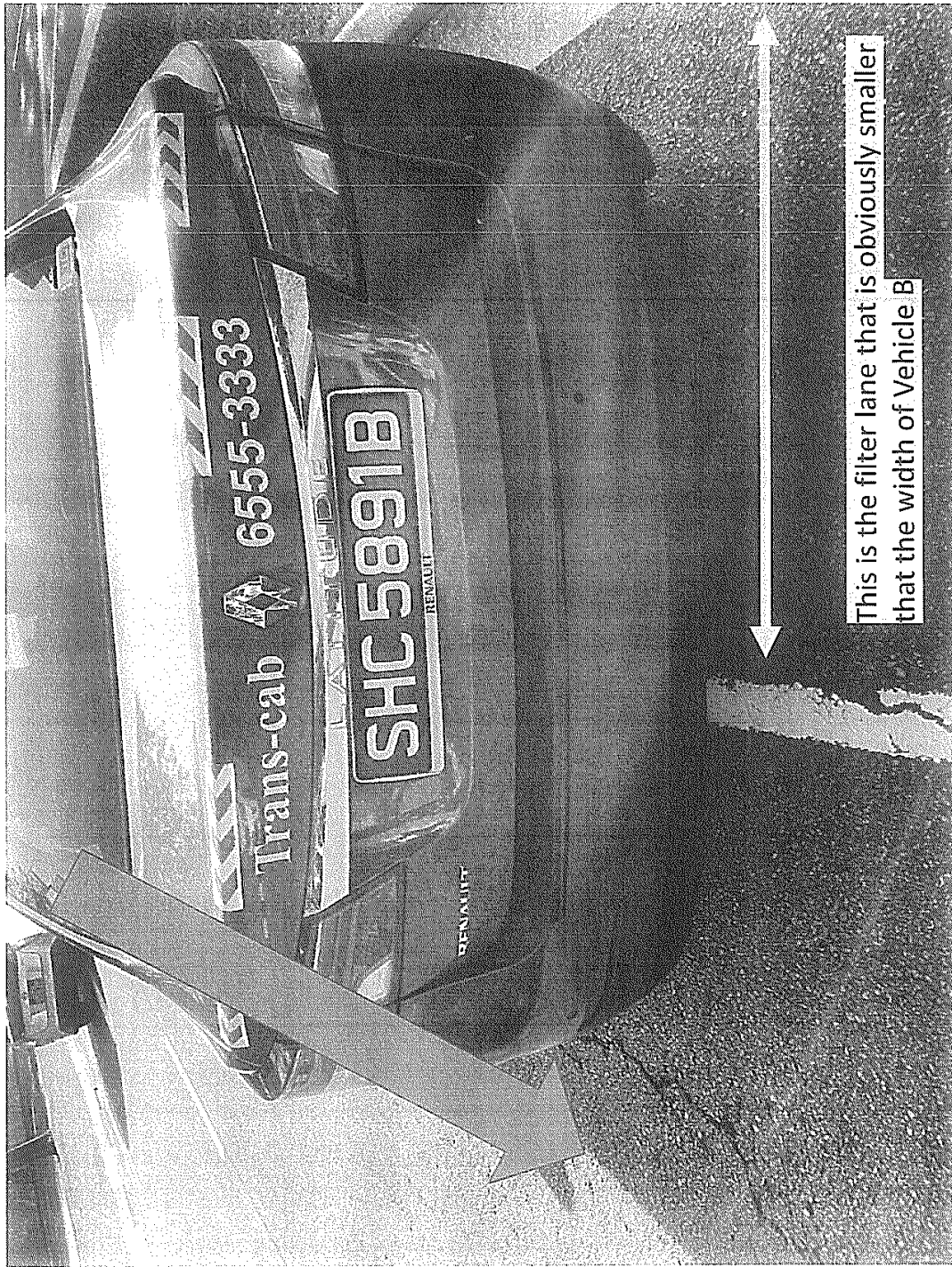
Important note

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 that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act, 1960.

The Third-Party Liability Clause requires the premium to be paid in full before the policy can be issued. There would be no liability under the policy, reinstatement certificate and settlement etc.

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #E1-01

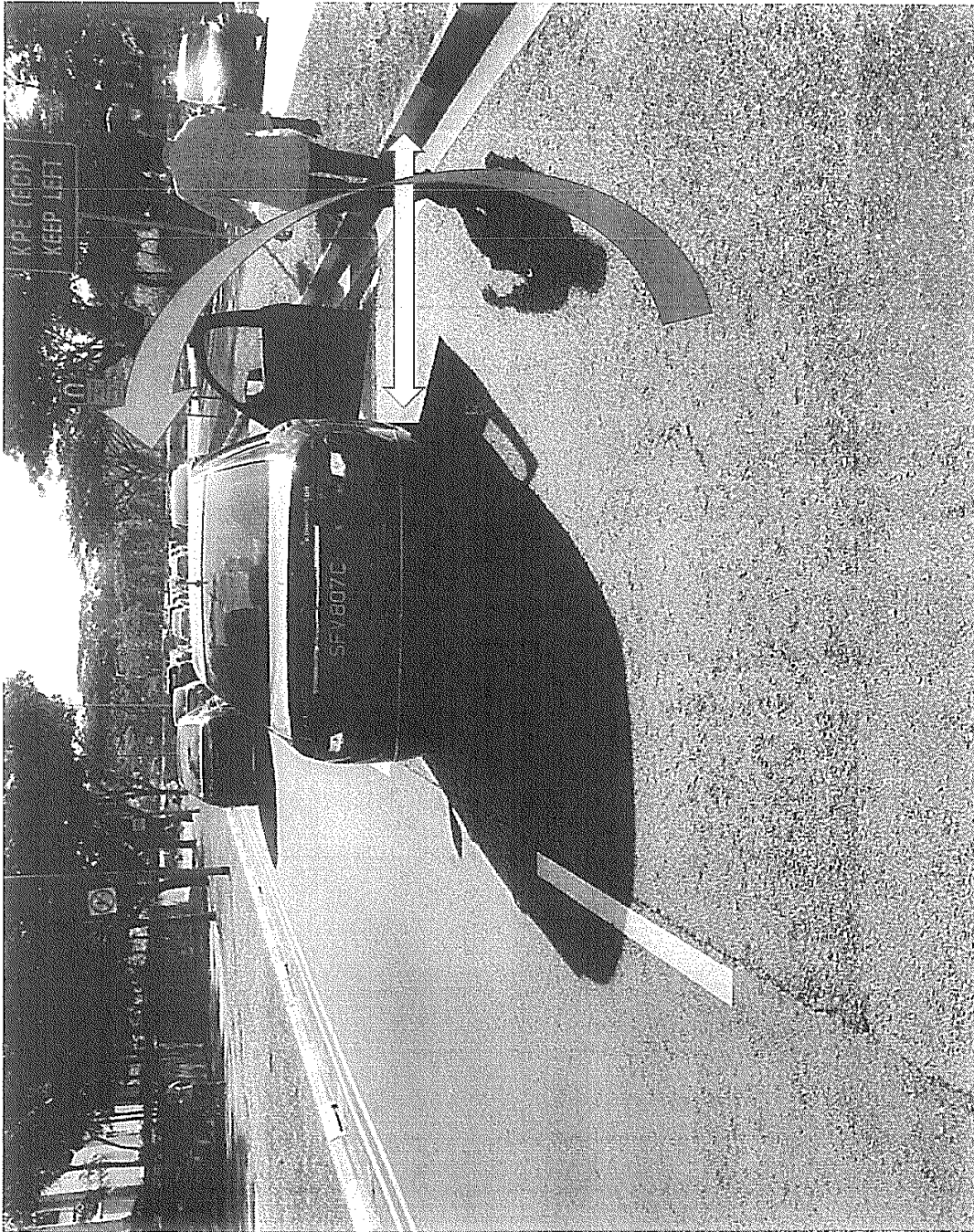
1 of 3



Vehicle B after the collision, was in the filter lane partially.

Driver of Vehicle B had misgauged the width of his vehicle.

My vehicle was on the lane illustrated in green arrow



I stopped my vehicle due to red light junction ahead. Traffic was congested.


There are only 2 lanes on this road.

I stopped at the most right lane as in the picture.

Vehicle B (SHC5891B) drove past on my vehicle's right-hand side at a very high speed, cutting through the small space (horizontal yellow arrow) and immediately cut back into my lane in front of my vehicle. (Movement on Vehicle B is illustrated in blue arrow)

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REPUBLIC OF SINGAPORE
IDENTITY CARD NO S1397510H



ANG TOON THIAN
洪敦展
Race
CHINESE
Date of Birth 26-06-1959 Sex M
Country of Birth
SINGAPORE


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1397510H
Name
ANG TOON THIAN
Birth Date 26 Jun 1959
Issue Date 05 Feb 2004




1001107990E

2092520



NRIC No S1397510H



Blood Group O+ Date of issue 04-06-1994

APT BLK 113 RIVERVALE WALK #06-45
SINGAPORE 540113
NRIC No: S1397510H Date: 29/12/2008 (R) No: 612828-J

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

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	05 May 1980
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	04 Jan 1982

NP 428A

Licence No: S1397510H



Date: 18/02/19

To: Owner of Vehicle Number: SFV807C

The following has been advised to you via your workshop, _____ through their staff, _____.

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ () You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- () () You had been advised by the workshop on the liability and merits of the case accordingly.
- () () You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- () () There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- () () The Estimation waiting time for the spare parts to arrive is _____.
The estimated arrival time does not include the repair period.
- () () You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
- () () For vehicles below Three (3) years old, your insurance company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your insurance company will be carrying out repairs using *any combination* of genuine original parts and/or original equipment manufacturer (OEM) parts.
- () () You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- () () For vehicles below Five (5) years old, you had been advised by the workshop to check with the local distributor on your warranty status.
- () () Others _____

Signed and acknowledge by:

ANG TON THIAN

Name and signature of policyholder/ authorised driver

[Signature]
Name and signature of workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

