

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	15/03/2019 15:01
Date Of Accident	15/03/2019 09:35
Exact Location Of Accident	CARPARK AREA (BTW B/425 & 427 BEDOK NORTH ROAD)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH6998G
Insured/Policyholder	
Name Of Registered Owner	LEE WEI PING LOUIS ALOYSIUS
NRIC No	S8040639H
Email Address	LOUIS_ALOYSIUS@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96425660
Alternative Phone No	OTHERS-96425660

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS PLUS-1.8 (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?	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/P2214773
Cover Note Number	

Driver

Name of Driver	LEE WEI PING LOUIS ALOYSIUS
NRIC No	S8040639H
Date Of Birth	23/12/1980
Occupation	INDOOR
Date Of Driving Pass	15/10/1999
Driving Experience	19 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96425660
Fax Number	
Contact Number	OTHERS-96425660
E-Mail Address	LOUIS_ALOYSIUS@YAHOO.COM.SG

Address	BLOCK 614B EDGEFIELD PLAINS #15-301
Postcode	822014
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 - MAJOR/MINOR RD
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)	1

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 FOR THE CIRCUMSTANCE OF ACCIDENT.

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	CB7528C
Vehicle Make/Model/Colour	TOYOTA HIACE / SILVER
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM KWONG YONG
NRIC/Passport Number	S1823603F
Contact Number	90285548
Address	BLOCK 427 BEDOK NORTH ROAD #09-641
Postcode	460427
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Accident Sketch Plan

SKETCH PLAN

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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.
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

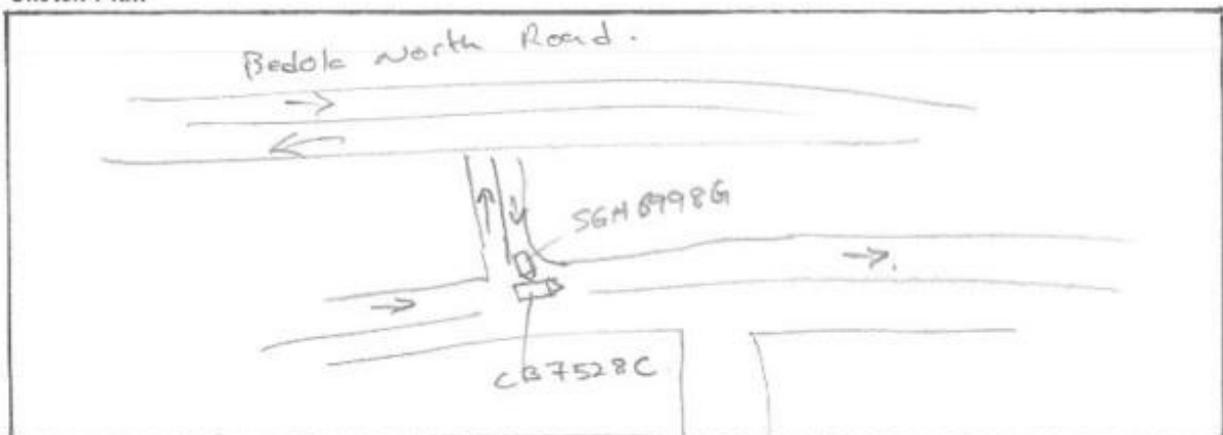
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


15/3/19
Policyholder's Signature / Date & Time
@ 1310hrs.


15/3/19
Driver's Signature (if driver is not the policyholder) / Date & Time
@ 1310hrs.


Witnessed by Reporting Centre Personnel

Sketch Plan

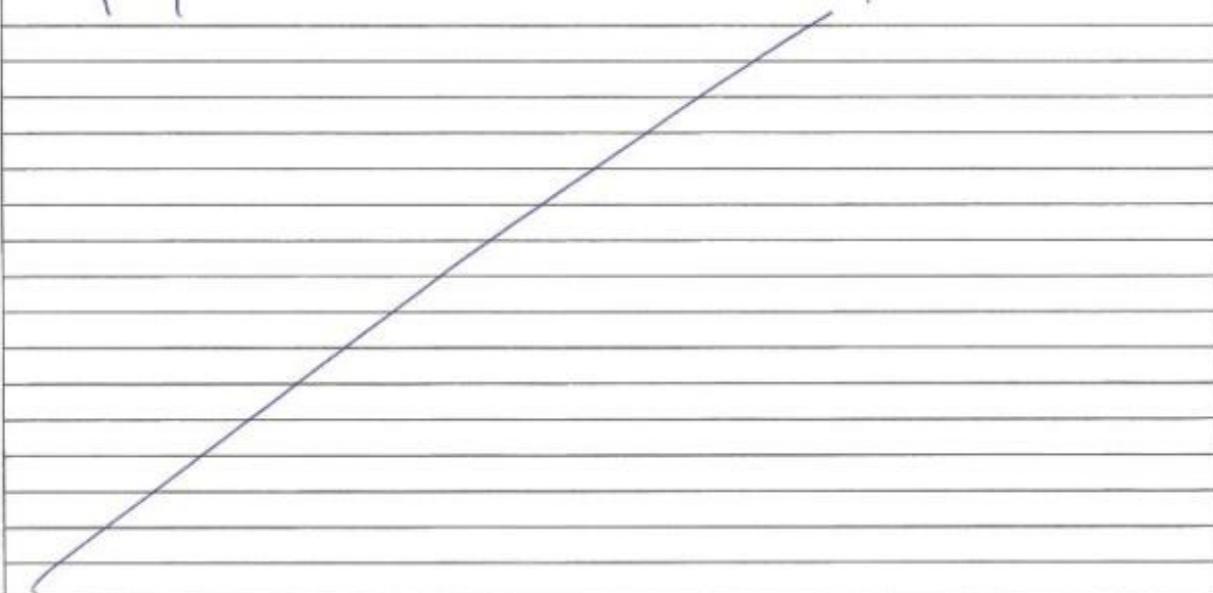


Accident Sketch Plan

Describe Circumstances of the Accident

On. 15/03/2019. @ 0935hrs, I was alone driving 'SG110998G', a Toyota Proace Plus, and had entered into the carpark of 'B/K 425 - B/K 427 Bedok North Road, after clearing the carpark Gentry 'EPS', I moved slowly forward and soon approached at a T-Junction, coming to a complete stop. I did a check on both my right and left, and assessed that it was safe to make my left turn. As ~~such~~ such, I inched to make my left turn, at this juncture, a Silver Toyota Van sped across from my right (Van: CB7528C), and Hit onto my front right of my car. The impact caused my car's front bumper to be dislodged. I wish to state that the weather is clear and bright & the road is not wet.

After the accident, I turned left and stopped by the road to assess the damage. The male Chinese driving the passenger van alighted and begin to take photo shots of his van & my car. There was no other passenger inside the passenger van. We exchanged particulars & during the brief exchange, I notice his eyes to be reddish. He also asked me what do I want to do, I reply to him that we should let the insurance company to settle the matter.



Declaration

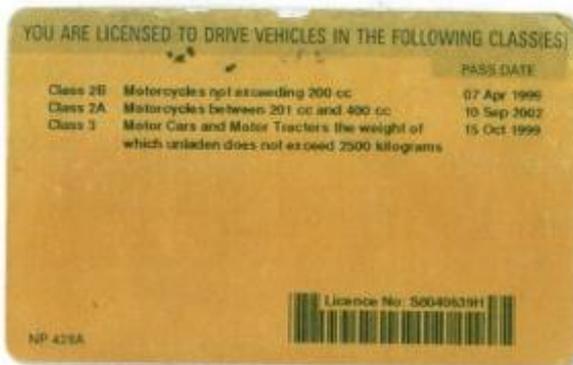
We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time
15/3/2019.
@ 1342hrs.


Driver's Signature (if driver is not the policyholder) / Date & Time
15/3/2019.
@ 1342hrs.


Witnessed by Reporting Centre Personnel

NRIC & DRIVING LICENCE



INSURANCE PTE LTD
 Raffles Place, #24-01
 AIA Tower, Singapore 068811
 Customer Centre #01-21
 Tel: 1800 8804888 Fax:-
 Website: www.axa.com.sg
 GST Registration Number: 199903512M
 customer.care@axa.com.sg



Private Cars COMP
 POLICY SCHEDULE
 NEW BUSINESS
 Original

POLICY INFORMATION		Policy No. : VPA/P2214773	
Source	:	(01) 14885 BMS-AXA TOYOTA NB	
Insured	:	LEE WEI PING LOUIS ALOYSIUS	
Address	:	BLK 614B EDGEFIELD PLAINS #15-301 SINGAPORE 822614	
Business/Profession	:	OTHER OCCUPATION Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance	:	From 28/11/2018 To 27/11/2020 (Both Dates Inclusive)	
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			
PREMIUM			
Premium After NCD	:	50.00%	SGD 1,139.30
GST	:	7.00%	SGD 79.75
Annual Premium	:		SGD 1,219.05
Total Payable	:		SGD 2,438.11
RISK DETAILS THE MOTOR VEHICLE			
Type Of Cover	:	Comprehensive	
Regn No.	:	SGH6998G	
Type Of Use	:	Private Car	
Make/Model	:	TOYOTA PRIUS+	
Year of Manufacture	:	2018	Seating Capacity (excl. Driver) : 07
Body Type	:	SALOON	Engine C.C. : 1798
Engine No.	:	2ZR0C82752	
Chassis No.	:	JTDZS3EU60J036252	
Insured's Estimated Market Value	:	Market Value At The Time Of Loss (including Accessories and Spare Parts)	
Limitations as to Use	:	As specified in Certificate of Insurance	
Hire Purchase	:	UNITED OVERSEAS BANK LIMITED	
<u>Extra Coverage (Premium Breakdown)</u>		<u>Limits (SGD)</u>	<u>Premium (SGD)</u>
NCD Protector			
Basic Own-Damage Excess		:	SGD 600.00
<u>Named Drivers</u>			
1 LEE WEI PING LOUIS ALOYSIUS			
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS			
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:			
Sales Agent ID : BSTL077			

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



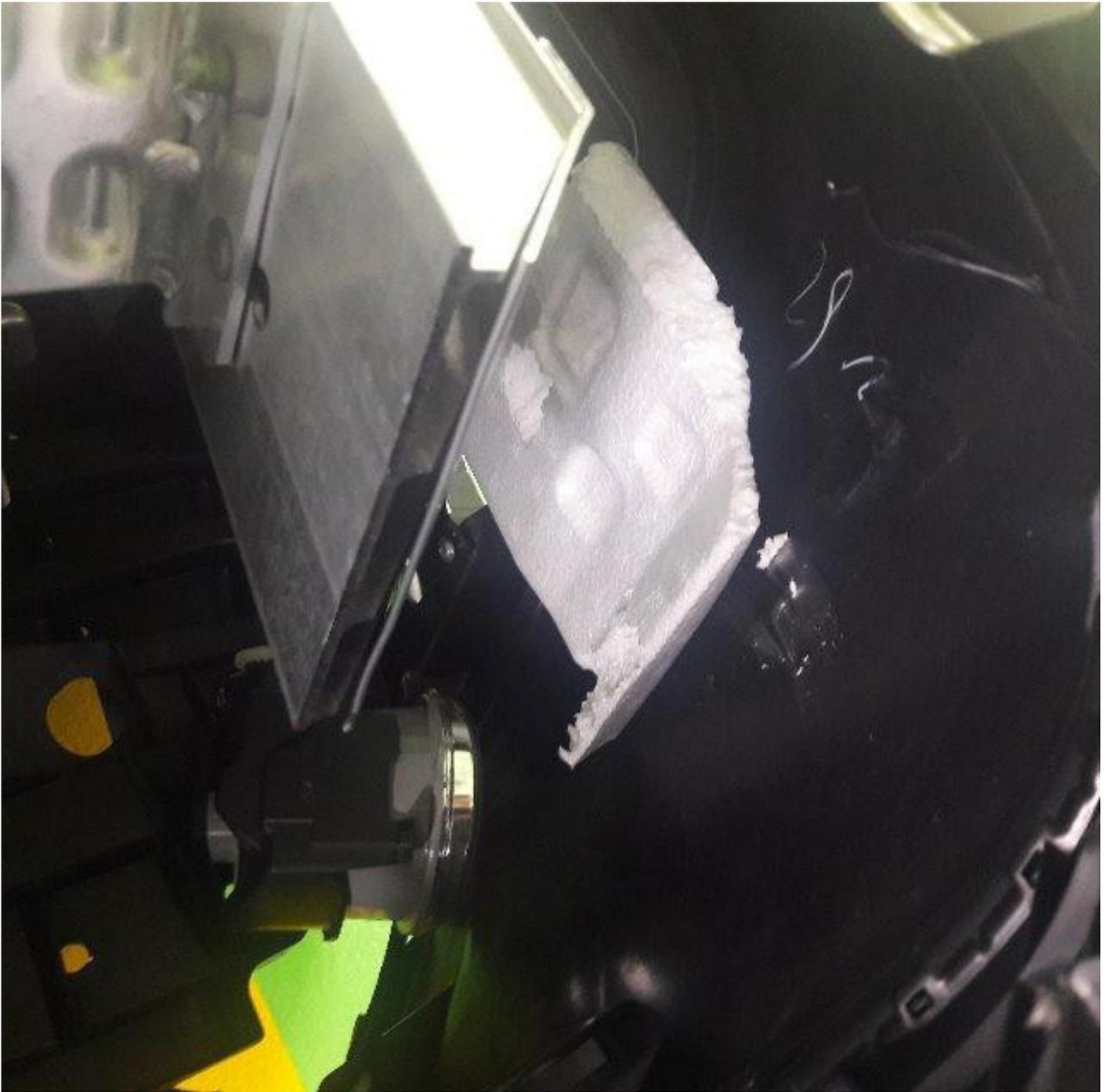
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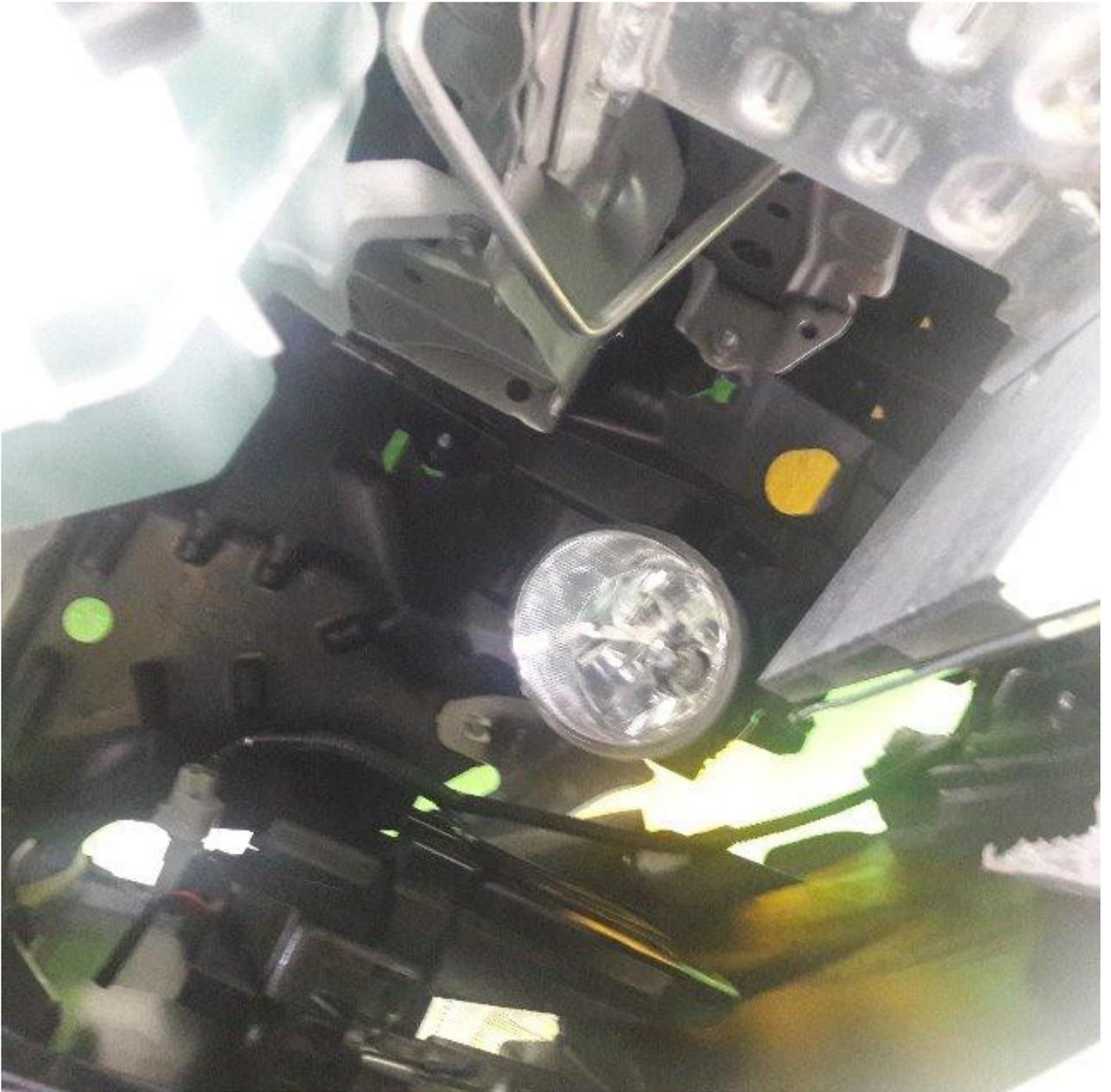
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