

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 18:07
Date Of Accident	14/03/2019 15:10
Exact Location Of Accident	NO. 28 TUAS AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ9566U
Insured/Policyholder	
Name Of Registered Owner	CHUA TECK YIN
NRIC No	S2596757G
Email Address	BRIAN-SINMS@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-86880018
Alternative Phone No	OFFICE-86880018

Vehicle Particulars

Manufacturer	HYUNDAI
Model	TUCSON LM-2.0 L ABS D/AB S/R (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	VA1 / GA350393
Cover Note Number	

Driver

Name of Driver	CHUA TECK YIN
NRIC No	S2596757G
Date Of Birth	20/05/1958
Occupation	INDOOR
Date Of Driving Pass	06/09/1982
Driving Experience	36 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	+65-86880018
Fax Number	
Contact Number	OFFICE-86880018
Email Address	BRIAN-SINMS@HOTMAIL.COM

Address	BLK 837 WOODLANDS ST.82 #01-245
Postcode	730837
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Refer to attachment

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO BIG
Was there any audio recorded?	NO

SKETCH PLAN

(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.

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Sketch Plan #2

SKETCH PLAN

Weather: Clear

Road: Dry.

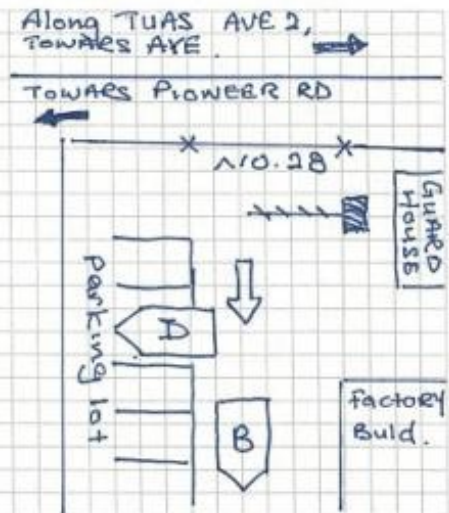
No. of PAX: 01 male.

Tel: 8688 0018.

Email: BRIAN_SINMS@HOTMAIL.COM.

A = SJZ 9566U.

B = GBE5848M.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 1) Before I reverse my vehicle SJZ 9566U. I've checked my blind spot. No visible vehicle present.
- 2) I reverse my vehicle (A) without accelerating. allowing my vehicle to roll back in auto mode.
- 3) Suddenly a Van GBE5848M. appear out of nowhere and swipe the rear of my vehicle (A).
- 4) Submitting 3rd party claim. against GBE5848M

DECLARATION

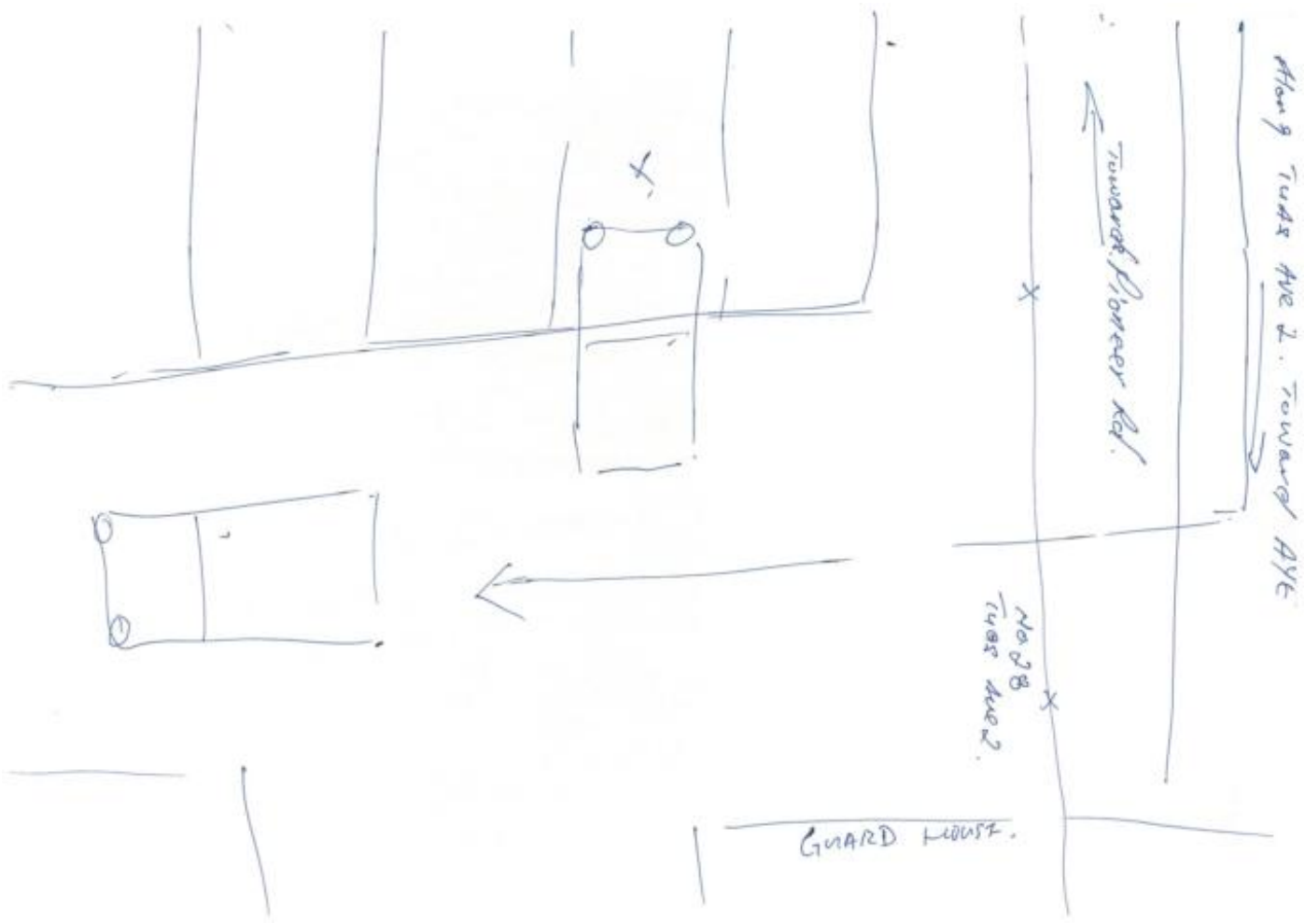
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 15.03.19.

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

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

Sketch Plan #3



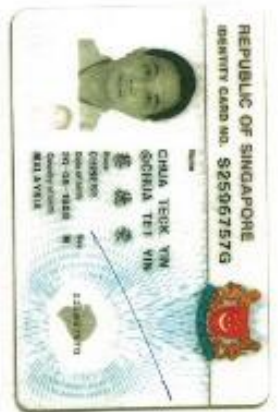
from the object

Report time only
332 95660.7

15.03.19.

Signature: _____

Date: 15th March '19



SJZ9566U Policy and Owner ID



SJZ9566U Policy and Owner ID



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



3rd Party driver GBE5848M







redefining / insurance

CHUA TECK YIN @ CHUA TET YIN
BLK 837 WOODLANDS STREET 82
#01-345
SINGAPORE 730837

AA Insurance Pte Ltd
1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
(65) 6880 4380
customerservice@aa.com.sg
www.aa.com.sg

New business

04/05
04/05/2018

your servicing distributor
IQ INSURANCE AGENCY PTE LTD /
02980

your servicing distributor contact
83349183

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name:	CHUA TECK YIN @ CHUA TET YIN	Policy number	VA1 / 04350893
Cover	Comprehensive	RN / NRIC	825967530
Period of Insurance	from 04/05/2018 to 03/03/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,113.99
Total Discounts	- SGD 59.39
Tax GST	SGD 73.82
Final Premium	SGD 1,128.42

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 09 Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Guaranteed Repairs for up to 1121 Months
- Loss or Damage
- Legal Liability

Vehicle details

Make & Model of Vehicle	HYUNDAI TUCSON 2.0 ILM 1 AUTO ABS Year of manufacture		2018
	D/AB 2WD GDR		
Vehicle registration number	SZ9169U	Type of Use	Private use
Body type	SUV	Engine capacity (cc)	1800
Seating capacity (each driver)	5	Engine number	G4WDAL013404
Off-Peak car	Not	Chassis number	KMH0181RM5U102690

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	MAYBANK

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

Basic Own Damage Excess	SGD 400.00
Windscreen Excess	SGD 100.00

Drivers details

AA Insurance Pte Ltd (196203512M)
8 Shenton Way, #24-01, AXA Tower
Singapore 068811
Customer Centre, 881-01



redefining / insurance

AXA Insurance Pte Ltd
 1300 550 4555 (Within Singapore)
 (65) 6386 1888 (International)
 (65) 6386 4748
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

Insurance Number:
 029660

Motor Vehicles (Third Party Risks and Compensation) Act, Chapter 186C - Motor Vehicle (Third Party Risks and Compensation) Rules, 1987. Road Transport Act, 1987 (Malaysia).
 Motor Vehicles (Third Party Risks) Rules, 1987 (Malaysia)

Policy details

Policyholder class	CHIA TEOH YIM @ CHIA TEOH YIN	Certificate number	04960892 / 1
Cover	Comprehensive	Chassis number	KMHU532M600026509
Plan name	Essential	Engine number	04K0AL013434
ACD applicable	50%		
Vehicle registration number	SJZ9566U		
Period of insurance	from 04/05/2018 to 16/07/2019 (both dates inclusive)		
Finance loan company	MAIDANY		

Persons or classes of persons entitled to drive*

- (1) The Policyholder
- (2) 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 prohibition or request or 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 one trade or business or use for any purpose in connection with motor trade, or when the Motor Car, whether stationary, in operation or in motion, is a racing track, circuit, public course or any other roads by whatever name called that are typically used for racing, pace-making or test driving purposes.

* Use for and intended inoperative by Section 3 of the Motor Vehicles (Third Party Risks and Compensation) Act, Chapter 186C and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	\$500 / \$20,000
	Windscreen Excess	\$500 / \$50,000

An Additional Excess is applicable as follows:

1. \$5,000 for a named Authorized Driver
2. \$15,000 for declared Young and Inexperienced Driver
3. \$35,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$52,000 if you have chosen AXA Premium Membership.

Additional clauses & endorsements to your policy

Nil

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 186C) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorized signatory

LQ INSURANCE AGENCY PTE LTD
 150B BENCOOLEN STREET
 #04-01 THE BENCOOLEN
 SINGAPORE 180648
 TEL: 6-734-0783 FAX: 6-334-0624
 Co. Reg. No: 1990255MAY

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance with the Policy to the Insurer's company. If the Certificate of Insurance has been lost or destroyed, a Surrender Certificate 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. 186C).

The Premium Waiver Clause requires the premium to be paid in full within a specified period during which a claim would be recoverable under the policy, whether such claim involves partial or total.

AXA Insurance Pte Ltd (199903512M)
 8 Stratford Way, #24-01, AXA Tower
 Singapore 068511
 Customer Centre: #8101



Details of 3rd party

3rd Party Claim

Accident Reporting Checklist

<input type="checkbox"/>	Sketch Plan (fill up & signed by car owner/driver)	
<input type="checkbox"/>	Letter of Authorisation (signed by owner/driver)	
<input type="checkbox"/>	Photocopied Car Owner NRIC (Coloured)	
<input type="checkbox"/>	Photocopied Drivers NRIC (Coloured)	
<input type="checkbox"/>	Photocopied Car Owner Driving License (Coloured)	
<input type="checkbox"/>	Photocopied Drivers Driving License (Coloured)	
<input type="checkbox"/>	Photos or Video Clips (if any)	
<input type="checkbox"/>	Insurance Certificate	
<input type="checkbox"/>	Handphone No	
<input type="checkbox"/>	Email Address	
<input type="checkbox"/>	No. of Pax in Car (including Driver)	
<input type="checkbox"/>	Road Condition	
<input type="checkbox"/>	Weather Condition	

Wet / Dry / Others: _____
 Fog / Rain / Others: _____

Sketch Plan (2pages)

Information to include

- * Customer to sketch out accident
- * Describe accident in words, including
- ☐ Date:
- ☐ Time:
- ☐ Place: (Exact location)
- ☐ I was driving my car (vehicle no:--)
- ☐ Number of cars involve

Information of everyone involve in the accidents

<input type="checkbox"/>	Name: GOL YONG KEE
<input type="checkbox"/>	NRIC No: 6769885X
<input type="checkbox"/>	Phone No: 83958033
<input type="checkbox"/>	Car Plate No: 6E6S248M

* Supervisor: cfm 82684604

SJZ9566U



SJZ9566U



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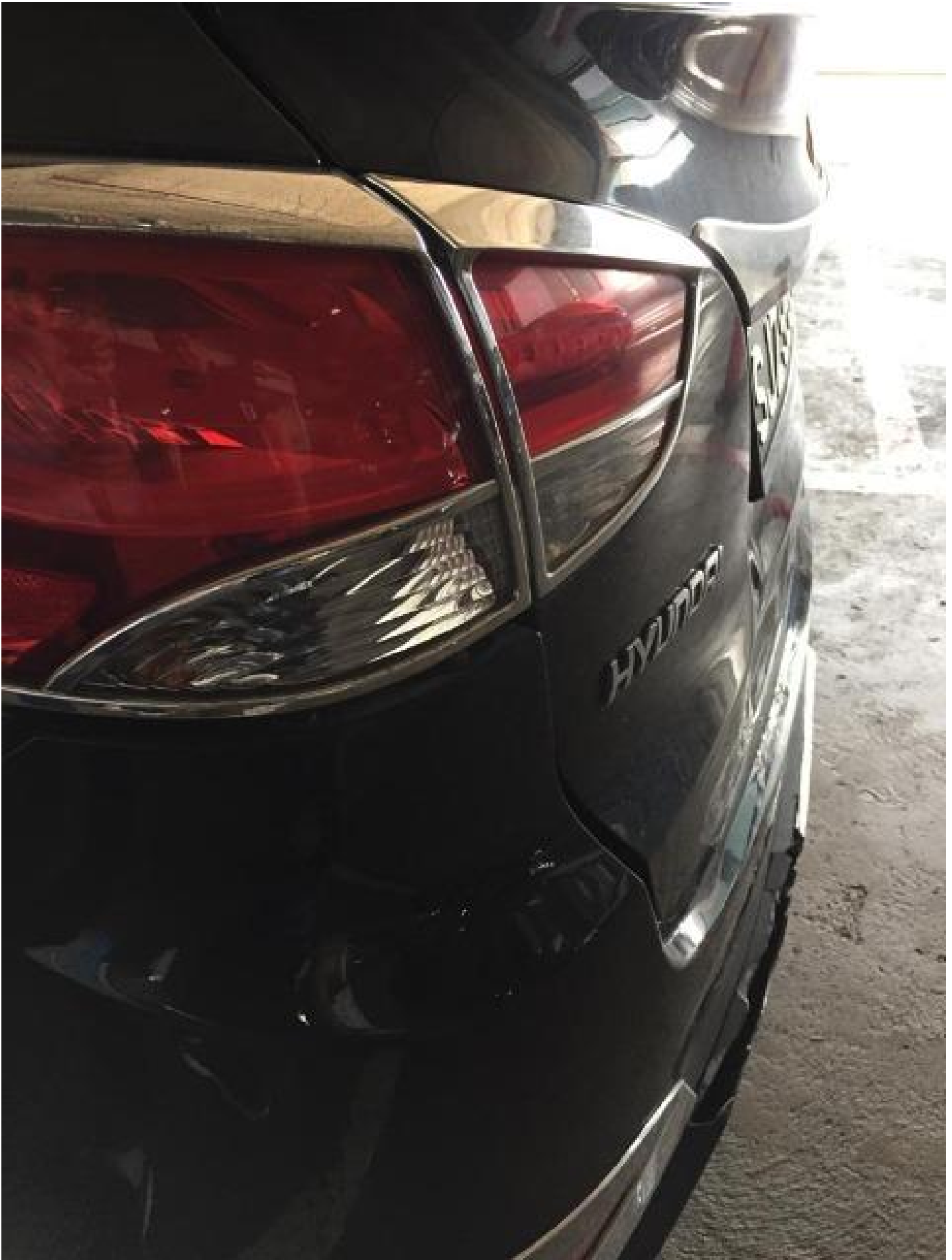
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SJZ9566U



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S65500296 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: SJZ 95664
Name (as shown in NRIC): CHUA TECK YIN NRIC/FIN/Passport No: S25967576
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 831 WOODLANDS ST. B2 #01-245 Singapore 730837
Contact (Tel) : _____ Mobile No.: 8688 0018
Email Address : BRIAN_SINMS@HOTMAIL.COM
Date of Accident : 14/03/2019 Time of Accident : 15:10 HRS.
Place of Accident : NO. 28 TUAS AVE
Insurance Company: AxA

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To add vehicle damage part picture.

Policyholder / Driver's Signature
Date: 18.03.19

Reporting Centre Personnel's Signature
Name: ERNEST LEE T-H
NRIC/FIN No.: S7302225H
Date: 18.03.19