

## 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	11/04/2019 11:26
Date Of Accident	10/04/2019 14:25
Exact Location Of Accident	BT BATOK RD (SLIP RD TWDS BT BATOK WEST AVE 5)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE7189A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ANG MEI LAN
NRIC No	S7935050H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96807735
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	GA238836
Cover Note Number	

### Driver

Name of Driver	WONG WEE LIN DAVE
NRIC No	S7670756A
Date Of Birth	11/10/1976
Occupation	INDOOR
Date Of Driving Pass	04/09/1998
Driving Experience	20 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81806918
Fax Number	
Contact Number	
Email Address	DSGADVISORY@YAHOO.COM.SG

Address	3A WOODLANDS ROAD #07-16
Postcode	677727
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 - 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?	
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	QUEENSTOWN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> NO. 15 COMMONWEALTH AVENUE , <b>POSTCODE:</b> 149725 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4719999 - <b>FAX NO:</b> 64715299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO SKETCH AND POLICE REPORT ATTACHED

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKT4590B
Vehicle Make/Model/Colour	HONDA JAZZ SLIVER (BBDC)
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PRAISE MAJESTY DE HAMEL
NRIC/Passport Number	S9501430E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: : INSTRUCTOR

GENDER: : MALE

**SKETCH PLAN**

**IMPORTANT NOTICE**

VEHICLE NO: 8CE7189A  
ACCIDENT DATE: 10/4/19

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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.

**NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.**

Policyholder's Signature  
Date & Time:

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

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

### SKETCH PLAN

Bt Bertok West Ave 5

SKT 4590B

SLE 7189A

Bt Bertok Road

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to attached ~~statement~~ police report.

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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

CHARN'S CUSTOMCRAFT

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

Letter of Authority

I, Ang Mei Lan of NRLC no: S79350504  
authorized Wong Wei Lin Dave S7670756A  
to file an accident report for  
vehicle no. SLE7189/A happened on  
10 April 2019.

Name: Ang Mei Lan

NRK: S79350504

Signature: 

Annex E

NOTICE OF REPORTING

This is to confirm that Name: Wong Wee Lin Dave, NRIC No: S7670756A,  
Contact number: 81806918 had reported to the Police a non-injury traffic accident which  
occurred at along Bukit Batok Road at the slip road towards Bukit Batok West  
Avenue 5 on 10/04/2019 at about 2.45pm involving the following vehicles:

- SLE 7189A
- SKT4590B


On 10/04/2019 at 1415hrs, I was driving my car SLE7189A along Bukit Batok Rd. I  
drove to towards the slip road on the left leading towards Bukit Batok West Avenue  
5. There was a car SKT4590B in front of my car. As I saw the oncoming vehicles  
being cleared, I moved my car after seeing the car in front of me started to move. As  
I was looking on my right to check the oncoming vehicles, I moved my car and hit  
the rear of the car in front of it. Nobody was injured.

2 If this accident was reported to the Police within 24 hours of its occurrence, then  
he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSSGT Sureind Mishra  
Date: 11/04/2019 Time: 0856hrs

S/D Ref: 16

Police Post/Unit: Queenstown NPC

  
Queenstown  
Neighbourhood Police Centre  
No 3 Queensway #01-03  
Singapore 149073



redefining / insurance

Date:

11/4/19

To: Owner of Vehicle Number:

SLE7189A

CHARN'S CUSTOMCRAFT

The following has been advised to you via your workshop, through their staff, SHARON / RINA / KELLY

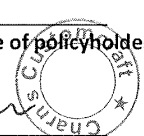
Please tick the applicable box if you had been advice on the content as seen below:

- ☒ You had been advised by the workshop that in the case 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.
- ☒ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☒ The estimated waiting time for the spare parts to arrive is 1 BRT. 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 that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☒ Others Excess: \$400 + 7% GST.

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

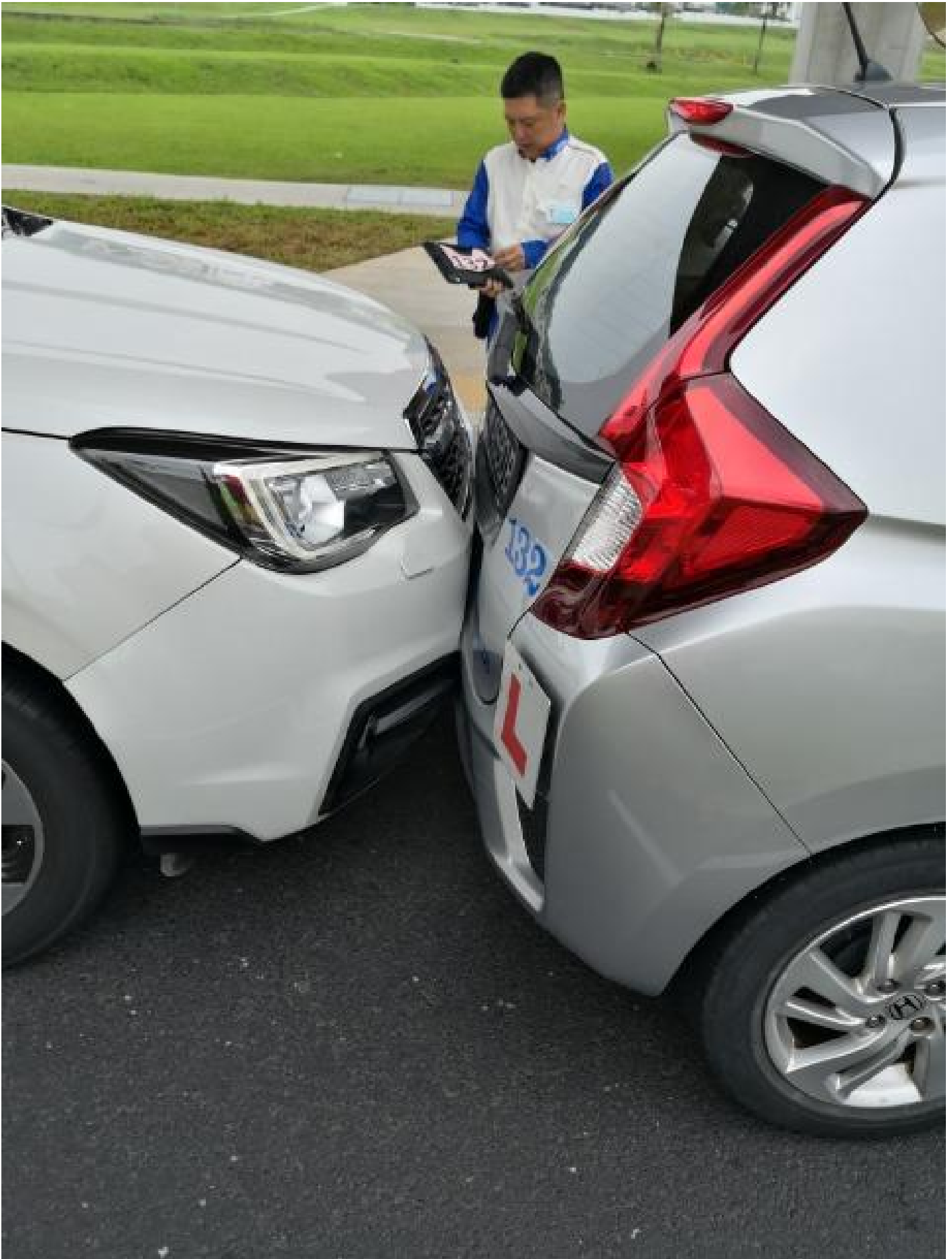
Name and signature of workshop personnel including company stamp



Deadline  
22/4/19



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



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