



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 17/04/2019 11:02
Date Of Accident 16/04/2019 18:45
Exact Location Of Accident CORPORATION RD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLS1823T
Insured/Policyholder
Name Of Registered Owner KHOO KHEE TECK RONNIE
NRIC No S1539141C
Email Address RONNIEKHOO@ICLOUD.COM
Mobile Phone No (LOCAL) +65-96674866
Alternative Phone No OTHERS-96674866

Vehicle Particulars

Manufacturer VOLKSWAGEN
Model GOLF 7

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 GA393831/1
Cover Note Number

Driver

Name of Driver KHOO KHEE TECK RONNIE
NRIC No S1539141C
Date Of Birth 28/01/1962
Occupation INDOOR
Date Of Driving Pass 25/05/1983
Driving Experience 35 YEARS AND 10 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-96674866
Fax Number
Contact Number OTHERS-96674866
Email Address RONNIEKHOO@ICLOUD.COM

AXA
Vs
?
FIRST CAPITAL.

Address	52 BUKIT BATOK EAST AVE 5 #24-02
Postcode	659802
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	CHAIN COLLISION
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	4
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

REFER TO SKETCH PLAN

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	SHC3977B
Vehicle Make/Model/Colour	TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	SONG EE CHIN
NRIC/Passport Number	S2538461Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YP2297S
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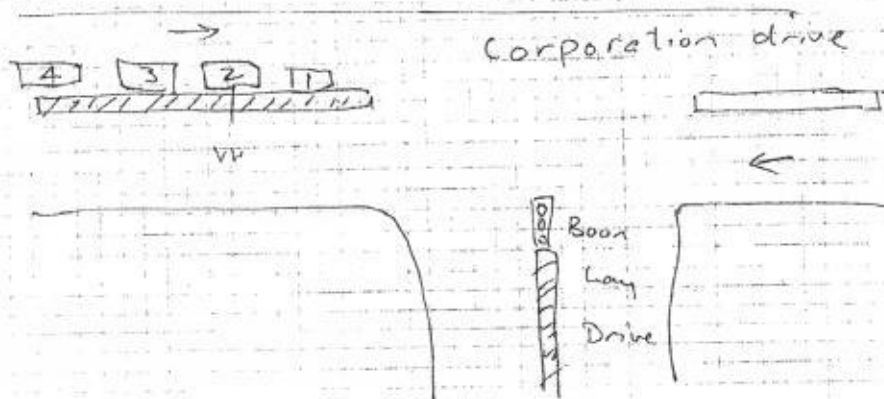
<input checked="" type="checkbox"/> Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	ROSLEE BIN KASBAN
NRIC/Passport Number	S1816580E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBA7894L
Vehicle Make/Model/Colour	
Details Of Properties	1ST VEHICLE IN FRONT
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TAN CHING SAN
NRIC/Passport Number	F7933053K
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1st Van GBA 7894L, driver Mr. Tan Ching San (Licence no. F7933053K)
 2nd Car S6S 1823T
 3rd Car SHC 3977B, driver Mr. Song Ee Chui (Licence no. S25384612)
 4th Lorry YP 2297S, driver Mr. Rostee Bin Kasban (I/C no. S1816580E)

My car being the 2nd car was at complete stop waiting for traffic to turn green to turn right towards Boon Lay Drive. A Lorry (4th position) suddenly hit a Taxi (3rd position) and in turn ram into my car. This caused my car to jerk forward and hit the van (1st position)

Weather condition - Fair

Road surface - dry

Time of accident - 1830hrs

Date of accident - 16th April 2019

DECLARATION

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

17th April 19
 1115hr

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.:

17 APR 2019