

## 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	23/04/2019 18:20
Date Of Accident	23/04/2019 09:45
Exact Location Of Accident	DUNEARN ROAD TOWARDS CITY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ4954B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	VIJAY KUMAR SHARMA
NRIC No	S2727440D
Email Address	MDCVKS@NUS.EDU.SG
Mobile Phone No	(LOCAL) +65-91389555
Alternative Phone No	OFFICE-91389555

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER-1.6 CVT SPORTS GLX (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?	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	GA164365
Cover Note Number	

### Driver

Name of Driver	DEEPANSH
NRIC No	S9573663G
Date Of Birth	10/04/1995
Occupation	INDOOR
Date Of Driving Pass	16/08/2016
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92363323
Fax Number	
Contact Number	
Email Address	DEEPANSHBHANU@YAHOO.COM

Address	44, CHOA CHU KANG STREET 64, #04-17
Postcode	689105
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	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 ATTACHED SKETCH & STATEMENT

#### Attachment(s)

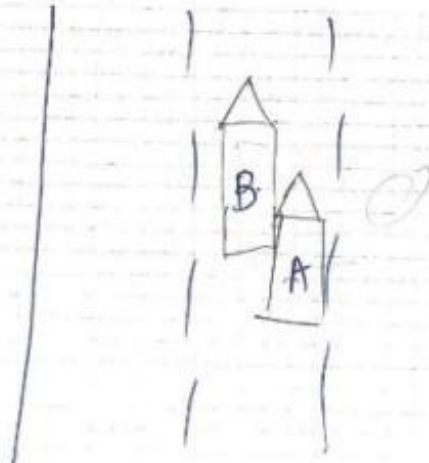
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SCQ23J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM TECK KIM
NRIC/Passport Number	S1693146B
Contact Number	90722292
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Accident Sketch Plan

## SKETCH PLAN



A: SLJ 4954B

B: ~~SLJ~~ SCQ 23J

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was behind him and looking to change lane to the right-most lane. I looked to my right to check my blind spot. When I looked forward, he was almost right in front. I swerved to the right to avoid him when the collision happened. Due to the traffic, we moved to the side of the road to exchange particulars & we were unable to take photos of where the accident happened exactly.

\*IMPORTANT NOTE: You had been advised by the workshop that in the event that you wish to claim against your own policy (Own Damaged Claim), there is a FOURTEEN (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

☐ Reporting Only ☐ Own Damage ☐ Third Party ☐ Claim at other workshop (OD/TP)

## 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:

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

## Individual Statement

### SKETCH PLAN

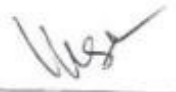
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

#### **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.

  
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.:



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

account number  
 11618

## Certificate of Insurance

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	VUJAY KUMAR SHARMA	Certificate number	GA164365 / 1
Cover	Comprehensive	Chassis number	JMYTCS3A9K003148
Plan name	Essential	Engine number	4G18KA9828
NCD applicable	20%		
Vehicle registration number	SLJ4954B		
Period of Insurance	from 25/02/2019 to 24/02/2020 (both dates inclusive)		
Finance loan company	Nil		

### 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 8 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
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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 the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 189). The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.



AXA Insurance Pte Ltd (199903512M)  
 8 Shenton Way, #24-01, AXA Tower,  
 Singapore 068811  
 Customer Centre, #B1-01

1 of 2



Owner's Identification Card & Licence (F)

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S2727440D**



Name  
**VIJAY KUMAR SHARMA**


Race  
**INDIAN**

Date of birth  
**01-01-1959**


Sex  
**M**

Country/Place of birth  
**INDIA**

**S2727440D**




**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **S2727440D**  
Name: **VIJAY KUMAR SHARMA**

Birth Date: **01 Jan 1959**  
Issue Date: **20 Oct 2006**



**001453647G**

Owner's Identification Card & Licence (B)

5781701



NRIC No. **S2727440D**



Date of issue  
**08-08-2017**

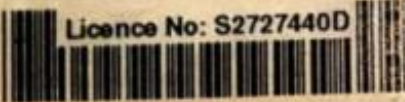
Address  
**44 CHOA CHU KANG STREET 64  
#04-17  
SINGAPORE 689105**

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

		PASS DATE
Class 2B	Motorcycles =< 200 cc	20 Oct 2006
Class 3	Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	20 Oct 2006



NP 428A

Licence No: **S2727440D**



Driver's Identification Card & Licence (F)

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S9573663G**



Name  
**DEEPANSH**


Race  
**INDIAN**

Date of birth  
**10-04-1995**

Sex  
**M**

Country/Place of birth  
**INDIA**

**S9573663G**





**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S9573663G**

Name:  
**DEEPANSH**

Birth Date: **10 Apr 1995**

Issue Date: **16 Aug 2016**



002599474B



Driver's Identification Card & Licence (B)

5781777



NRIC No. **S9573663G**



Date of issue  
**08-08-2017**


Address  
**44 CHOA CHU KANG STREET 64  
#04-17  
SINGAPORE 689105**

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

	<b>EFFECTIVE DATE</b>
<b>Class 3A</b> Motor cars without clutch pedals (Auto) with unladen weight $\leq 3000\text{kg}$ with $\leq 7$ passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight $\leq 2500\text{kg}$	<b>16 Aug 2016</b>

NP 428A

Licence No: **S9573663G**



Accident Scene Photo 1



Accident Scene Photo 2



Accident Photo 1





Accident Photo 2



Accident Photo 3



Accident Photo 4





Accident Photo 5





Accident Photo 6



Accident Photo 7



Accident Photo 8



## Odometer





## Chassis

