

## 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	09/05/2019 15:02
Date Of Accident	08/05/2019 15:45
Exact Location Of Accident	IKEA CARPARK 60 TAMPINES NORTH DR S.528764
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6363B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG KOK CHYE
NRIC No	S1337925D
Email Address	OKC6363@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97356363
Alternative Phone No	OTHERS-97356363

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER-2.0 (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	GA377092/1
Cover Note Number	

### Driver

Name of Driver	ONG KOK CHYE
NRIC No	S1337925D
Date Of Birth	18/05/1958
Occupation	INDOOR
Date Of Driving Pass	16/12/2002
Driving Experience	16 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97356363
Fax Number	
Contact Number	OTHERS-97356363
Email Address	OKC6363@GMAIL.COM

Address	532 JOO CHIAT ROAD #06-03 PARC SEABREEZE
Postcode	427711
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	INDOOR CAR PARK
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)	2
Passenger 1	NAME: : TAN MUI KIW GENDER: : FEMALE

#### 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	SME3358T
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	FRONT BUMPER & BONNET
Vehicle Category	PRIVATE CAR
Name of Driver	HAMIMAH BINTE ISMAIL
NRIC/Passport Number	S7527808Z
Contact Number	97117241
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	
No. Of Passenger (Including Driver)	4

Passenger 1	NAME:	:
	GENDER:	:
Passenger 2	NAME:	:
	GENDER:	:
Passenger 3	NAME:	:
	GENDER:	:

## Accident Sketch Plan

### SKETCH PLAN

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6. The 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.
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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.





*[Signature]*

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

#### Sketch Plan

		
<p>A: 3LR636SB B: 3ME3358T</p> 		

## Accident Sketch Plan

### Describe Circumstances of the Accident


Vehicle A ~~felt~~ had misjudge the wrong carpark lot entrance and decided to ~~reverse~~ correct his vehicle, by reversing. After checking the rear mirror for blind spot, he reversed and hit onto an oncoming vehicle B ~~from his back~~, from his back.

### Declaration

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

  
Witnessed by Reporting Centre Personnel



ONG KOK CHYE  
57 SIMEI RISE  
#09-54  
SINGAPORE 528792

#### Renewal

date  
19/07/2018

your servicing distributor  
INCHCAPE AUTOMOTIVE SERVICES PTE.  
LTD. / 14885

your servicing distributor contact  
8631 1000

## Policy Schedule

### Your SmartDrive Comprehensive Toyota Prestige

#### Your policy at a glance

Policyholder name	ONG KOK CHYE	Policy number	VA1 / GA377092
Cover	Comprehensive	FIN / NRIC	S1337925D
Period of insurance	from 25/07/2018 to 24/07/2019 (both dates inclusive)		

#### Premium breakdown

Gross Premium after 50% NCD	SGD 1,492.52
7% GST	SGD 104.48
<b>Final Premium</b>	<b>SGD 1,597.00</b>

#### Your benefits highlights

(refer to Policy Wording for full terms and conditions)

#### SmartDrive Comprehensive Toyota Prestige Benefits

- Loss or Damage
- Legal Liability
- Windscreen coverage with no Excess
- 24/7 Towing & Transportation in Singapore or Overseas
- Repairs at Distributor Workshop BORNEO MOTORS (SINGAPORE) PTE LTD
- Guaranteed Repairs for twelve (12) Months
- Medical and dental expenses up to \$1,500 per person for you, your named drivers and your immediate family members
- Personal Accident Benefits to Insured - Limit of Liability: S\$100,000
- Personal Accident Benefits to Drivers at \$20,000 each and Passengers at S\$10,000 each
- New for Old Replacement - up to 24 months from vehicle registration date
- Up to 15 Days Courtesy Car
- Loss of personal items in the car - up to S\$3,000
- Phone Assistance and Roadside Support
- Fixtures and Accessories (Solar Film)
- Hotel accommodation for one (1) night up to \$300

#### Add-on Benefits

- Designed to protect NCD

#### Vehicle details

Make & Model of Vehicle	TOYOTA HARRIER 2.0 TURBO	Year of registration	2017
Vehicle registration number	SLR6363B	Type of Use	Private use
Body type	SUV	Engine capacity (c.c.)	1986
Seating capacity (excl driver)	4	Engine number	8ARZ086858
Off-Peak car	No	Chassis number	JTEKB3GH90J000178

Insured's Estimated Market Value  
Limitation to use  
Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts)  
As per Certificate of Insurance  
UNITED OVERSEAS BANK LIMITED

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

1 of 2

## Identification Card & Driving Licence



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1337925D**



Name: **ONG KOK CHYE**  
**翁國財**

Race: **CHINESE**

Date of Birth: **18-05-1958**

Sex: **M**

Country of Birth: **SINGAPORE**





Accident Photo





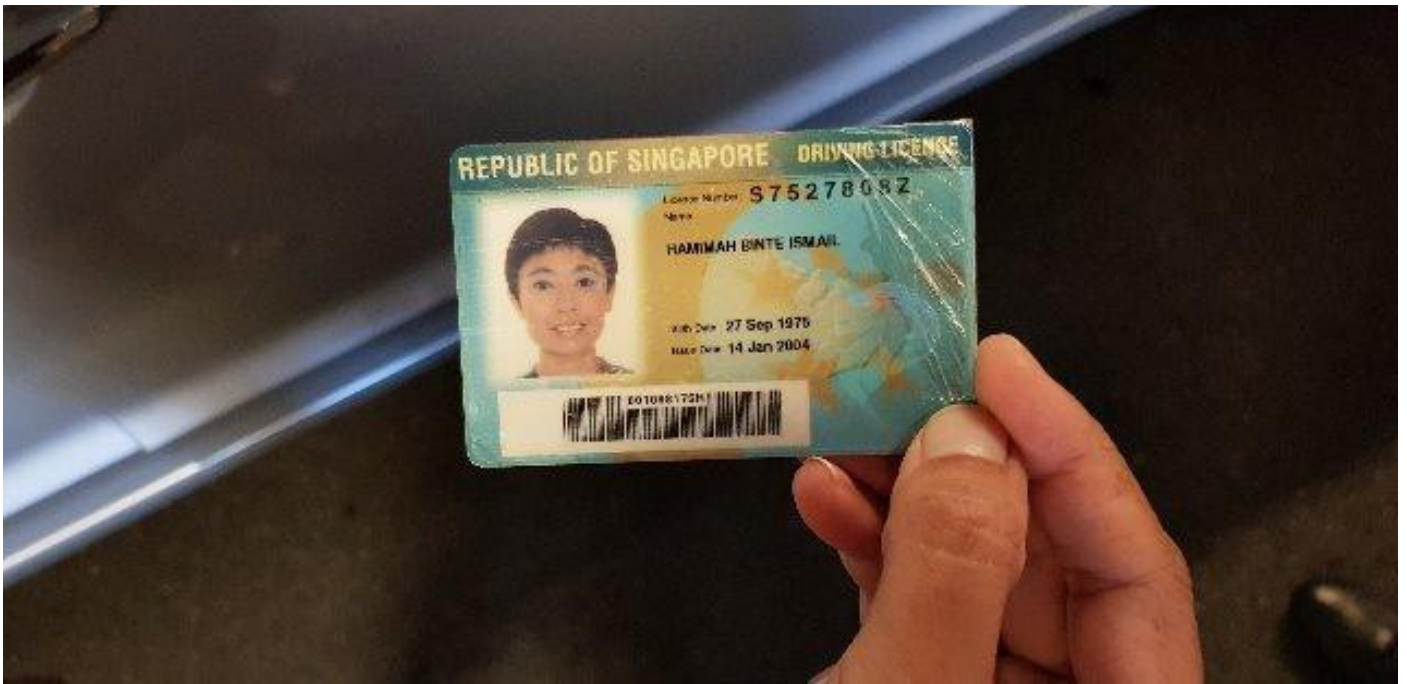
Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

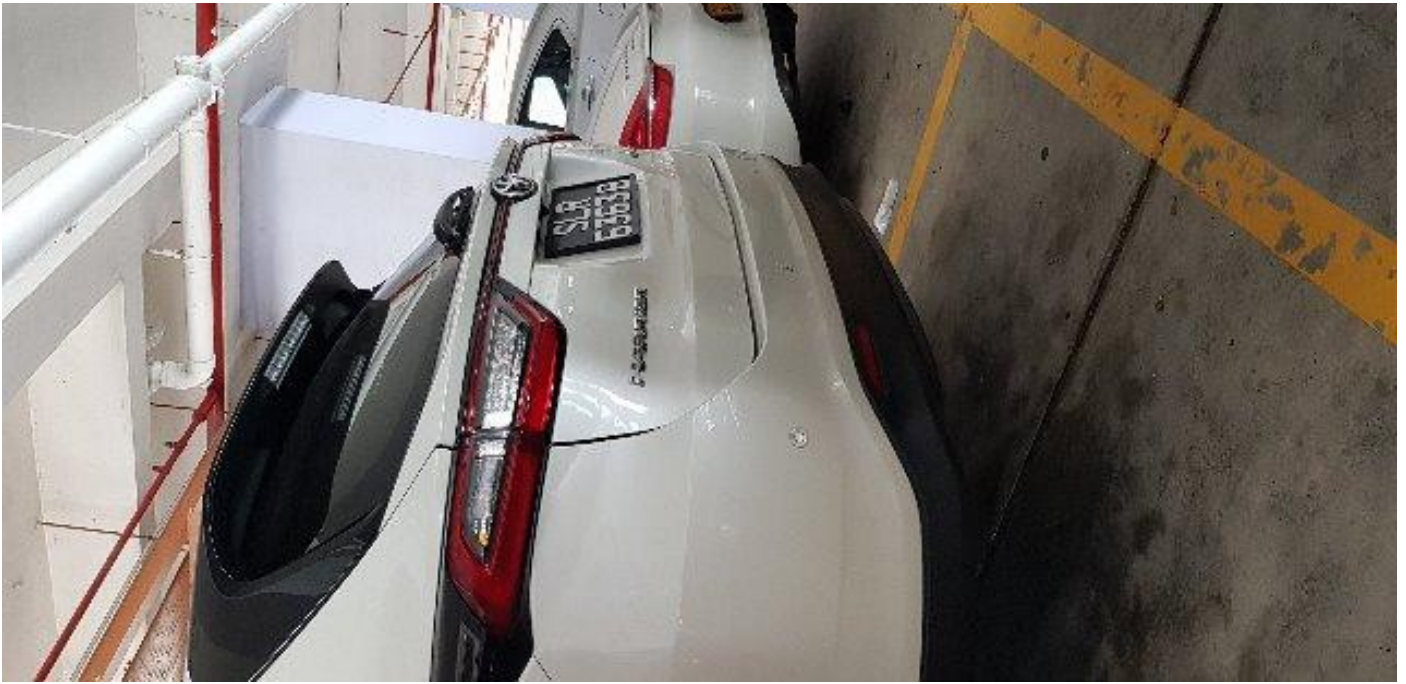


Accident Photo





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