

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	15/05/2019 14:01
Date Of Accident	15/05/2019 09:15
Exact Location Of Accident	ALONG KPE TOWARDS MCE (4.9KM)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKJ4079P
Insured/Policyholder	
Name Of Registered Owner	TAN POH HENG JUSTINA
NRIC No	S8513290C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97760698
Alternative Phone No	OFFICE-97760698

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	VPA/P1357752
Cover Note Number	

Driver

Name of Driver	THAM CHEE ONN TERENCE
NRIC No	S8632133E
Date Of Birth	11/11/1986
Occupation	INDOOR
Date Of Driving Pass	06/05/2010
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96522964
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	314A PUNGGOL WAY #16-617 S 821314
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	5
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)	4
Passenger 1	NAME: : TAN POH HENG JUSTINA GENDER: : FEMALE
Passenger 2	NAME: : COEN THAM YU JIE GENDER: : MALE
Passenger 3	NAME: : ELLIE THAN YU TING 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

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER CSE KO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS464C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOH WAN YI
NRIC/Passport Number	

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLJ3368A
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver BENNY FOO
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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. 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 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 15/05/2019 1135



Driver's Signature

(If driver is not the policyholder)

Date & Time 15/05/2019 1135

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarrriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

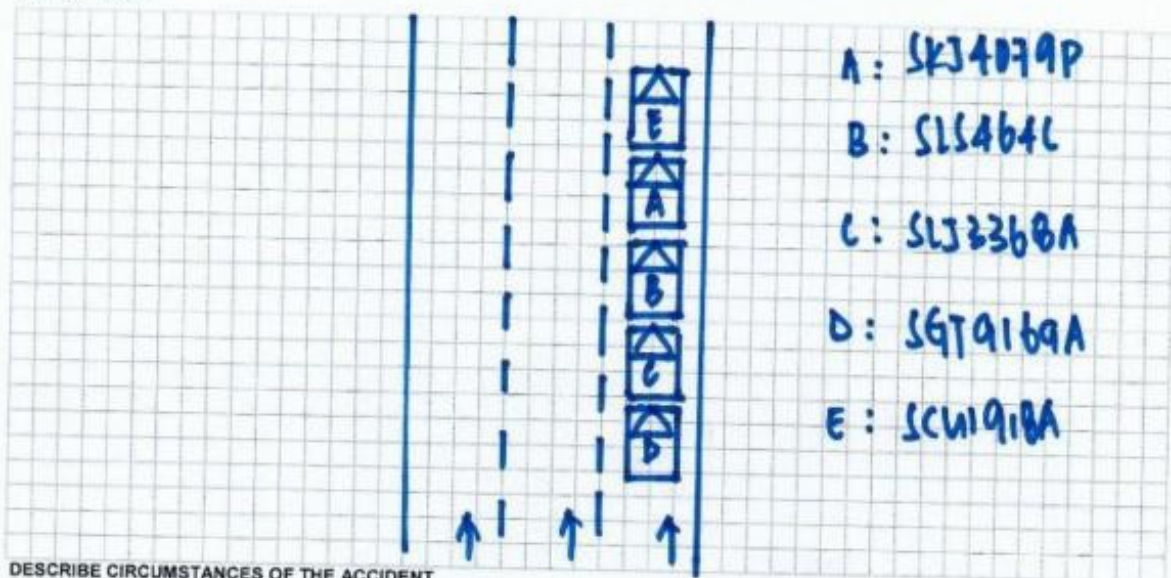
Reporting Centre Personnel's

Name: KERLYN

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING MY CAR (SKJ4079P) ALONG KJE TOWARD MCE. I WAS TRAVELLING AT THE EXTREME RIGHT LANE AND HAD CAME TO STOP.

AS I STOPPED MY CAR, VEHICLE B (SLS464C) CAME FROM THE REAR HAD COLLIDED ONTO MY REAR PORTION. THE IMPACT WAS SO HUGE THAT MY CAR WAS BEING PUSHED FORWARD AND COLLIDED ONTO VEHICLE E (SCU1918A) REAR PORTION.

I WAS INVOLVED WITH 5 CAR CHAIN COLLISION.

VEHICLE D: SGT9169A (SRINIVASAN)
VEHICLE E: SCU1918A (TOH CHEN TAT)

DECLARATION


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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)



Policyholder's Signature
Date & Time 15/05/2019 1135



Driver's Signature
(If driver is not the policyholder)
Date & Time 15/05/2019 1135

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

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

Accident Sketch Plan

AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Centre #01-21
Tel: 1800 8804888 Fax:-
Website: www.axa.com.sg
GST Registration Number: 199903512M
customer.care@axa.com.sg



Private Cars COMP
POLICY SCHEDULE
RENEWAL
Original

POLICY INFORMATION		Policy No. : VPA/PI357752
Source	: (03) 04031 PINEXIS ADVISORY PTE LTD	
Insured	: TAN POH HENG JUSTINA	
Address	: BLK 114 LORONG 3 GEYLANG #02-55 SINGAPORE 381114	
Business/Profession	: BUSINESS ANALYST Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance	: From 28/03/2019 To 27/03/2020 (Both Dates Inclusive)	
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.		
PREMIUM		
Premium After 50.00% NCD	: SGD 1,077.82	
GST 7.00%	: SGD 75.45	
Annual Premium	: SGD 1,153.27	
Total Payable	: SGD 1,153.27	
RISK DETAILS THE MOTOR VEHICLE		
Type Of Cover	: Comprehensive	
Regn No.	: SKJ4079P	
Type Of Use	: Private Car	
Make/Model	: MERCEDES C180 BLUEEFFICIENCY	
Year of Manufacture	: 2012	Seating Capacity (excl. Driver) : 04
Body Type	: SALOON	Engine C.C. : 1595
Engine No.	: 27491030030636	
Chassis No.	: WDD2040312A810298	
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)	
Limitations as to Use	: As specified in Certificate of Insurance	
Hire Purchase	: MERCEDES-BENZ FINANCIAL SERVICES (S) LTD	
Basic Own Damage Excess	: SGD 400.00	
Named Drivers		
1 TAN POH HENG JUSTINA		
2 THAM CHEE ONN TERENCE		
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS		
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:		
VPA LUPA		

Accident Sketch Plan

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S863213E

Name: THAM CHEE ONN, TERENCE

Birth Date: 11 Nov 1986

Issue Date: 06 May 2010

001053510H

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8632133E

Name: THAM CHEE ONN, TERENCE

譚智安

Race: CHINESE

Date of Birth: 11-11-1986

Country/Place of Birth: SINGAPORE

Sex: M

88632133E

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

Class 5 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg

PASS DATE: 06 May 2010

NP 428A

Licence No: S8632133E

FOR C&C USE ONLY

5748811

S8632133E

Date of issue: 29-05-2017

Address: APT BLK 314A PUNGGOL WAY #10-017 SINGAPORE 821314

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

