### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	28/05/2019 12:16
Date Of Accident	28/05/2019 09:35
Exact Location Of Accident	THOMSON RD
Country/State of Loss	SINGAPORE
1	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK7675T
Insured/Policyholder	
Name Of Registered Owner	LIM BOON KHENG
NRIC No	S1754899I
Email Address	BOONKHENG@CSE-GLOBAL.COM
Mobile Phone No	(LOCAL) +65-98501491
Alternative Phone No	OTHERS-98501491
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	SHARAN SUCC. HL 147 TSID6F
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
B !!	VD 4 (D 4 4 5 4 4 4

Policy Number VPA/P1415414

Cover Note Number

**Driver** 

Name of Driver LIM BOON KHENG

NRIC No S1754899I
Date Of Birth 26/09/1966
Occupation INDOOR
Date Of Driving Pass 02/11/1996

Driving Experience 22 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98501491

Fax Number

Contact Number OTHERS-98501491

EMail Address BOONKHENG@CSE-GLOBAL.COM

Address 10 JALAN BINCHANG

Postcode 578587

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

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

Was any other material or property damaged? NO

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 3

Passenger 1

NAME: : MAUREEN CHIA

GENDER: : FEMALE

Passenger 2 NAME: : RENEE LIM

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?

If Yes, against whom?

NO

**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?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SFX6628C

Vehicle Make/Model/Colour VW

**Details Of Properties** 

PRIVATE CAR WOO FOOK WAH

NRIC/Passport Number S1471872I

Contact Number

Vehicle Category Name of Driver

Address Postcode

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Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SLJ4110U
Vehicle Make/Model/Colour VW

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver DAPHNE WEE LII KIM

NRIC/Passport Number S7811997G

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

SKETCH PLAN
Thomson Road.
SFX6628C SKK7675T SCJ41104
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
Vas travelling along Thomson Road south bound, When Sij41104 stopped and I jammed my brake (SKK76787) and then SFX 6628C. Then banged into my car back and the cor move forward to hit SZJY1104
Passenger Moureen Chia (Femole)  Rence Lim (Femole)
SFX6628C Woo Fook Wah S14718721 SLJ4110U Daphae Daphae Wee Lii Kim 578119976.
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:  Name:  NRIC/FIN No.:  28 MAY 2019

#### Sketch Plan Pg. 2

### SKETCH PLAN

#### **IMPORTANT NOTICE**

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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 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)
  - (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

SUB MAY SOLD

Date & Time:

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

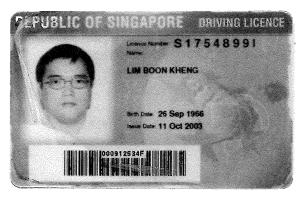
Reporting Centre Personnel's Signature Name:

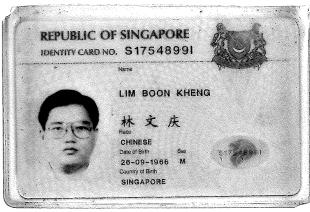
NRIC/FIN No .:

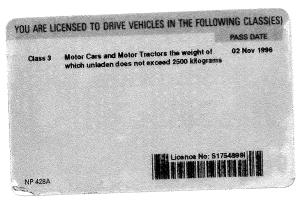
2 R MAY 2019

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## Sketch Plan Pg. 3









AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Service Centre #B1-01
Tel:(65)63387288 Fax:(65)63382522
Website:www.axa.com.sg
GST Registration Number: 199903512M
customer.service@axa.com.sg



Private Cars COMP
POLICY SCHEDULE
RENEWAL
Original

POLICY INFORMATION Policy No. : VPA/P1415414

Source : (01) 13820 ARF AP) PTE LTD(VW-ENHANCED)

Insured : LIM BOON KHENG

Address : 10 JALAN BINCHANG

SINGAPORE 578587

Business/Profession : MANAGING DIRECTOR

Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.

Period of Insurance : From 29/08/2018 To 28/08/2019 (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%: SGD 1,114.08

NCD

Prem W/Shop Disc: SGD 167.11

15.00%

Extra Coverage : SGD 50.00 Safe Driver Disc: SGD 58.20

5.00%

GST 7.00% : SGD 65.71

Annual Premium : SGD 1,004.48

Total Payable : SGD 1,004.49

RISK DETAILS THE MOTOR VEHICLE

Type Of Cover : Comprehensive

Regn No. : SKK7675T

Type Of Use : Private Car

Make/Model : VOLKSWAGEN SHARAN 2.0 TSI

Year of Manufacture : 2013 Seating Car

Year of Manufacture : 2013 Seating Capacity (excl. Driver) : 06

Body Type : MULTI - PURPOSE VEHICLE Engine C.C. : 1984

Engine No. : CCZ385082

Chassis No. : WVWZZZ7NZEV003344

Insured's Estimated : Market Value At The Time Of Loss

Market Value (including Accessories and Spare Parts)

Limitations as to Use: As specified in Certificate of Insurance

Extra Coverage (Premium Breakdown) Limits (SGD) Premium (SGD)

Fixtures and accessories NCD Protector

VW Replacement Car-Loss of Use

Basic Own Damage Excess : SGD

Named Drivers

1 LIM BOON KHENG

50.00

