

## 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	03/06/2019 11:09
Date Of Accident	02/06/2019 14:30
Exact Location Of Accident	AFTER EXISTING 26B OF PIETURN LEFT TO BUKIT TIMAH
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP5482U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AN BO
Passport No/FIN	G5372825T
Email Address	BOAN@NTU.EDU.SG
Mobile Phone No	(LOCAL) +65-96263708
Alternative Phone No	OFFICE-97767102

### Vehicle Particulars

Manufacturer	TOYOTA
Model	RAV4-1.8 3DR
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	VPA/P2278729
Cover Note Number	

### Driver

Name of Driver	HOU JINGHUA
Passport No/FIN	G5435891T
Date Of Birth	05/07/1980
Occupation	INDOOR
Date Of Driving Pass	20/03/2014
Driving Experience	5 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97767102
Fax Number	
Contact Number	
Email Address	JINGHHOU@GMAIL.COM

Address	63 NANYANG VIEW
Postcode	639650
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	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?	YES
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)	3
Passenger 1	NAME: : AN AMBER GENDER: : FEMALE
Passenger 2	NAME: : HOU LUOING GENDER: : MALE

#### 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 ATTACHED SKETCH PLAN AND 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	SLN9741U
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YE WINT AUNG
NRIC/Passport Number	S8773266E
Contact Number	
Address	APT BLK 811 JURONG WEST ST 81 #10-70
Postcode	640811

Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## Sketch Plan

### SKETCH PLAN

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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' 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

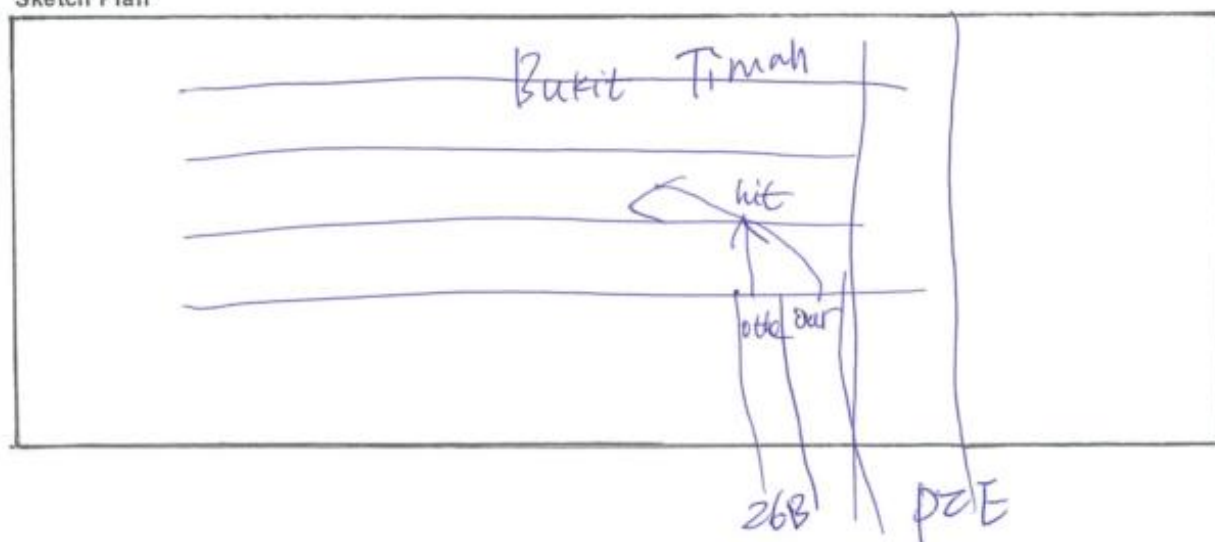
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

#### Sketch Plan



## Sketch Plan #2

### Describe Circumstances of the Accident

My wife was turning left after exiting 26B of PIT. She was on the right lane. When she felt safe to turn left, she turned left and ~~was~~ heard strong noise. She stopped and found that she was hit by another car.

### Declaration

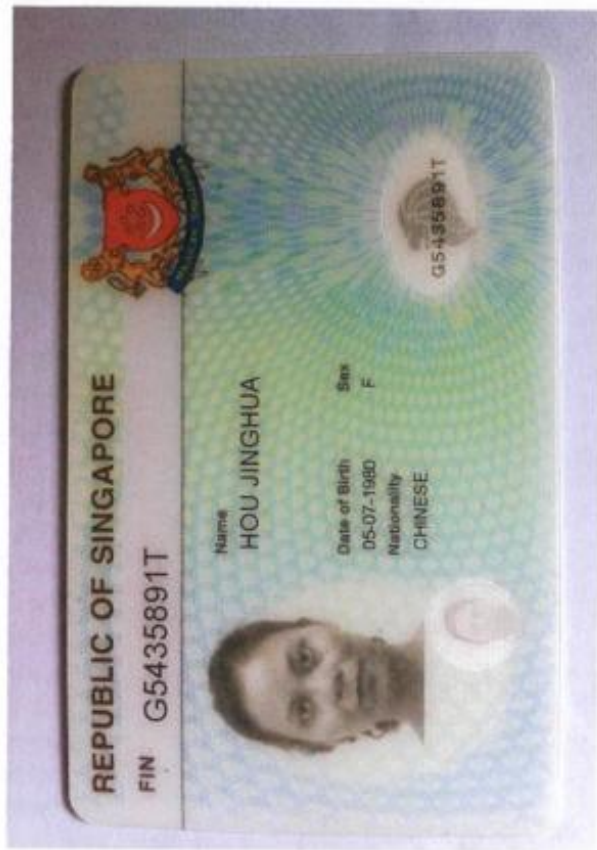
We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

Identification Card



Identification Card





## Identification Card

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

License Number: **G5372825T**

Name: **AN BO**

Birth Date: **27 Sep 1980**

Issue Date: **18 Mar 2019**

Valid Till: **19-03-2024**

002913476K



**EMPLOYMENT PASS**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer:  
**NANYANG TECHNOLOGICAL UNIVERSITY**

Name:  
**AN BO**

Occupation:  
**ASSISTANT PROFESSOR**

FIN:  
**G5372825T**

Date of Application:  
**13-04-2018**

Date of Issue:  
**04-05-2018**

Date of Expiry:  
**02-08-2021**

LE759795



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

Class	Description	EFFECTIVE DATE
Class 3A	Motor cars without clutch pedals (Auto) with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight $\leq$ 2500kg	20 Mar 2014

NP 428A

Licence No: G5372825T



**VISIT PASS**  
Immigration Regulations

Name:  
**AN BO**

Date of Birth: **27-09-1980** Sex: **M** Nationality: **CHINESE**

FIN: **G5372825T** Date of Issue: **04-05-2018** Date of Expiry: **02-08-2021**

**MULTIPLE JOURNEY VISA ISSUED**

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**





INSURANCE PTE LTD  
 110, Raffles Place, #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  
 NEW BUSINESS  
 Duplicate

<b>POLICY INFORMATION</b>		Policy No. : VPA/P2278729									
Source	: (01) 14885 BMS-AXA TOYOTA NB										
Insured	: AN BO										
Address	: 98 NANYANG CRESCENT #06-02 SINGAPORE 637665										
Business/Profession	: OTHER OCCUPATION Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.										
Period of Insurance	: From 18/04/2019 To 17/04/2021 (Both Dates Inclusive)										
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.											
<b>PREMIUM</b>											
Premium After 50.00% NCD	: SGD 1,255.79										
GST 7.00%	: SGD 87.90										
Annual Premium	: SGD 1,343.69										
Total Payable	: SGD 2,687.39										
<b>RISK DETAILS THE MOTOR VEHICLE</b>											
Type Of Cover	: Comprehensive										
Regn No.	: SKP5482U										
Type Of Use	: Private Car										
Make/Model	: TOYOTA RAV4 2.0										
Year of Manufacture	: 2019	Seating Capacity (excl. Driver) : 04									
Body Type	: SPORTS UTILITY VEHICLE	Engine C.C. : 1998									
Engine No.	: M20AV025633										
Chassis No.	: JTMV43FVX0D502647										
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	: UNITED OVERSEAS BANK LIMITED										
<table border="0"> <tr> <td><u>Extra Coverage(Premium Breakdown)</u></td> <td><u>Limits (SGD)</u></td> <td><u>Premium (SGD)</u></td> </tr> <tr> <td>NCD Protector</td> <td></td> <td></td> </tr> <tr> <td>Basic Own Damage Excess</td> <td>: SGD 600.00</td> <td></td> </tr> </table>			<u>Extra Coverage(Premium Breakdown)</u>	<u>Limits (SGD)</u>	<u>Premium (SGD)</u>	NCD Protector			Basic Own Damage Excess	: SGD 600.00	
<u>Extra Coverage(Premium Breakdown)</u>	<u>Limits (SGD)</u>	<u>Premium (SGD)</u>									
NCD Protector											
Basic Own Damage Excess	: SGD 600.00										
<u>Named Drivers</u>											
1 AN BO											
<b>MEMORANDA, CLAUSES, WARRANTIES &amp; ENDORSEMENTS</b>											
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:											
Sales Agent ID : BSTL077											

Identification Card

4905740



NRIC No. S8773266E



Date of issue  
09-11-2012

Address  
APT BLK 811 JURONG WEST STREET 81  
#10-70  
SINGAPORE 640811



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

EFFECTIVE DATE

Class 3 Motor Cars  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of the driver; and other motor vehicles  $\leq$  2500kg 10 Feb 2007

NP 428A



Licence No: S8773266E

# Driving License





Identification Card









Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo

