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

	ACCIDENT STATEMENT
Date Of Report	11/06/2019 14:36
Date Of Accident	10/06/2019 15:00
Exact Location Of Accident	YIO CHU KANG RD TURNING RIGHT TO SERANGOON GARDEN
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLT2152J
Insured/Policyholder	
Name Of Registered Owner	KUDDITHAMBY RATHIDEVI MRS RATHIDEVI LEE
NRIC No	S0115608Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94889616
Alternative Phone No	OFFICE-94889616
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (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	VPA/P2012870
Cover Note Number	
Driver	

Name of Driver KUDDITHAMBY RATHIDEVI MRS RATHIDEVI LEE

 NRIC No
 S0115608Z

 Date Of Birth
 09/10/1953

 Occupation
 INDOOR

 Date Of Driving Pass
 07/06/1977

Driving Experience 42 YEARS AND 0 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-94889616

Fax Number

Contact Number OFFICE-94889616

EMail Address NOEMAIL

Address 68 JALAN SELASEH

Postcode 808479
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 - MAJOR/MINOR RD

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?

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

3

Number of Passengers (Including Driver)

Passenger 1

NAME: : KUDDITHAMBY PARAMESWARY

GENDER: : FEMALE

Passenger 2

NAME: : SARAVANAN SHANTHI

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 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 SHB9981D

Vehicle Make/Model/Colour RENAULT INFLUENCE

Details Of Properties

Vehicle Category TAXI

Name of Driver YONG YOOK PIN

NRIC/Passport Number \$1509147I

Contact Number

Address Postcode

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)

Lunderstand, 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 yers/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 yers/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 yers/law firms), w hich may be sited outside of Singapore, for one or more of the above Purposes.

De-1/6/19	Dor 11/6/	19
Policyholder's Signature / Date & Driver Time & Time	's Signature (If driver is not the policyf	older) / Date Witnessed by Reporting Centre Personnel
Sketch Plan		
Yio Chu		A: SLT 21525
Yio Chu Kang Road D		B. SHB 9981 D
75		Yio Cho Kong Rd.
2	Serangoon Geden Way	

escribe Circumstances of the Accident
ON 10 (6/2019 AT APOUT 3 pm , I VEHICLE A (SLT21527) WAS
0 00 00000
DRIVING ALONG YIO CHU KANG ROAD TOWARRS SERANGWON GARDEN
WAY. I STOPPED TO CHECK FOR ON COMING TRAFFIC, IT WAS
Will I Stopped to Steel
CLEAREN SO I PROCEDED TO SLOWLY TURN, SUPPENLY VEHICLE
B (SHB 9951 D) CAME AT HIGH SPEED AND HIT THE FRONT
RIGHT PORTION OF MY (AR AND VEHICLE B SPUN 360°
FACING THE DOPOSITE PIRECTION OF THE ROAD. AFTER THE
ACCIDENT I SHIFTED MY CAR ALONG SERANGOUN EMEDEN WAY
TO EX CHANGE PARTICULARS.

Declaration

WWe declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

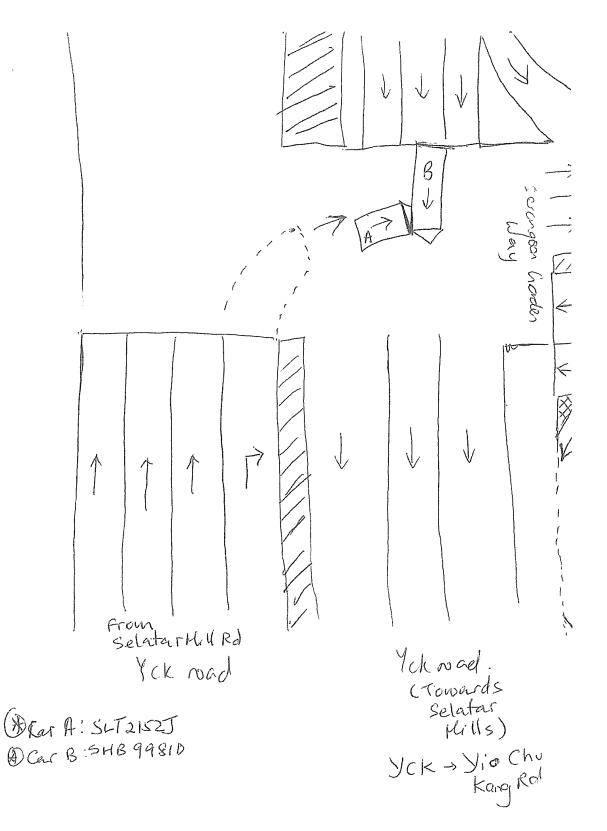
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Individual Statement Pg. 1

Report
On 10/6/19 at about 3pm, I was driving from my house, 68 Jalan Selasch with my mum Kuddithamby Parameswary, 52059755 J) & my helper (Saravanan Shanthi, work permit no 03674362) along Yio Chu Kang Road heading towards sterangoon Garden Way. Kang Road heading towards sterangoon Garden Way. On green lights, Defore turning that Serangoon Garden Way. I stopped to check the on coming traffic before way, I stopped to check the on coming traffic before turning right. As I started turning seeing the read turning have been speeding as upon hitting my car nust have been speeding as upon hitting my car his car spin 360° and faced the opposite direction his car spin 360° and faced the opposite direction of the road the was driving. I parked at the side of the road along a taxi. The drivers farticulars side of the road along a taxi. The drivers farticulars car that hit me was a taxi. The drivers farticulars are yorg yook Pin, S 1509147 I of taxi.

Individual Statement Pg. 1



iXA 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

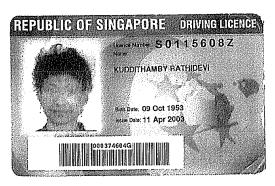
Other Payment Mode

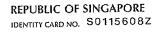


Private Cars COMP
POLICY SCHEDULE
NEW BUSINESS
Original

Registration Number: 199903512M mer.service@axa.com.sg	NEW BUSINESS Original	
POLICY INFORMATION	Policy No. : VPA/P2012870	
Source	(01) 14885 BMS-AXA TOYOTA NB	
Insured	KUDDITHAMBY RATHIDEVI MRS RATHIDEVI LEE	
Address	68 JALAN SELASEH SINGAPORE 808479	
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 23/10/2017 To 22/10/2019 (Both Dates Inclusive)	
Any subsequent period agree to accept a rene	for which the Insured shall pay and the Company shall wal premium.	
PREMIUM		
Premium After 50.00% : NCD	SGD 1,052.80	
GST 7.00%	SGD 73.70	
	SGD 1,126.50	
Total Payable :	SGD 2,252.99	
RISK DETAILS THE MOTO	R VEHICLE	
Type Of Cover :	Comprehensive	
Regn No.	SLT2152J	
Type Of Use :	Private Car	
Make/Model :	TOYOTA COROLLA ALTIS 1.6	
	2017 Seating Capacity (excl. Driver) : 04	
Body Type :	SALOON Engine C.C.: 1598	
=	1ZR0A18614 Chassis No. : MR053REH604574173	
Market Value	Market Value At The Time Of Loss (including Accessories and Spare Parts)	
Limitations as to Use :	As specified in Certificate of Insurance	
Extra Coverage (Premium	Breakdown) Limits (SGD) Premium (SGD)	
NCD Protector Basic Own Damage Exces	s : SGD 500.00	
Named Drivers 1 KUDDITHAMBY RATHI	DEVI MRS RATHIDEVI LEE	
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS		
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:		
Sales Agent ID : BSTU0	19	

Page 1









KUDDITHAMBY RATHIDEVI MRS.RATHIDEVI LEE 7ಕ್ರೇತ್ರವ

CEYLONESE





2189964

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

PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 killograms

O7 Jun 1977

Uconco No: S0115608Z

NP 428A

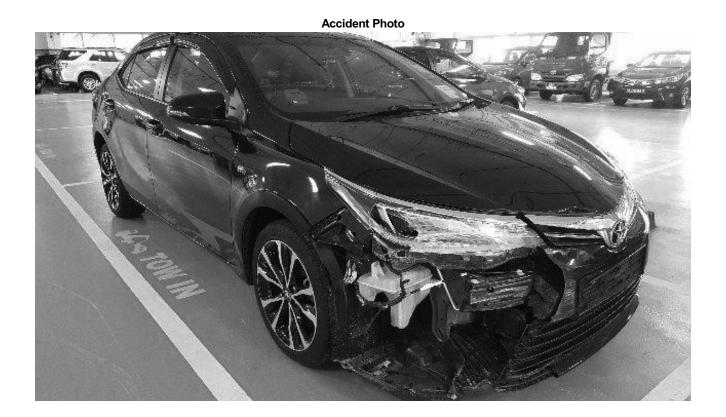
NACAS SO 115 60 8 Z

State Circup Date of visite

B+ 26-06-199 4

68 JALAN SELASEH SINGAPORE 808479 NRIC No: S01156082

Date: 29/08/1989 (R)



Accident Photo











Accident Photo



