

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	10/06/2019 09:59
Date Of Accident	09/06/2019 08:45
Exact Location Of Accident	ALONG AYE TOWARDS CHANGI NEAR NUS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDD7278B
Insured/Policyholder	
Name Of Registered Owner	CHUA GEE CHECK
NRIC No	S1736754D
Email Address	CHECKCHUA2@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97894837
Alternative Phone No	OFFICE-82221346

Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA-2.0 (A)

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1791438
Cover Note Number	

Driver

Name of Driver	CHUA YONG YUL
NRIC No	S9830102Z
Date Of Birth	08/09/1998
Occupation	INDOOR
Date Of Driving Pass	08/05/2019
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-82221346
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 210 BUKIT BATOK ST 21 #10-216
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	
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: : CHUA GEE CHECK GENDER: : MALE
Passenger 2	NAME: : CHUA WEN SHUAN 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 ATTACHED

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	SLM2448T
Vehicle Make/Model/Colour	PEUGEOT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
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 SME9323D
Vehicle Make/Model/Colour MITSUBISHI
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
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

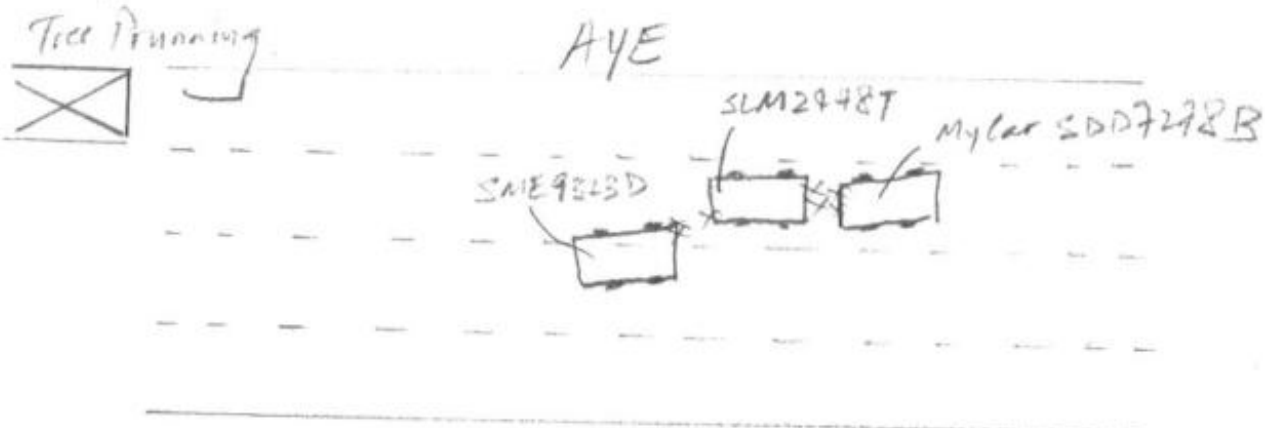
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6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application 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' 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
15 Jun 19 1100 hrs

Driver's Signature (If driver is not the policyholder) / Date & Time
10 Jun 19 1100

Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstances of the Accident

We were driving along AVE towards Alexandria direction on a bright Sunday morning. Visibility was good and I was driving with my father sat next to me on the front passenger seat. My sister is in the rear passenger seat. ~~When~~ I was driving on lane 1 along with other cars on AVE when we reach somewhere near mid way of NUS (a straight stretch of the AVE) there was a slowing down of vehicles due to some road works on lane 1 so I started to signal left and filter to lane 2 along with other cars on lane 2. But after a short while after filtering ~~the~~ the cars in front slowed down and stop suddenly. I notice that car stoppages and quickly stop on my brakes but unfortunately I couldn't stop the car in time and hit the car in front of me. The front car then hit the other car in front of it. We then came out of the car to acknowledge the 2 car drivers and I apologise to them together with my father. Very fortunately, nobody was injured or property damaged.

Declaration

We declare the foregoing particulars are true in every respect.

 16/Jan/19 ✓  16/Jan 1100
 Policyholder's Signature / Date & Time Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

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
Duplicate

POLICY INFORMATION		Policy No. : VPA/P1791438	
Source	: (01) 08260 KOMOCO TRADING PTE LTD (HY)		
Insured	: CHUA GEE CHECK		
Address	: BLK 210 BUKIT BATOK ST 21 #10-218 SINGAPORE 650210		
Business/Profession	: MANAGER Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.		
Period of Insurance : From 06/06/2019 To 05/06/2020 (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% : SGD 1,061.82			
NCD			
Safe Driver Disc	: SGD 84.95		
8.00%			
NCD Protector	: SGD 78.15		
GST 7.00%	: SGD 73.85		
Annual Premium	: SGD 1,128.87		
Total Payable	: SGD 1,128.87		
RISK DETAILS THE MOTOR VEHICLE			
Type Of Cover	: Comprehensive		
Regn No.	: SDD7278B		
Type Of Use	: Private Car		
Make/Model	: HYUNDAI LF SONATA 2.0 GLS A/T		
Year of Manufacture	: 2016	Seating Capacity (excl. Driver) : 04	
Body Type	: SALOON	Engine C.C. : 1999	
Engine No.	: G4NAGA526944		
Chassis No.	: KMHE341CMGA261915		
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	: HL BANK		
<u>Extra Coverage(Premium Breakdown)</u>		<u>Limits (SGD)</u>	<u>Premium (SGD)</u>
NCD Protector			78.15
<u>Excess Applicable</u>			
Basic Own Damage Excess		: SGD	
<u>Named Drivers</u>			
1 CHUA GEE CHECK			

Accident Sketch Plan



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

Class 3 Motor Cars and Motor Tractors the weight of which (unladen) does not exceed 2500 kgs

PASS DATE
30 Jun 1993



NP 4254



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

Class 3 Motor cars with unladen weight <= 2000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2400 kgs

EXPIRATIVE DATE

08 May 2019



NP 425A

Accident Sketch Plan

DATE : 10/06/2019

TO : AXA INSURANCE

ATTENTION : PERSON IN CHARGE

Dear Sir/ Madam

Authorization Letter

I, CHUA GEE CHEE (NRIC: S192675A0) hereby authorize the driver,
CHUA YONG YUL (NRIC: S98301027) to file report and claim for my
vehicle, SDD 72988, under my insurance policy number 40A/9179438.

Thank You,



Your Sincerely,

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

