

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	01/07/2019 15:29
Date Of Accident	30/06/2019 14:50
Exact Location Of Accident	JURONG WEST CTRL 1 BLK 682C
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGL8636S
Insured/Policyholder	
Name Of Registered Owner	LEE SWEE LIN ALICIA SANDRA
NRIC No	S7483517A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91068661
Alternative Phone No	OTHERS-94593801

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.6 SP (A)
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?	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
Policy Number	GA061210
Cover Note Number	29/09/2018 - 28/09/2019

Driver

Name of Driver	TAN HOE PENG
NRIC No	S1648189J
Date Of Birth	10/09/1964
Occupation	INDOOR
Date Of Driving Pass	12/02/1985
Driving Experience	34 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94593801
Fax Number	
Contact Number	OTHERS-91068661
Email Address	TANHOEPENG@GMAIL.COM

Address	682C JURONG WEST CENTRAL 1 #07-130
Postcode	643682
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	COLLISION - OPENING DOOR OF VEHICLE
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?	NO
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)	5
Passenger 1	NAME: : ALICIA LEE GENDER: : FEMALE
Passenger 2	NAME: : AMELIA LEE GENDER: : FEMALE
Passenger 3	NAME: : SARAH CHUA GENDER: : FEMALE
Passenger 4	NAME: : STEVEN CHUA 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

REFER TO THE SKETCH PLAN BY DRIVER

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	YJ168B
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KASHINATHAN S/O K VELUSAMY
NRIC/Passport Number	S1240364Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

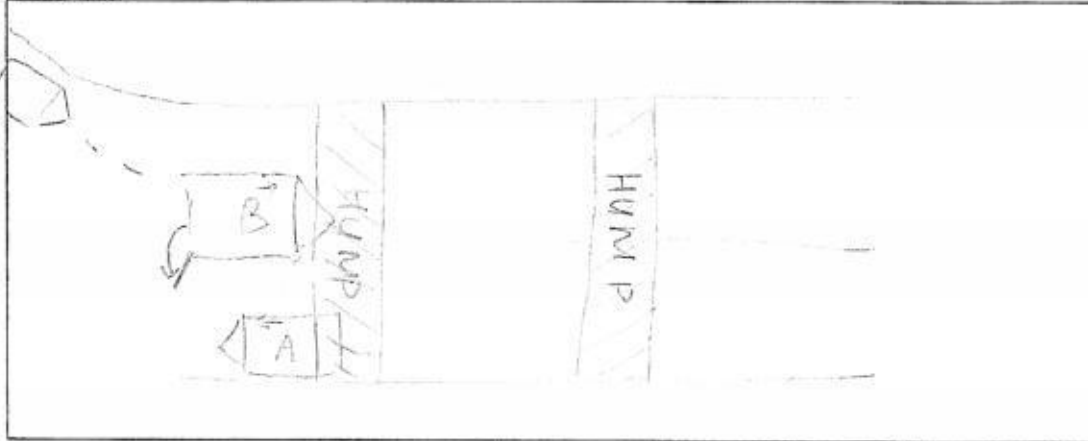

Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Officer/Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

Date of accident: 30/06/19 Time: 2:50 PM Location: Jurong West Exit 1 BIF 682C
 My Vehicle A: 5GL86365 Vehicle B: 4J1683 Vehicle C: —

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WHILE MY CAR A WAS AT THE HUMP AREA, THERE'S AN
 INCOMING RED LORRY TRUCK WAS DRIVING TOWARD ME
 AND HIS LORRY BACK DOOR CAME SCUMMING OUT
 AND HIT MY WIND SCREEN AND DENTED THE CAR.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address : tanhoepeing@gmail.com

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

I/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:

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



AH LIM MOTOR COMPANY



redefining / insurance

LEE SWEE LIN ALICIA SANDRA
BLK 682C JURONG WEST CENTRAL 1
#07-130
SINGAPORE 643682

AXA Insurance Pte Ltd
☎ 1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
☎ (65) 6880 4740
✉ customer.care@axa.com.sg
🌐 www.axa.com.sg

Renewal

date
07/09/2018

your servicing distributor
GI AGENCY / 03624

your servicing distributor contact
9100 0313

Policy Schedule

Your SmartDrive Comprehensive Private APW

Your policy snapshot

Policyholder name	LEE SWEE LIN ALICIA SANDRA	Policy number	VA1 / GA061210
Cover	Comprehensive	FIN / NRIC	S7483517A
Period of Insurance	from 29/09/2018 to 28/09/2019 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 911.06
7% GST	SGD 63.77
Final Premium	SGD 974.83

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Private APW Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability
- Loss of Personal Effects in Singapore up to \$3,000
- Daily Transport Allowance of \$50 for a maximum of five (5) days
- Personal accident benefit of up to \$3,000 for you or your named drivers while driving
- Medical and dental expenses up to \$500 per person for either you as the driver or your authorised driver and a passenger
- Basic Own Damage Excess Reduction for AXA Premium Workshop
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred local and get \$50 cash reward with no excess

Add-on Benefits

- No Claim Discount Protector

Vehicle details

Make & Model of Vehicle	MAZDA 3 1.6 SALOON	Year of manufacture	2006
Vehicle registration number	SGL8636S	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	1598
Seating capacity (excl driver)	4	Engine number	26488319
Off-Peak car	No	Chassis number	JM6BK106270311449

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	MAYBANK

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess	SGD 0.00
Windscreen Excess	SGD 200.00

AXA Insurance Pte Ltd (199903512M)
9 Shenton Way, #24-01, AXA Tower,
Singapore 068811
Customer Centre, #B1-01

1 of 2

VA1 / GA061210

Drivers details

Driver type	Driver name	Date of birth	Driving experience
Main Driver	TAN HOE PENG PATRICK	10/09/1964	30 year(s)

Additional clauses & endorsements to your policy

Nil

What you should do

- Keep this Policy Schedule as record of insurance cover for your vehicle
- This Schedule should be read in conjunction with the Terms and Conditions of the Policy Wording

AXA Insurance Pte Ltd

This is an auto-generated document and hence no signature is required





POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 01/07/19

To: Owner of Vehicle Number: SGL 86363

The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, ZILA/EILEEN/MUI HONG

Please tick the applicable box if you had been advised on any of the following:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☐ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
- ☐ For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.
- For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using **any combination** of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☒ Others Claim Third Party

Signed and acknowledged by

Name and signature of policyholder/ authorized driver* and company stamp (where applicable)

*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

Name and signature of workshop personnel including company stamp



Sketch Plan Pg. 6

Ah Lim Motor Company
Reporting Accident Info sheet

Vehicle No	SGL86365
Registered Owner Name	Lee Shwe Lin Anna Sandra
NRIC/ Fin/ Reg No/Passport	S7493517A
Owner HP	9106 2661
2nd number (Office/Home)	9459 3801

Make of Car	Mazda
Car Model	3 lb
Purpose of usage	<input checked="" type="checkbox"/> Private / Commercial / Hire & Reward / Private Hire
Are you claiming	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If no Action to be taken
Own Insurance	Claim Third Party <input checked="" type="checkbox"/> Reporting Only

Insurance Company	AXA Insurance
Type of Coverage	<input checked="" type="checkbox"/> Comprehensive / Third Part Fire & Theft / Third Party Only
Policy No	G1A061210
Policy Coverage period	29/09/19 - 23/09/19

Driver's name	Tan Hock Peng
NRIC/ Fin/ Passport No	S1649139J
Date of Birth	10/09/1964
Occupation	<input checked="" type="checkbox"/> Indoor / <input type="checkbox"/> Outdoor
Driving Licence Pass Date	12/02/1985
Class : 2 / 2A / 2B (3) 3A / 3C / 4 / 5	
Gender	<input checked="" type="checkbox"/> Male / <input type="checkbox"/> Female
HP no	9459 3801
Email Address	or NOEMAIL (pls circle)
Address	632C Junong West Crt 1 # 07-170 S1643682

Driver's relationship with Owner - Owner / <input checked="" type="checkbox"/> Spouse / Parent / Children / Siblings / Employee / Relatives / Friend / Others -

Weather	<input checked="" type="checkbox"/> Clear & Dry / <input type="checkbox"/> Raining & Wet / <input type="checkbox"/> After Rain & Wet / Others
Any Injury	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes any conveyance to Hospital Yes / No
No. of Passengers	5 Pax.
Accident Reported to Police	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Any Video available	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Third Party vehicle B	YJ1688	Third Party Vehicle C	
Make / Model		Make / Model	
Driver's Name	Kashinathan Sock Velumany	Driver's Name	
Driver IC	S12403642	Driver IC	
Driver HP		Driver HP	
No. of Pax in Car		No. of Pax in car	

PLEASE WRITE CLEARLY AND NEATLY