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 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.

aloresald.	
	ACCIDENT STATEMENT
Date Of Report	08/08/2019 14:07
Date Of Accident	07/08/2019 19:10
Exact Location Of Accident	TAMPINES AVE 10 (BETWEEN AVE 9 & 1)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLW8468T
Insured/Policyholder	
Name Of Registered Owner	WONG CHEK POH
NRIC No	S1472455I
Email Address	SASLWP@GMIL.COM
Mobile Phone No	(LOCAL) +65-96745368
Alternative Phone No	OFFICE-96745368
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	CAMRY-2.0 (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?	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	VA1/GA443566
Cover Note Number	
Driver	

Name of Driver WONG CHEK POH

NRIC No S1472455I Date Of Birth 18/01/1961 Occupation **INDOOR** 06/06/1978 **Date Of Driving Pass**

Driving Experience 41 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96745368

Fax Number

Contact Number OFFICE-96745368 **EMail Address** SASLWP@GMIL.COM Address 3 LENGKONG EMPAT #11-06

Postcode 417611

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

Was any other material or property damaged?

NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

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? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SCR7707T

Vehicle Make/Model/Colour VOLVO BLUE

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver ONG

NRIC/Passport Number

Contact Number 97879760

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLT1611H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category Name of Driver

NRIC/Passport Number

Macoport Na

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

KIA GREY

BUMPER CRACK

PRIVATE CAR

GAN CHOON SHAN

96611579

Sketch Plan



SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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) of:
 - 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:
 - 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:

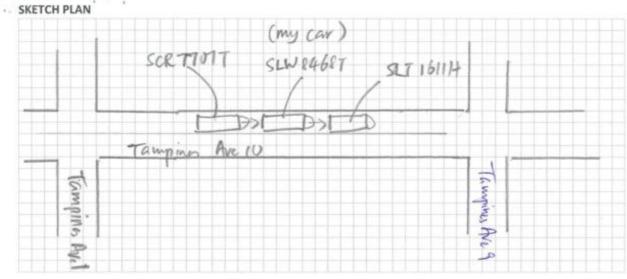
278715 11-30

Driver's Signature (If driver is not the policyholder) Date & Time: O I A D II

2/8/19 11.30

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Constitution - Consti	
On 7 Ang 2019 7.10 pm. I was travelling along Tangines Ne 10	
(between Tampines Are I and Tangines Are 9). Traffic was not to	
heavy and moving. The can in front of me SLT 16114 (KIA	
grayestom) jammed brake. I did keep a distance and	
managed to stop in time without hitting him. However, the	
can behind ser 7707 T (Vows blue) failed to stop and	
crashed into my rear. The force caused my can to move forward	
and knocked the front car.	
(have video avidence (front and roar) of the accident	
The front car agreed that I stopped in time; unfortunately the back banged me causing my to move forward. He agreed to make	
back banged me causing my to move forward. He agreed to make	
a report to claim from SCR7707 T the bade car.	
No drivers were injured. weather was clear.	
My back bumper was damaged. Front no visible damage	
My back bumper was damaged. Front no visible damage but front driver said his bumper cracked.	
- J	

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: SIGNS 11-30
Driver's Signature
(If driver is not the policyholder)
Date & Time: RIPLIS 11-30

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
(65) 6880 4740

customer.care@axa.com.sg

date 13/02/2019

policy number VA1 / GA443566

Certificate of Insurance

account number 14885

GA443566 / 1

6ARP372788

MR053DK5100112329

-Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules 1960 - Road Transport Act 1987 (Malaysia) - Motor Vehicles (Third-Party Risks) Rules 1959 (Malaysia)

Certificate number

Chassis number

Engine number

Policy details

Policyholder name WONG CHEK POH
Cover Comprehensive
Plan name Toyota Prestige
NCD applicable 50%
Vehicle registration number SLW8468T

from 02/03/2019 to 01/03/2020 (both dates inclusive)

Finance loan company DBS BANK LTD

Authorized Drivers

(a) The Policyholder

Period of Insurance

(b) Any Named Driver as stated in the Policy

(c) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

Limitation as to use*

- Use of the motor vehicle is connected to the Policyholder's business
- Use for the carriage of passengers (besides commercial hire or reward) in connection with the Policyholder's business
- Use for social, domestic, and personal purposes

The Policy does not cover.

- Use for commercial hire or reward or for racing pace-making reliability trail, or speed testing
- Use while drawing a trailer, except for the towing of a disabled person's mechanically propelled vehicle

EXCESS Basic Own Damage Excess Windscreen Excess

SGD 500.00 Not Applicable

Young/Inexperienced driver excess

An additional excess of \$2500 (to be added to any excess imposed under the Policy) whilst the Insured MotorCar is being driven by any driver aged below 23 years old and /or has been issued a valid driving license to drive in Singapore for the relevant class of vehicle for less than one year

Young and/ or Inexperienced driver shall mean any person who

- is less than 23 years old , and/or
- Has been issued with a valid driving license to drive in Singapore for the relevant class of vehicle for less than 1 year

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act. (Chapter 189) and Part IV of the Road Transport Act. 1987 (Malaysia)

AXA Insurance Pte Ltd

M

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way. #24-01, AXA Tower, Singapore 068811 Customer Centre. #B1-01

1 of 3

^{*} Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

Identification Card











