

## 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	30/08/2019 09:35
Date Of Accident	29/08/2019 21:30
Exact Location Of Accident	ANG MO KIO AVE 8
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME4505D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SIM SHI QIANG
NRIC No	S8524294F
Email Address	NICKSIMSQ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98168320
Alternative Phone No	OFFICE-68266316

### Vehicle Particulars

Manufacturer	PEUGEOT
Model	308-1.2 PURETECH EAT6 ALLURE (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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	CN015384
Cover Note Number	

### Driver

Name of Driver	SIM SHI QIANG
NRIC No	S8524294F
Date Of Birth	24/08/1985
Occupation	INDOOR
Date Of Driving Pass	17/07/2006
Driving Experience	13 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98168320
Fax Number	
Contact Number	OFFICE-68266316
E Mail Address	NICKSIMSQ@GMAIL.COM

Address	BLK 201 BISHAN STREET 23 #06-477
Postcode	570201
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 - HEAD TO REAR
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?	
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

REFER TO THE SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB1642K
Vehicle Make/Model/Colour	TOYOTA/PRIUS/MAROON
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	GOAY KOK CHUAN
NRIC/Passport Number	S6908527Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### 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:

30/8/2019  
10 am

GIAIRAC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name: **Simon Koh**

NRIC/FIN No.: Customer Service Advisor

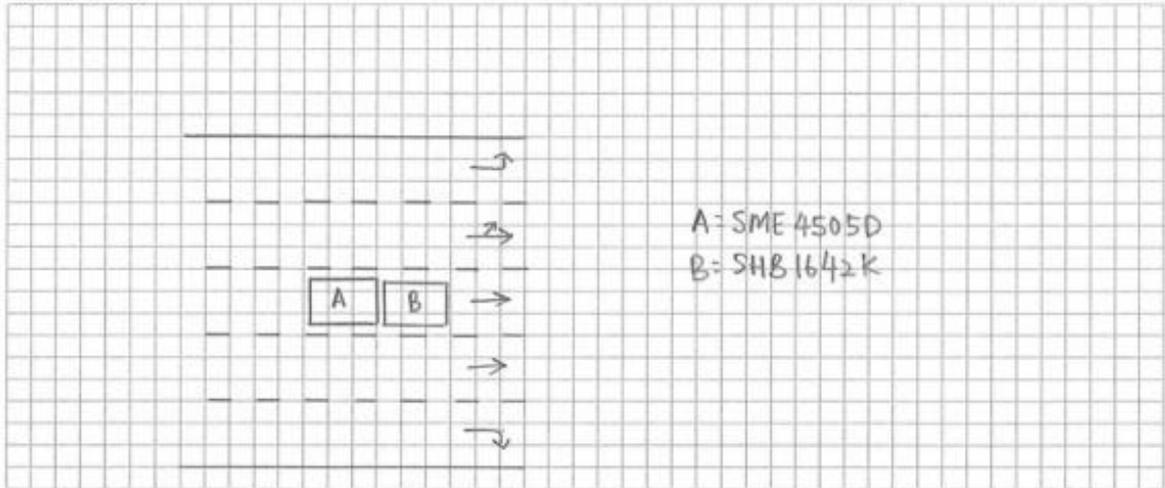
Accident & Bodyshop

98288606J

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Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Ang Mo Kio Ave 8. At around 9.30 pm, at the traffic junction outside Ang Mo Kio Hub, I bumped into the back of ~~the~~ SMRT taxi number SHB1642K. The taxi was stationary at the red light. I exchanged driver license particulars with driver Gohay Kok Chuan. I noted that there were no injuries suffered by the driver and his passengers. There was also no visible damage to both vehicles. The taxi driver asked if I would pay a settlement sum. I declined and suggested that we report to our respective insurers instead. The conversation took place for around 10 minutes. Thereafter, we parted ways.

DECLARATION

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

  
 Policyholder's Signature  
 Date & Time: 30/8/2019, 10am  
GIARMC SketchPlanForm\_V3

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



  
 Reporting Centre: **Simon Kwan**  
 Name: Customer Service Advisor  
 NRIC/FIN No.: Accident & Bodyshop  
 SP288606J. 2

## Certificate of Insurance

### AXA INSURANCE PTE LTD

8 Sherrin Way, #24-01  
 AXA Tower, Singapore 600011  
 Customer Centre #01-21  
 Tel: 1800 8804888  
 Website: [www.axa.com.sg](http://www.axa.com.sg)  
 GST Registration Number: 199907512M  
 customer.care@axa.com.sg



Original

Agent Code: 11423  
 Policy No. (if any):  
**New Business**  
 SmartDrive Quote Ref:

### MOTOR COVER NOTE

No. **CN015384**

- The Motor Vehicle (Third Party Risk and Compensation) Act (Cap 189) - Republic of Singapore; or
- The Road Transport Act 1987 of Malaysia; or
- The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated 22 February 1975; or
- The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;
- And any subsequent revisions to the above Acts and Agreements

The insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

### SCHEDULE

THE COMPANY	AXA INSURANCE PTE LTD
INSURED	SIM SHI QIANG (SHEN SHIQIANG)
MAKE AND DESCRIPTION OF VEHICLE	PEUGEOT 308 L2 PURETECH ALLURE 16
VEHICLE REGISTRATION NO.	SME 4505 D
YEAR OF MANUFACTURE	2018
ENGINE NO.	10XTA40948650
CHASSIS NO.	VF3LPHN7WJ5078652
ENGINE CAPACITY/TONNAGE	1199
COVER TYPE	COMPREHENSIVE
HIRE PURCHASE	HONG LEONG FINANCE LIMITED
VALUE (S\$)	AS PER MARKET VALUE
PERIOD OF INSURANCE	FROM: 27/09/2018 TO: 26/09/2019
EXCESS (S\$)	400/-
AXA PREMIUM WORKSHOP?	NO

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).



Issued by SO CONTECO SERVICES on 27/09/2018 4:12 pm

AXA INSURANCE PTE LTD

Authorized Signature

- Notes:** This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.
- Premium for time on risk will be charged subject to minimum of S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
  - An administrative fee of S\$26.75 (inclusive of GST) will be charged :
    - Cover note issued and cancelled before inception.
    - Retaining the old registration number for a new vehicle insuring with AXA.

### PREMIUM WARRANTY

For Individual Customers:  
 Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.  
 For Non-Individual Customers:  
 Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / enforcement. For all other cases, the premium in full should be paid before inception.

HTAC007549160

Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8524294F



 Name  
**SIM SHI QIANG**  
(SHEN SHIQIANG)  
沈仕强

Sex  
CHINESE

Date of birth  
24-08-1985

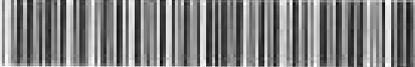
Age  
30

Country/Place of birth  
SINGAPORE

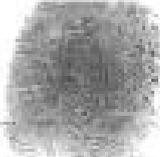


W/P: 98168320  
Alt. Contact No: 88266318  
email: tttksimsq nicksimsq@gmail.com

5379504



NIC No. S8524294F

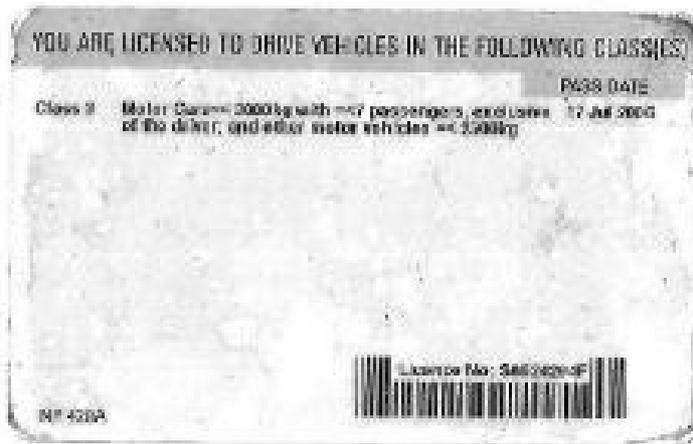


Date of issue  
26-02-2016

APT BLK 201 BISHAN STREET 20 #06-477  
SINGAPORE 570201

NRIC No. S8524294F Date 15/07/2018

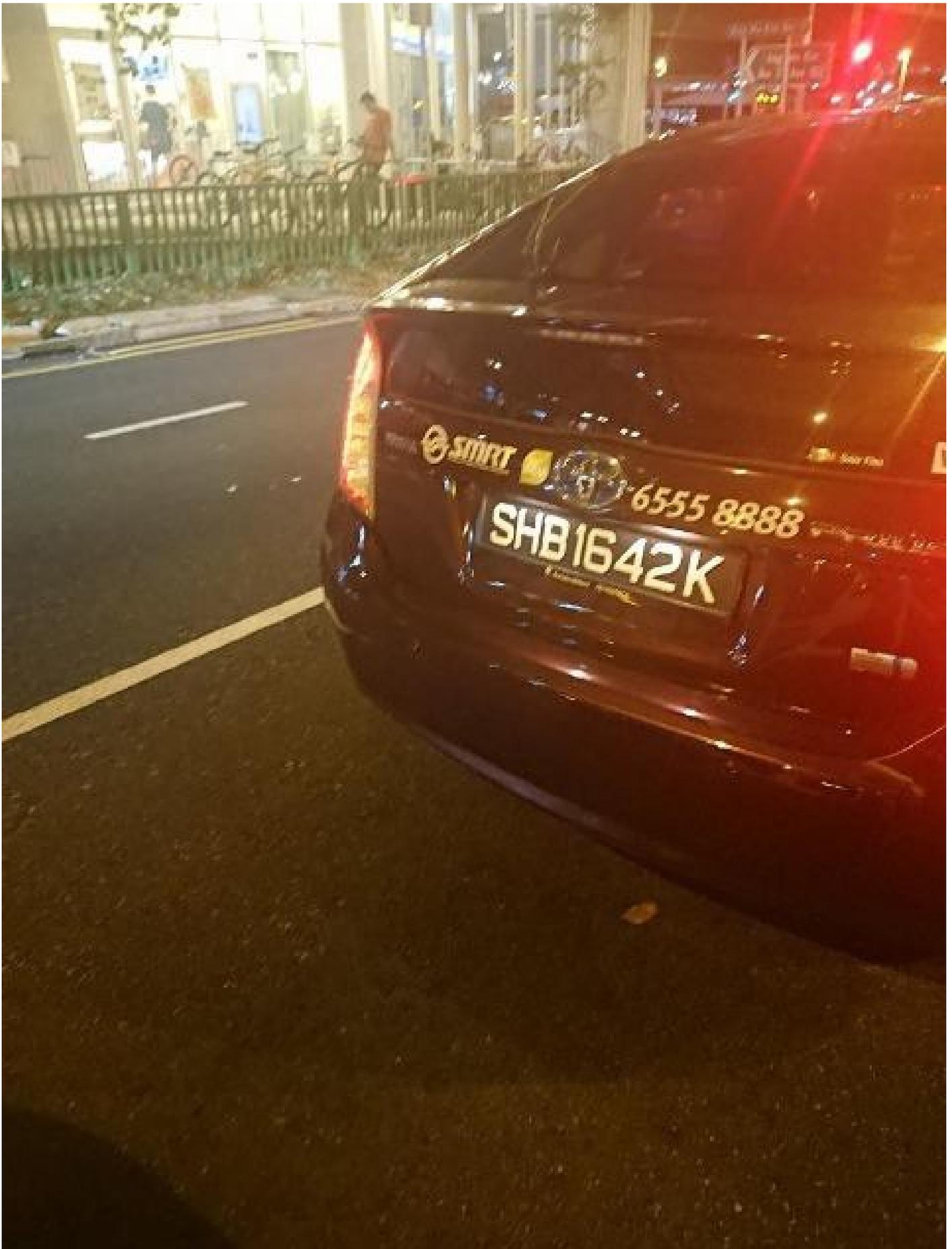
Driving License



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

