

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	30/11/2019 09:13
Date Of Accident	29/11/2019 16:20
Exact Location Of Accident	AYE TOWARDS CTE/SLE LAMP POST 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH9807J
Insured/Policyholder	
Name Of Registered Owner	MIRIAM HERINCKX
NRIC No	S7486250J
Email Address	VYPALOVA@YAHOO.COM
Mobile Phone No	(LOCAL) +65-92334077
Alternative Phone No	OTHERS-91190200

Vehicle Particulars

Manufacturer	BMW
Model	X3
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	GA445370
Cover Note Number	

Driver

Name of Driver	MIRIAM HERINCKX
NRIC No	S7486250J
Date Of Birth	14/12/1974
Occupation	INDOOR
Date Of Driving Pass	12/09/2011
Driving Experience	8 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92334077
Fax Number	
Contact Number	OTHERS-91190200
Email Address	VYPALOVA@YAHOO.COM

Address	25 OXLEY WALK #03-23
Postcode	238595
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	RAINING
Road Surface	WET

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)	2
Passenger 1	NAME: : LARA HERINCKX GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ORCHARD NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 KILLINEY ROAD , POSTCODE: 239572 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7359999 - FAX NO: 67331934
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACH.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLR8544H
Vehicle Make/Model/Colour	KIA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KOH CHAN YANG EDWIN
NRIC/Passport Number	S7913804E
Contact Number	97716662

Address

Postcode

Insurance Company Name

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Nature Of Damage

FRONT

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: 30/11/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

PLEASE REFER TO POLICE REPORT NUMBER
T/20191129/2174

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

2017年12月15日

Date & Time:

NRIC/PIN No. 303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941



**SINGAPORE
POLICE FORCE**



T/20191129/2174

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

1 of 3

Report No. T/20191129/2174

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/11/2019 20:51	Vide Report No.:	Station Diary No.: 130
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Informant's Particulars				
Name of Informant: HERINCKX MIRIAM			Address: 25 OXLEY WALK #03-23 SINGAPORE 238595	
ID Type / ID No.: NRIC NO / S7486250J			Contact No.: Home/Office: Mobile: 92334077	
Nationality: SLOVAK			Email:	
Sex: Female	Age: 44	Date of Birth: 14/12/1974	Type of Informant: Driver	
Race: Caucasian			Language: English	Institution / School Name:
Occupation: Housewife			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 29/11/2019 16:20	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY Along AYE, towards CTE/SLE Lamp Post Number: 5				
Weather: Heavy rain		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLR8544H	Car	KIA		Blue	Slightly Damaged	0
SMH9807J	Car	BMW	X3 SDRIVE20I	Brown	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMH9807J	AXA INSURANCE SINGAPORE PTE LTD	GA445370	19/02/2019	18/02/2021



**SINGAPORE
POLICE FORCE**



T/20191129/2174

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

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Report No. T/20191129/2174

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Koh ChanYang Edwin	ID No.	S7913804E
Related Vehicle	SLR8544H (Car)	Contact No.	97716662
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	HERINCKX MIRIAM	ID No.	S7486250J
Related Vehicle	SMH9807J (Car)	Contact No.	92334077
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 29.11.2019 at about 1624hrs, I was driving along AYE towards CTE/SLE. I was on the right most lane. There was an accident ahead of my vehicle towards the left lane, therefore I slowed down my vehicle, as the vehicles in front my car were slowing down.

Out of a sudden, I felt an impact to the back of my vehicle and heard a loud bang. I then got out of my vehicle and saw that the rear bumper of my vehicle was damaged. The other vehicle (SLR8544H) had lost its registration plate and there were slight damages to the front of his vehicle.

We exchanged particulars and will be informing our insurance company about this. I am lodging this report for record purposes.



**SINGAPORE
POLICE FORCE**



T/20191129/2174

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

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Report No. T/20191129/2174

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Sr Staff Sgt DON NG ZHEN XUAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:

29/11/2019 20:51

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

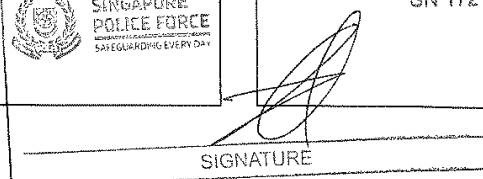
Contact No.: 65476151



Classification Of Case:

SN 172

Authentication Stamp
NP168



SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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