

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 ability.
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 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	08/05/2015 12:07
Date Of Accident	23/02/2015 18:00
Exact Location Of Accident	TOA PAYOH LOR 2 TWD PIE TOA PAYOH LOR 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGP6203A
Insured/Policyholder	
Name Of Registered Owner	KEK SIN SHEN STEVE
NRIC No	S7416009C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93289780
Alternative Phone No	Office-93289780

Vehicle Particulars

Manufacturer	AUDI
Model	A4-2.0 (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?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Private Car

Insurance Company

Name of Insurance Company	AXA Insurance Singapore Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA005625/1
Cover Note Number	

Driver

Name of Driver	KEK SIN SHEN STEVE
NRIC No	S7416009C
Date Of Birth	30/05/1974
Occupation	Indoor
Date Of Driving Pass	24/01/1994
Driving Experience	21 Years And 0 Months
Gender	Male
Mobile Number	(Local) +65-93289780
Fax Number	
Contact Number	Office-93289780
Email Address	NOEMAIL

Address	371 HOLLAND ROAD #13-03
Postcode	278698
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 (TP Hit Insured)
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	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 REPORT.

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJJ7443M
Vehicle Make/Model/Colour	TOYOTA WISH
Details Of Properties	
Name of Driver	MR FAN
NRIC/Passport Number	
Contact Number	96667283
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

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 :

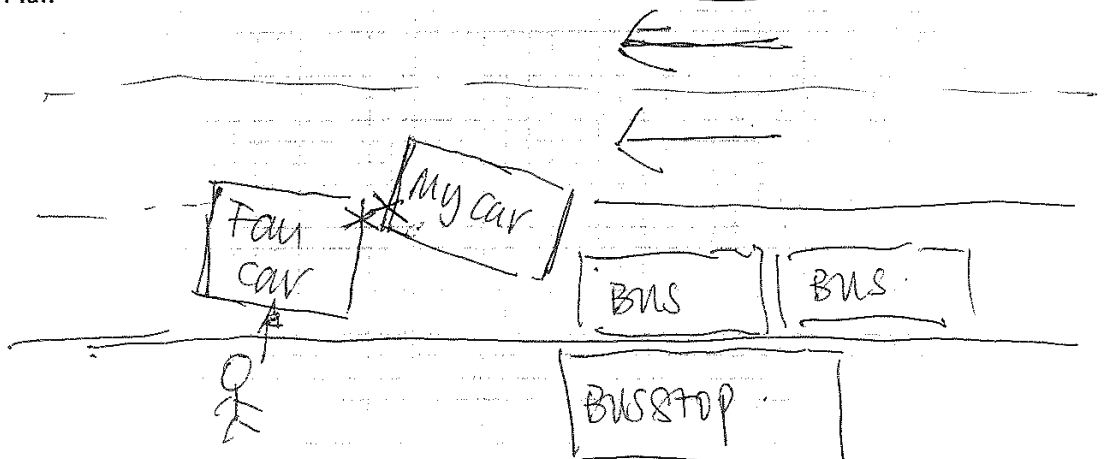
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
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Sketch Plan



Toa Payoh Lor 2

Describe Circumstances of the Accident

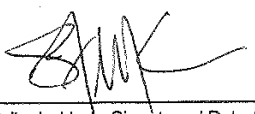
The other car ~~SJ1743M~~ SJ1743M was driven by Mr Fan was stopped just in front of the bus stop waiting for one of the passengers to go into the car and my car was behind ~~the~~ his car. The road was going towards PIE at Ton Pong Lok 2. His car was trying to filter many times into the lanes and hesitated many times to filter and stop and was blocking the buses and traffic. ~~the~~ Eventually there was a "clear" to filter and his car moved and ~~then~~ ~~at~~ my car followed but he suddenly braked and resulted in my car front left bumping into his car rear right. I was on the second lane of the road and his car was filtering into my lane. I noticed that his car was installed a camera.

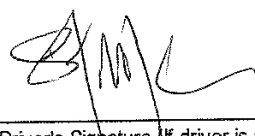
During the day of accident it was raining and when the accident happened ~~the~~ both drivers acknowledged that the bump was just scratches to the cars' bumpers without any dent ~~and~~ but exchanged contact details to discuss ~~if~~ the damages and repairs if any.


During the following discussion, we both agreed that ~~the~~ accident would be resolved privately a day after the accident.

Declaration

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


Policyholder's Signature / Date & Time
Sway 10am

 Sway 10am
Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel



Date: 8 May 2015

To: Owner of Vehicle Number: SLP 6203A

The following has been advised to you via your workshop, S&H Motor through their staff, Nicole.

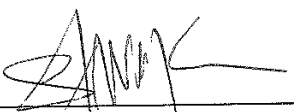
Please tick the applicable box if you had been advice on the content as seen below:


- (☒) You had been advised by the workshop that in the event 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.
- (☐) The Estimation 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, your Insurance company will use only genuine original parts to repair your vehicle.

For vehicles above Three (3) years old, your insurance company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.

- (☐) You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.

Signed and acknowledge by:

 Stewerker
Name and signature of policyholder/ authorised driver


Name and signature of workshop personnel including company stamp

Sketch Plan #4 Pg.1

REPUBLIC OF SINGAPORE
DRIVING LICENCE

Portrait photo of a man.

Licence Number: **S7416009C**
Name: **KEK SIN SHEN**
(GUO XINSHENG)

Birth Date: 30 May 1974
Issue Date: 14 Apr 2004

Barcode: 001194014E

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

Class 3 Motor Cars and Motor Transfers the weight of which unladen does not exceed 2500 kilograms

PASS 21 Jan 2004

NP 42dA

Licence No: S7416009C

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7416009C**

Portrait photo of a man.

Name: **KEK SIN SHEN STEVE**
(GUO XINSHENG)
郭 新 生

Race: **CHINESE**

Date of birth: 30-05-1974 Sex: **M**

Country of birth: **SINGAPORE**

3591069

Barcode

NRIC No. **S7416009C**

Portrait photo of a man.

Date of issue: 19-07-2004

371 HOLLAND ROAD #13-03
SINGAPORE 278698

NRIC No. **S7416009C**

Date: 27/06/2010 No: 6577835

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

