

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	04/04/2020 12:33
Date Of Accident	03/04/2020 20:10
Exact Location Of Accident	NEX CAR PARK LEVEL 2
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKX57E
Insured/Policyholder	
Name Of Registered Owner	ONG BOON WAH, DANIEL
NRIC No	SXXXX138E
Email Address	DOBW1973@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96818834
Alternative Phone No	OTHERS-96818834
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
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	P1847233
Cover Note Number	12/11/2019 - 11/11/2020
Driver	
Name of Driver	ONG BOON WAH, DANIEL
NRIC No	SXXXX138E
Date Of Birth	14/08/1973
Occupation	INDOOR
Date Of Driving Pass	16/10/1992
Driving Experience	27 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96818834
Fax Number	
Contact Number	OTHERS-96818834
EEmail Address	DOBW1973@GMAIL.COM

Address	57 LIMBOK TERRACE
Postcode	545202
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	HOUGANG N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

Attachment(s)

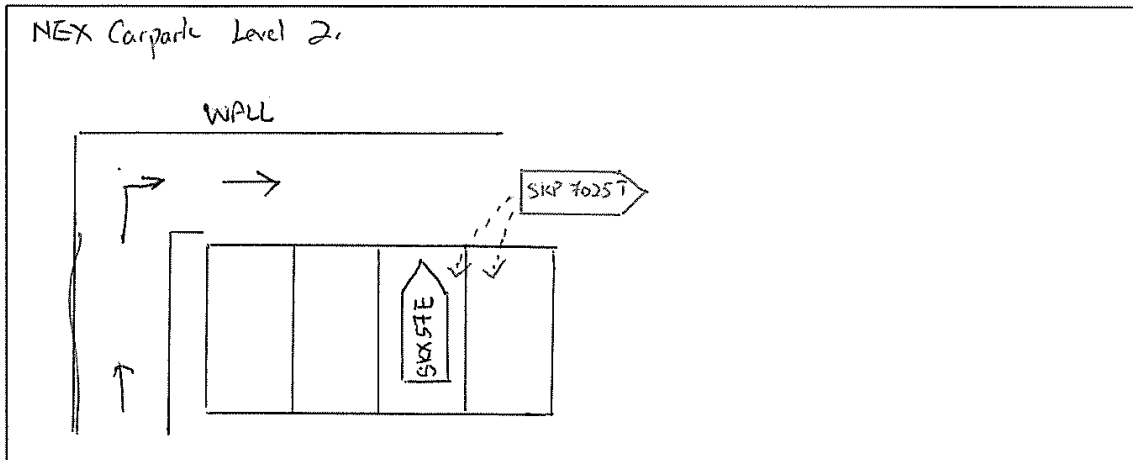
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKP7025T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

Date of accident: 3 Apr 2020 Time: 20:10 Location: NEX Carpark Level 2,
 My Vehicle A: SKX 57E Vehicle B: SKP 7025T Vehicle C: —
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to attached police report.

☒ 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 :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you 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

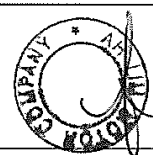
Date & Time: 24 Apr 2020

1105
STAMP HERE

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AH LIM MOTOR COMPANY

SKETCH PLAN

IMPORTANT NOTICE

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7. 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:
 - (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: 4 Apr 2020.

1105.

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20200404/2024

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 3

Report No. T/20200404/2024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/04/2020 10:47		Vide Report No.:		Station Diary No.: 39	
Informant's Particulars					
Name of Informant: ONG BOON WAH, DANIEL			Address: 57 LIMBOK TERRACE SINGAPORE 545202		
ID Type / ID No.: NRIC NO / S7328138E			Contact No.: Home/Office: Mobile: 96818834		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 14/08/1973	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: CONSULTANT			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/04/2020 20:10	Type of Location: Car Park
Location: Along Road 1 SERANGOON CENTRAL NEX Mall Carpark Level 2				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
SKP7025T	Car	VOLVO	XC60 T5	White		0
SKX57E	Car	MAZDA	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20200404/2024

2 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20200404/2024

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKX57E	AXA INSURANCE SINGAPORE PTE LTD	P1847233	12/11/2019	11/11/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	ONG BOON WAH, DANIEL		ID No.	S7328138E
Related Vehicle	SKX57E (Car)		Contact No.	96818834
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 03/04/2020 at around 1940hrs, I parked my vehicle (SKX57E) at the Level 2 Nex Mall carpark. Everything was intact and I left.

On the same day at around 2115hrs, I discovered a scratch mark on the right front portion of my vehicle.

I have a camera installed in my vehicle. I made a check and from the footage shown that on 03/04/2020 at around 2009hrs, a vehicle SKP7025T while reserving to the right lot collided into my vehicle. No note left behind.

I am lodging this report to submit to my insurance company.



SINGAPORE
POLICE FORCE



T/20200404/2024

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20200404/2024

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:

F /

Sgt 2 CHUA ZI HUA

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt NEO ZHI YUAN

Contact No.: 65476079

Signature Of Informant:

Date/Time:

04/04/2020 10:47

Classification Of Case:

Authentication Stamp

NP168

AXA INSURANCE PTE LTD
 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Centre #01-21
 Tel:1800 8804888 Fax:-
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.care@axa.com.sg



Private Cars COMP
 POLICY SCHEDULE
 RENEWAL
 Original

POLICY INFORMATION		Policy No. : VPA/P1847233	
Source	: (01) 13950 META (PA/HOME X SELL 20110901)		
Insured	: ONG BOON WAH DANIEL		
Address	: 57 LIMBOK TERRACE PARRY GREEN SINGAPORE		
Business/Profession	: TEACHER / TUTOR / LECTURER Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.		
Period of Insurance	: From 12/11/2019 To 11/11/2020 (Both Dates Inclusive) Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.		
PREMIUM			
Premium After 40.00% NCD	: SGD 652.57		
Extra Coverage	: SGD 75.00		
Safe Driver Disc 10.00%	: SGD 72.76		
GST 7.00%	: SGD 45.85		
Annual Premium	: SGD 700.66		
Total Payable	: SGD 700.66		
RISK DETAILS THE MOTOR VEHICLE			
Type Of Cover	: Comprehensive		
Regn No.	: SKX57E		
Type Of Use	: Private Car		
Make/Model	: MAZDA MAZDA3 4-DOOR SEDAN 1.5L		
Year of Manufacture	: 2015	Seating Capacity (excl. Driver) : 04	
Body Type	: SALOON	Engine C.C. : 1496	
Engine No.	: P520328384		
Chassis No.	: JM6BM42A8G0323414		
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)		
Limitations as to Use	: As specified in Certificate of Insurance		
Hire Purchase	: HONG LEONG FINANCE LIMITED		
<u>Extra Coverage(Premium Breakdown)</u>	<u>Limits (SGD)</u>	<u>Premium (SGD)</u>	
Car Accessories (Protect NCD)	2,500.00	75.00	
NCD Protector			
<u>Excess Applicable</u>			
Basic Own Damage Excess	: SGD 400.00		



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date:

4/4/2020

To: Owner of Vehicle Number:

SKX 57E

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.

> if fire damage and you claim under your own insurance, any applicable excess will be waived. However, there will be no recovery prospect and NCD will be affected.

> if fire damage and you are claiming against the Third Party, your NCD will not be affected. However, the recovery is not guaranteed, and AXA will not be held responsible.

☐ 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 30 days revert to Own Damage claim

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



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7328138E**

Name: **ONG BOON WAH, DANIEL (WANG WENHUA, DANIEL)**

Birth Date: **14 Aug 1973**

Issue Date: **17 Jul 2017**

002704071G

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7328138E

Name: **ONG BOON WAH, DANIEL (WANG WENHUA, DANIEL)**

王 文 华

Race: **CHINESE**

Date of birth: **14-08-1973**

Sex: **M**

Country/Place of birth: **SINGAPORE**

S7328138E

STRICTLY
FOR WORKSHOP USAGE

USE FOR ACCIDENT
REPORTING ONLY

fig- 9681.8834

Email dobw1973@gmail.com.

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE: **16 Oct 1992**

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$

Licence No: **S7328138E**

NP 428A

STRICTLY
FOR WORKSHOP USAGE

USE FOR ACCIDENT
REPORTING ONLY

5202317

HRIC No: **S7328138E**

Date of Issue: **05-08-2013**

Address: **57 LIMBOK TERRACE SINGAPORE 545202**

dry
by: No
ca. Yes

Total. 0

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

