

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	15/04/2020 17:50
Date Of Accident	15/04/2020 07:40
Exact Location Of Accident	YIO CHU KANG RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR6166C
Insured/Policyholder	
Name Of Registered Owner	LEOW CHAI HONG
NRIC No	SXXXX072B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86866166
Alternative Phone No	OTHERS-92277002

Vehicle Particulars

Manufacturer	LEXUS
Model	IS300-2.0 (A)
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	P2143815
Cover Note Number	28/06/2018 - 27/06/2020

Driver

Name of Driver	SIM WEI PING
NRIC No	SXXXX267B
Date Of Birth	07/09/1987
Occupation	INDOOR
Date Of Driving Pass	07/04/2006
Driving Experience	14 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86866166
Fax Number	
Contact Number	OTHERS-92277002
E-Mail Address	LECTROSPHERE@HOTMAIL.COM

Address	415A FERNSVALE LINK #19-40
Postcode	791415
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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)	2
Passenger 1	NAME: : LEOW CHAI HONG GENDER: : FEMALE

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 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	XD4524Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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

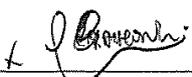
SKETCH PLAN

IMPORTANT NOTICE

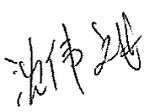
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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:


Driver's Signature
(If driver is not the policyholder)

Date & Time: 15/04/2020 (70011-5)


Reporting Center Personnel's Signature

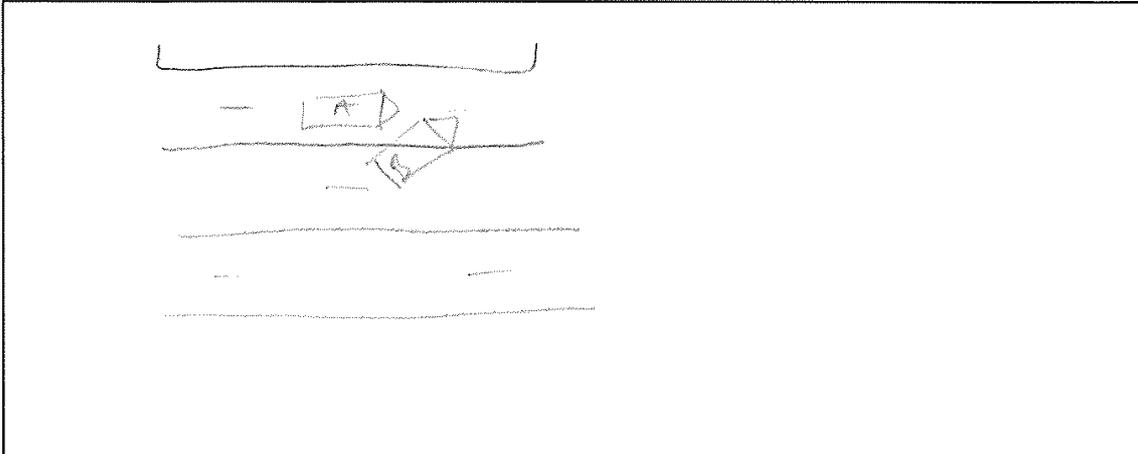
Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

Date of accident: 15/04/2020 Time: 07:40 AM Location: Y10 CHU KANG ROAD
 My Vehicle A: SJR6166C Vehicle B: X04524Z Vehicle C: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG Y10 CHU KANG ROAD IN LANE 3, SUDDENLY I SAW THE FRONT OF 'B' X04524Z PRIME MOVER TRUCK VERY CLOSE TO ~~ME~~ ~~CROSSING THE~~ ~~TO~~ ~~STREET~~ ~~LEFT~~ AND HIT THE FRONT RIGHT SIDE OF MY VEHICLE, THE IMPACT ALSO RESULTED ME TO HIT THE KERB AT THE FRONT LEFT TYRE.

AFTER 'B' X04524Z HIT ME HE CONTINUE TO DRIVE OFF, I CHASE AND STOP HIM.

I ALSO ASK WHY DIDN'T HE STOP AND HE SAY HE IS NOT AWARE THAT HE HIT ME.

AFTER THE ACCIDENT, MY STEERING WAS NOT CENTERED AND I HAVE TROUBLE KEEPING THE VEHICLE MOVING STRAIGHT.

THERE IS ALSO A WEIRD SOUND COMING FROM THE FRONT LEFT SIDE AFTER I DROVE OFF.

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: LECTPROSHERE@HOTMAIL.COM

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.

[Signature]
 Policyholder's Signature

Date & Time:

[Signature]
 Driver's Signature

(If driver is not the policyholder)

Date & Time: 15/04/2020 1700 HRS

[Signature]
 Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AH LIM MOTOR COMPANY

Sketch Plan Pg. 3

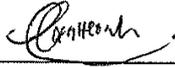
To Whom It May Concern,

Accident involving my vehicle no. SJR6166C on 15/4/20 ~~07/10~~ (date) with
XD4524Z (other vehicle no) along YIO CHU KANG Rd

I, LEOW CHIA HONG Nric No. S7428072B

Owner of vehicle no. SJR6166C am aware of the accident of my vehicle on
15/4/20 (Date) while car was driven by SIM WEI PING

Nric No. S8727267B. I hereby, authorise him / her to make the report.

X 

Name

Date:

.....
..

To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.

X _____

Name

Date:

Sketch Plan Pg. 4



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 15/4/20 To: Owner of Vehicle Number: SJ26166C

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 Claim Third Party @ own workshop

Signed and acknowledged by:

[Signature]
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.

[Signature]
Name and signature of workshop personnel including company stamp



AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel:(65)63387288 Fax:(65)63382522
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.service@axa.com.sg



Private Cars COMP
 POLICY SCHEDULE
 NEW BUSINESS
 Duplicate
 DUPLICATE
 COPY FOR FINANCE COMPANY

POLICY INFORMATION		Policy No. : VPA/P2143815
Source	: (01) 14886 BMS-AXA LEXUS NB	
Insured	: LEOW CHIA HONG (LIAO CAIFENG)	
Address	: BLK 415A FERVALE LINK #19-40 SINGAPORE 791415	
Business/Profession	: OTHER OCCUPATION Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance	: From 28/06/2018 To 27/06/2020 (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 50.00% NCD	: SGD 1,405.28	
GST 7.00%	: SGD 98.37	
Annual Premium	: SGD 1,503.65	
Total Payable	: SGD 3,007.30	
RISK DETAILS THE MOTOR VEHICLE		
Type Of Cover	: Comprehensive	
Regn No.	: SJR6166C	
Type Of Use	: Private Car	
Make/Model	: LEXUS IS300	
Year of Manufacture	: 2018	Seating Capacity (excl. Driver) : 04
Body Type	: SALOON	Engine C.C. : 1998
Engine No.	: 8ARZ122993	
Chassis No.	: JTHBA1D2905079113	
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>
NCD Protector		
Basic Own Damage Excess	: SGD 700.00	
<u>Named Drivers</u>		
1 LEOW CHIA HONG (LIAO CAIFENG)		
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS		
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:		
Sales Agent ID : BSSL032		

Identification Card Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8727267B**

Name: **SIM WEI PING**

Birth Date: **07 Sep 1987**
Issue Date: **15 Aug 2014**

002335361F



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8727267B**

Name: **SIM WEI PING**
沈伟斌

Race: **CHINESE**

Date of birth: **07-09-1987** Sex: **M**

Country/Place of birth: **SINGAPORE**

98727267B




STRICTLY
FOR WORKSHOP USAGE

USE FOR ACCIDENT
REPORTING ONLY

9227002

86366166.
D/C
NO W/MY.
camera
2px - W owner

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

Class	Description	Effective Date
Class 3	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS	07 Apr 2006
Class 4	HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN EXCEEDS 2500 KILOGRAMS	01 Sep 2015
Class 5	MOTOR VEHICLES WHICH ARE NOT CONSTRUCTED THEMSELVES TO CARRY ANY LOAD AND THE WEIGHT OF WHICH UNLADEN EXCEEDS 7250 KILOGRAMS	29 Sep 2015

S / No. 9000240395

NP 428A

Licence No: **S8727267B**

5347437

NRIC No: **S8727267B**

Date of Issue: **15-08-2014**

APT BLK 415A FERNVALE LINK #19-40
SINGAPORE 791415
NRIC No: **S8727267B** Date: **10/08/2015**




STRICTLY
FOR WORKSHOP USAGE

USE FOR ACCIDENT
REPORTING ONLY

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S665S0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MALM20042263 Vehicle Registration No: SJR 666C
Name(as shown in NRIC) : SIM Wei Ping NRIC/FIN/Passport No : SXXXX267B
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Singapore()
Contact (Tel) : Mobile No. :
Email Address :
Date of Accident : 15/4/2020 Time of Accident : 7:40
Place of Accident : Yoo Chu Kang Rd
Insurance Company : AXA

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amendments on the owner name should read as Leow Chai Hong.

Handwritten signature of Policyholder / Driver

Policyholder / Driver's Signature

Date: 20/04/2020



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date:

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7428072B



Name



LEOW CHAI HONG
(LIAO CAIFENG)

廖彩凤

Race

CHINESE

Date of Birth

24-08-1974

Sex

F

Country of Birth

SINGAPORE

STRICTLY
FOR WORKSHOP USAGE
USE FOR ACCIDENT
REPORTING ONLY

Addendum Sheet Pg. 3

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Service Centre #B1-01
 Tel:(65)63387288 Fax:(65)63382522
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.service@axa.com.sg



CERTIFICATE OF INSURANCE

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 NO.	: VPA/P2143815 Account No. : 14886
Coverage	: Comprehensive (SmartDrive Lexus Prestige)
Sum Insured	: Market Value At The Time Of Loss
Name of Policy Holder	: LEOW CHAI HONG (LIAO CAIFENG)
Vehicle Registration No.	: SJR6166C
Period of Insurance	: From 28/06/2018 To 27/06/2020 (Both Dates Inclusive)
PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*	
(a) The Policyholder The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner (b) Any other person who is driving on the Policyholder's order or with his 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.	
LIMITATIONS AS TO USE*	
Use only for social, domestic and pleasure purposes and for the Policyholder's business The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.	
(01)	
Basic Own Damage Excess	: SGD 700.00
An Additional Excess is applicable as follows: S\$2,500.00 for Young or Inexperienced Driver. Young or Inexperienced Driver is defined as any driver whom is aged below 23 years old and/or less than one year of driving experience.	
(Please refer to your policy on the terms & conditions)* 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.	

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions 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


 Authorized Signature

Issued by - SGOVKRS on 10/08/2018

IMPORTANT :

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189). The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.