SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be $\underline{\text{completed by the Policyholder and/or the Authorised Driver}}$
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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	22/12/2015 20:24								
Date Of Accident	22/12/2015 08:50								
Exact Location Of Accident	BKE								
Country/State of Loss	Singapore								
DETAILS OF OWN VEHICLE									
Vehicle Registration Number	SJU3597X								
Insured/Policyholder									
Name Of Registered Owner	ENG YAN TIAN								
NRIC No	S2638047B								
Email Address	NOEMAIL								
Mobile Phone No	(LOCAL) +65-82901815								
Alternative Phone No	Others-82901815								
Vehicle Particulars									
Manufacturer	TOYOTA								
Model	COROLLA ALTIS-1.6 (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	Third Party								
Vehicle Category	Private Car								
Insurance Company									
Name of Insurance Company	AXA Insurance Singapore Pte Ltd								
Type Of Coverage	Comprehensive								

Fleet Policy No

VA1/GA031104 Policy Number

Cover Note Number

Driver

Name of Driver **ENG YAN TIAN** NRIC No S2638047B Date Of Birth 12/07/1965 Outdoor Occupation **Date Of Driving Pass** 24/03/1983

Driving Experience 32 Years And 8 Months

Male Gender

Mobile Number (Local) +65-82901815

Fax Number

Contact Number Others-82901815

EMail Address NOEMAIL Address BLK 20 DOVER CRESCENT

#03-312

Postcode 130020

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

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General Information of the Accident

Type Of Accident Collision- Chain Collision

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) 2

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? No

If Yes, against whom?

Circumstances of Accident

I WAS TRAVELLING ALONG BKE ON 22/12/15 @ 08:50AM. WE STOPPED ON THE ROAD BECAUSE TRAFFIC JEM IN FRONT OF ME. SUDDENLY WE FELT AN IMPACT FROM BEHIND THAT I REALISED THE VEH C (SGM 7751T) CAME FROM BEHIND HIT TO REAR PORTION OF VEH B (GBC 5124D). VEH B JERK FORWARD HIT TO MY CAR AND MY CAR FORWARD HIT TO VEH D (SHD 5170T).

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBC5124D

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGM7751T

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SHD5170T

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

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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- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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.
- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

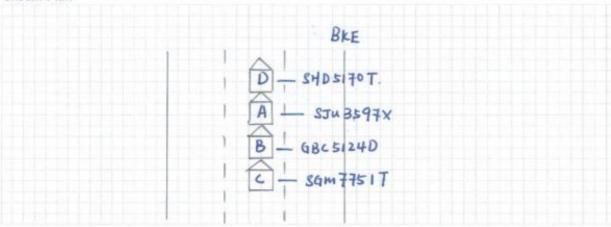


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

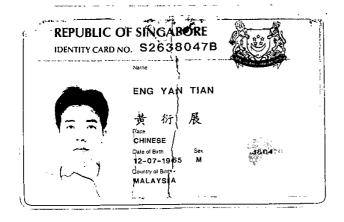
Sketch Plan

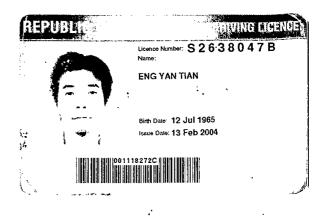


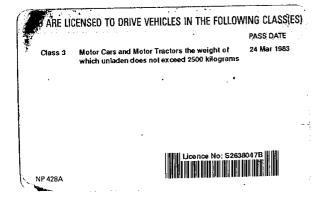
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

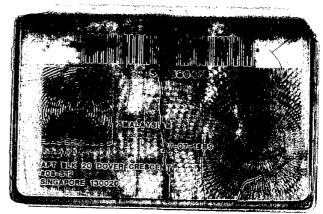
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OWNER'S IC & DRIVING LICENSE Pg.1









CERTIFICATE OF INSURANCE Pg.1





ENG YAN TIAN **BLK 20 DOVER CRESCENT** #03-312 SINGAPORE 130020

AXA Insurance Singapore Pte Ltd 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 ⊠ customer.care@axa.com.sg www.axa.com.sg

Renewal

date 13/04/2015

your servicing distributor JIN-SHI (HOLDINGS) PTE LTD / 03094

your servicing distributor contact 64678380

Policy Schedule

Your SmartDrive Comprehensive Private APW

Your policy snapshot

Policyholder name Cover

ENG YAN TIAN

Policy number

VA1 / GA031104

Period of Insurance

Comprehensive

FIN / NRIC from 29/04/2015 to 28/04/2016 (both dates inclusive) S2638047B

Business/Profession

OTHER OCCUPATION

In the business or profession as declared and no other for the purpose of this insurance

Promitum brookdown

Gross Premium after 40% NCD Total Discounts

SGD 1,034.59 - SGD 52.35 SGD 68.76 SGD 1,051.00

7% GST **Final Premium**

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

Stitut Dilve Comparahensive Private APW Emdit

- Basic Own Damage Excess Reduction for AXA Premium Workshop.
- Medical and dental expenses up to \$500 per person for you or your authorised driver and a passenger
- Personal accident benefit of up to \$30,000 for you and your named drivers
- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Loss of Personal Effects in Singapore up to \$3,000
- Daily Transport Allowance of \$50 for a maximum of 5 days
- Guaranteed Repairs for twelve (12) Months

Risk details

Interested Party

Make & Model of Vehicle Vehicle registration number Body type

Seating capacity (excl driver)

TOYOTA COROLLA ALTIS 1.6 SIU3597X SALOON 4

Year of manufacture Type of Use Engine capacity (c.c.) Engine number

2008 Private use 1598 3774747493 MR053ZEE106103415

Insured's Estimated Market Value Limitation to use

Market Value at the time of Loss (including accessories and spare parts)

Chassis number

As per Certificate of Insurance HONG LEONG FINANCE LIMITED

Excess applicable (refer to Policy Wording for other applicable Excesses)

JIN-SHI (HOLDINGS) PTE LTD

AXA Insurance Singapore Pte Ltd (M2-0009922-2) 8 Shenton Way, #27-01, AXA Tower, Singapore 068811 Customer Care Department, #B1-01

5 Coronation Road #02-05 Coronation Arcade Singapore 269406 Tel: 6467 8380 Fax: 6467 5356 1 of 2

























ODOMETER READING



CHASSIS NUMBER

