

## 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	26/05/2020 11:29
Date Of Accident	23/05/2020 18:00
Exact Location Of Accident	CHANGI AIRPORT T1 JEWEL B3 LOBBY C CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP7997P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIM KIM MOI
NRIC No	S1499338Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92726080
Alternative Phone No	OFFICE-92726080

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE
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 PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P2353376
Cover Note Number	

### Driver

Name of Driver	NIGEL LIU WEI YANG
NRIC No	S8807678H
Date Of Birth	06/03/1988
Occupation	INDOOR
Date Of Driving Pass	12/02/2009
Driving Experience	11 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96747287
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 370 WOODLANDS AVE 1 #10-837
Postcode	730370
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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: : LINDA 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

ON 23/05/2020 AT ABOUT 1800HRS, I WAS TRAVELLING STRAIGHT ALONG CHANGI AIRPORT T1, JEWEL B3, LOBBY C. SUDDENLY, VEHICLE B FAILED TO STOP AT THE STOP LINE, COLLIDED ONTO THE RIGHT PORTION OF MY VEHICLE A, CAUSING THE DAMAGES. I WISHED TO STATE I HAVE IN CAR CAMERA AS EVIDENCE. DUE TO THE GREAT IMPACT, MY CAMERA FELL TO THE FLOOR. I WILL PROCEED TO HAVE A CHECK ON MY CAMERA TO SEE IF THERE IS ANY FAULTY TO IT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SCZ9832J
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	SEOW LI CHANG MARK
NRIC/Passport Number	S8340078A
Contact Number	
Address	
Postcode	

Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)



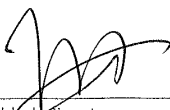
SKETCH PLAN


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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.
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:

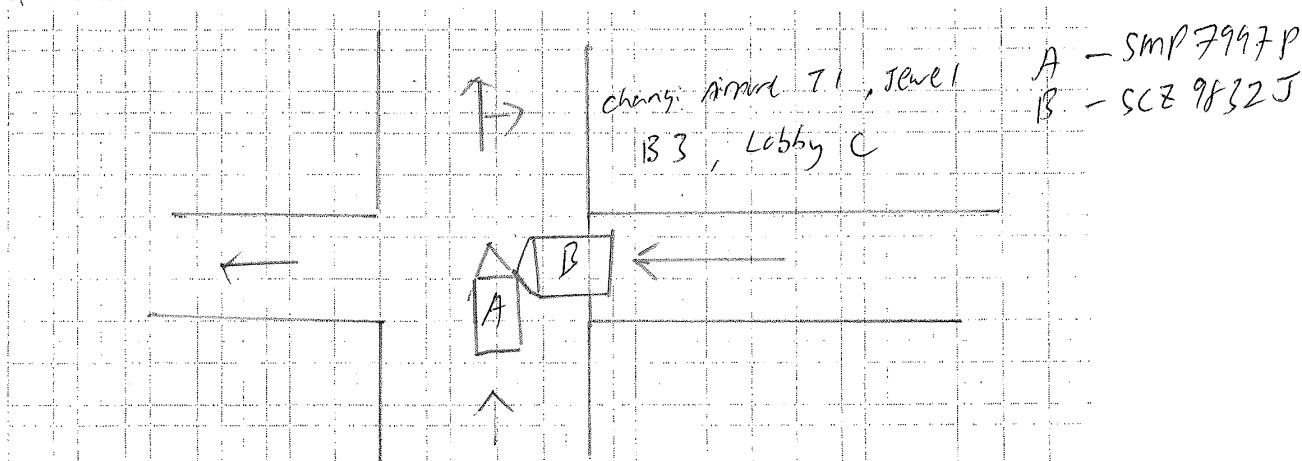
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 23.05.2020, at about 1800, I was travelling straight along Chang Airport T1, Jewel B3 Carpark, Lobby C. Suddenly, vehicle B failed to stop on the stop line, collided to the right portion of my vehicle A, causing the damages. I wished to state I have In-car camera as evidence. Due to the great impact, my camera fell to the floor, I will proceed to have a check on my camera to see if there is any fault to it.

DECLARATION

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

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## LETTER OF UNDERTAKING

I/We, LIM KIM MOI, the owner of vehicle no. SMP7997P

My/Our Insurance is under M/s AXA Insurance Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, CAS GARAGE PTE LTD

Signed and Acknowledge by:

S1499338 & [Signature]  
Nric no. & signature of policyholder

.....  
Company stamp

26/05/20  
Date

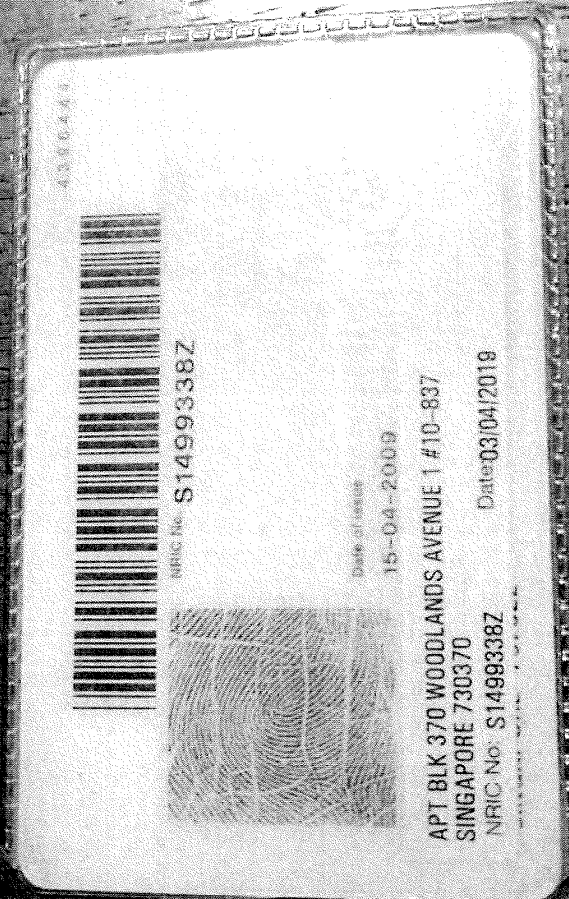
Smp 7997 P

23/05/20




SMP 7997P

23(05) 20






REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S8807678H**



Name: **NIGEL LIU WEI YANG**



Race: **劉 威 揚**


CHINESE

Date of Birth: **06-03-1988**

Sex: **M**

Country/Place of birth: **SINGAPORE**

REPUBLIC OF SINGAPORE DRIVING LICENCE




Name: **LOW WEI YANG, NIGEL (LIU WEIYANG)**

License Number: **S8807678H**

Birth Date: **06 Mar 1988**


Issue Date: **12 Feb 2009**




001708971A

*file*

6378905



NRIC No. **S8807678H**



Date of Issue: **03-02-2020**


Address: **APT BLK 370 WOODLANDS AVENUE 1 #10-837 SINGAPORE 730370**

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

Class 3 Motor Cars < 3500kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg

PASS DATE: **12 Feb 2009**

NP 428A



License No. **S8807678H**

Usage for Insurance Motor Accident Reporting and Claims Purposes Only

Vehicle no: **SWP 7997P**

Date of Accident: **22/05/20**

**AXA INSURANCE PTE LTD**  
 8 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



# **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)

<b>CERTIFICATE NO.</b>	<b>VFA/P2353376</b>	<b>Account No. : 08260</b>
<b>Coverage</b>	<b>Comprehensive</b>	
<b>Sum Insured</b>	<b>Market Value At The Time Of Loss</b>	
<b>Name of Policy Holder</b>	<b>LIM KIM MOI</b>	
<b>Vehicle Registration No.</b>	<b>SMP7997P</b>	
<b>Period of Insurance</b>	<b>From 17/10/2019 To 16/10/2020 (Both Dates Inclusive)</b>	

## **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 : NIL**

An Additional Excess is applicable as follows:  
 S\$500.00 for Unnamed Authorized Driver  
 S\$2,500.00 for Undeclared Young and Inexperienced Driver.  
 (Please refer to your policy on the terms & conditions)

\* Limitations rendered inoperative by Section 3 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).

**N.B :**  
 Your authorised workshop is Komoco Motors Pte Ltd.

**AXA INSURANCE PTE LTD**

**Authorized Signature**

Issued by - **SGOGONT** on **23/11/2019**

## **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 or endorsement etc.

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo

