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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	24/06/2020 11:09
Date Of Accident	23/06/2020 18:20
Exact Location Of Accident	JUNCTION OF MARYMOUNT RD & SUNFU RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLU2628Z
Insured/Policyholder	
Name Of Registered Owner	BEATRICE WONG MAN LING
NRIC No	S2616582B
Email Address	KAI.YIN1989@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98520703
Alternative Phone No	OFFICE-90032272
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HARRIER-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	VA1/GA510606
Cover Note Number	
Driver	
Name of Dairen	MANI IZAL WINI

Name of Driver MAN KAI YIN
NRIC No S8970792G
Date Of Birth 13/11/1989
Occupation INDOOR
Date Of Driving Pass 30/10/2008

Driving Experience 11 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98520703

Fax Number

Contact Number

EMail Address KAI.YIN1989@GMAIL.COM

Address BLK 310 TAMPINES ST 32 #12-130

Postcode 520310

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 - HEAD TO REAR**

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?

Passenger 1

NO

NO

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NAME: : WONG YING JIE

GENDER: : FEMALE

Passenger 2 : PANG KUAN SEOK NAME:

> GENDER: : FEMALE

Passenger 3 NAME: : WONG KHEE WEE

> GENDER: : MALE

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

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

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 SH8448Y

TOYOTA PRIUS BLUE Vehicle Make/Model/Colour

Details Of Properties

TAXI Vehicle Category

Name of Driver TAN KIM SONG S0194037F NRIC/Passport Number

BLK 213 ANG MO KIO AVE 3 #08-1578 Contact Number

Address 560213

Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

			-	1	1/					-
111					- Y		++++			
+++	1			HH	++++				7	
TIT				TTIT						
-1										
				+		- A				
				titi	KL/	AKB				
	6			1-1-1-					-	-
111							1			
11						+	-1-1			
4-1-4				1			444			
+++			-							
ECCDIE	E CIDCUI	ACTAN	CES OF T	HE ACCIDE	NIT					
LOCKIE	SE CIRCUI	VISTAN	CES OF II	HE ACCIDE	IVI					
	Waitmy	4	turn	Right	arto	Shurh	Road	Sno	tono	Knock
	-			-		00	100	one	.0.20	· noc n
1										
no	hu	vecho	(c)	hile	3 w					
	my	veono		hiu	3 4	s station	ng.			
							,			
			-							
	-		-							
			_							
-										
DECLAR										
DECLAR		egoing p	particulars a	are true in e	very respect.					
DECLAR		egoing p	articulars a	are true in e	very respect.					
DECLAR		egoing p	particulars :	are true in e	very respect.					
DECLAR		egoing p	articulars a	are true in e	very respect.					
DECLAR.	are the for		articulars a		M					
DECLAR.	are the for		articulars a	Driver's Sig	nature			orting Centre	Personnel's S	Signature
DECLAR.	are the for		articulars a	Driver's Sig	nature not the policy		Nam		Personnel's S	Signature

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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:
 - 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:
 - 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:

COUNTY SERVICE SAME AND A ST

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

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



redefining / insurance

BEATRICE WONG MAN LING **BLK 310 TAMPINES STREET 32** ##12-130 SINGAPORE 520310

AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

⊠ customer.care@axa.com.sg

www.axa.com.sg

Endorsement

05/11/2019

your servicing distributor AXA DIRECT / 18265

your servicing distributor contact 68804888

Policy Schedule

Your SmartDrive Comprehensive Toyota Prestige Max

Your Policy Schedule has been updated effective 24/11/2019.

Your policy at a glance

Policyholder name Cover

BEATRICE WONG MAN LING

Policy number FIN / NRIC

VA1 / GA510606 S2616582B

Period of Insurance

Comprehensive expiring 23/11/2020

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Toyota Prestige Max Benefits

- Loss or Damage
- Legal Liability
- Windscreen coverage with no Excess
- 24/7 Towing & Transportation in Singapore or Overseas
- Medical and dental expenses up to \$1,500 per person for you, your named drivers and your immediate family members
- Personal Accident Benefits to Insured Limit of Liability: \$\$100,000
- Personal Accident Benefits to Drivers at \$20,000 each and Passengers at \$\$10,000 each
- New for Old Replacement up to 24 months from vehicle registration date
- Loss of personal items in the car up to \$\$3000
- Fixtures and Accessories (Solar Film)
- Hotel accommodation for one (1) night up to \$300
- \$100 Voucher for Windscreen repair at AXA Authorised Windscreen Workshop (Glass-Fix Pte Ltd)
- Guaranteed Repairs for twelve (12) Months for repairs at AXA Authorized Premium Workshop
- Repairs at AXA Authorized Premium Workshop

Add-on Benefits

- Repairs at Distributor Workshop Borneo Motors (Singapore) Pte Ltd (Excess Applicable)
- Daily Transport Allowance of \$80/day up to maximum of 10 days

Vehicle details

Make & Model of Vehicle Vehicle registration number

Body type

Seating capacity (excl driver) Off-Peak car

TOYOTA HARRIER 2.0 SLU2628Z

SUV 4 No

Year of registration

Chassis number

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

2017 Private use 1986 8ARZ099226

JTEKB3GH30J000872

Insured's Estimated Market Value

Limitation to use Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts) As per Certificate of Insurance

DBS BANK LTD

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

Basic Own Damage Excess

SGD 500.00

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01

1 of 2



Driving License





















