

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	11/08/2020 16:44
Date Of Accident	10/08/2020 18:00
Exact Location Of Accident	VICTORIA STEET OUTSIDE VICTORIA HOTEL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG7311P
Insured/Policyholder	
Name Of Registered Owner	STEPHEN LOW ZHIJIE
NRIC No	SXXXX590Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88938050
Alternative Phone No	OFFICE-60000000

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO-1.4 (A)
Exact Purpose for which vehicle was being used at time of accident	WORK 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	GA501831/1
Cover Note Number	

Driver

Name of Driver	STEPHEN LOW ZHIJIE
NRIC No	SXXXX590Z
Date Of Birth	14/02/1984
Occupation	OUTDOOR
Date Of Driving Pass	04/02/2005
Driving Experience	15 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88938050
Fax Number	
Contact Number	OFFICE-60000000
Email Address	NOEMAIL

Address	BLK 156 SIMEI ROAD #06-322
Postcode	520156
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	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?	YES
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)	1

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

Report please refer to sketch Plan

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	SLK4215X
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)	

DETAILS OF INJURED PERSON 1

Name	STEPHEN LOW ZHIJIE
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Approximate Age	
Injuries Sustain	UNKNOWN
Injured person in which vehicle?	SKG7311P
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

SKETCH PLAN

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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' lawyer/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 based 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:

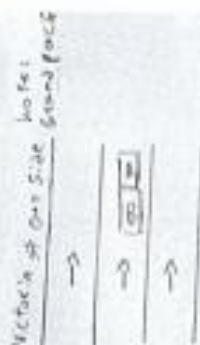
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Ramnu
S1131809E

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the mention date and time I vehicle A
SKG7311P was stationary waiting for traffic light to turn
green suddenly vehicle B SLK4215X rear ended
my vehicle

Vehicle A : SKG7311P

Vehicle B : SLK4215X

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 Canine Personnel's Signature
Name:

NRIC/ID No.:

Rowan
57131509C

Driving License



Driving License




redefining / insurance
AXA Insurance Pte Ltd

 2800 833 8838 (Within Singapore)
 (61) 6556 4588 (International)

(65) 6556 4746

axa@axa.com.sg

www.axa.com.sg

Certificate of Insurance

Account Number

21618

Motor Vehicles (Third Party Risks and Compensation) Act, Chapter 185; Motor Vehicles (Third Party Risks and Compensation) Rules, 1992; Road Transport Act, 1987 (Singapore)
 Motor Vehicles (Third Party Risks and Compensation) Rules, 1992 (Malaysia)

Policy details

Policyholder name	STEPHEN LOH JIN JIE	Certificate number	045033322 / 1
First name	Stephane	Chassis number	VWVW121300V038064
Plan name	Essential	Engine number	00V4181802
ACB applicable	50%		
Vehicle registration number	SP2112SP		
Period of Insurance	From 26/04/2019 to 27/04/2020 (both dates inclusive)		
Insurance broker company	D&S GROUP LTD		

Persons or classes of persons entitled to drive*

(a) The Policyholder

(b) Any person who is driving on the Policyholder's order or with their 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 restriction or regulation in that behalf from driving the Motor Vehicle.

Limitation 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, pornography, reliability trial, speed testing, 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 or not, is in or on, a racing track, circuit, road, closed or any other roads by artificial means called that are typically used for racing, speed testing or such similar purposes.

* Exclusions-reinsurance payable by Insurer that the Motor Vehicles (Third Party Risks and Compensation) Act, Chapter 185 and Section 69 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	\$50,000.00
	Windscreen Excess	\$50,000.00

An Additional Excess is applicable as follows:

1. \$2500 for unlicensed Authorized Driver
2. \$3500 for declared Young and Inexperienced Driver
3. \$80,000 for unlicensed Young and Inexperienced Drivers. This additional excess is reduced to \$82,000 if you have chosen AXA Premium Workshops.

Additional classes & endorsements to your policy

Nil

We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, Chapter 185 and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorized signature

Important note

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 that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 185).

The Premium Elements Clause requires the premium to be paid in full within a specified period before which there would be no liability under the policy. Renewal certificate and endorsement etc.

AXA Insurance Pte Ltd (199603512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B3-01

1 of 2

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

