

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	19/10/2020 13:12
Date Of Accident	17/10/2020 14:30
Exact Location Of Accident	KEPPEL RD TOWARDS ANSON RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP2579H
Insured/Policyholder	
Name Of Registered Owner	LEE WUAN HONG
NRIC No	SXXXX815B
Email Address	LEEKEITH18@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98589646
Alternative Phone No	OTHERS-98589646

Vehicle Particulars

Manufacturer	HONDA
Model	ACCORD-3.5 3.5 V6 (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	GA547031
Cover Note Number	12/08/2020 - 11/08/2021

Driver

Name of Driver	LEE WUAN HONG
NRIC No	SXXXX815B
Date Of Birth	14/09/1975
Occupation	INDOOR
Date Of Driving Pass	04/02/2013
Driving Experience	7 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98589646
Fax Number	
Contact Number	OTHERS-98589646
Email Address	LEEKEITH18@GMAIL.COM

Address	979B BUANGKOK CRESCENT #09-131
Postcode	532979
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	CHAIN COLLISION
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	3
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)	3
Passenger 1	NAME: : JUNE YAP GENDER: : FEMALE
Passenger 2	NAME: : KATE LEE 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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC5278M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	EE BOON SIONG
NRIC/Passport Number	SXXXX853Z
Contact Number	96745764
Address	
Postcode	

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMT4659P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver TAN HEXIANG
NRIC/Passport Number SXXXX847F
Contact Number 92322602
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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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:

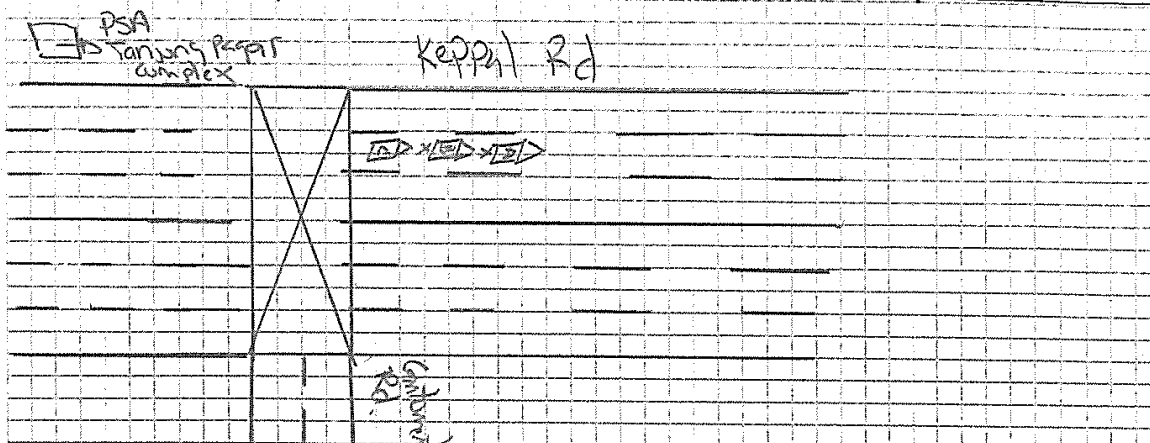


Reporting Centre Personnel's Signature
Name: QIN WY
NRIC/FIN No:

Sketch Plan Pg. 2

SKETCH PLAN

Date of Accident: 17/10/20 Time: 2.30PM Location: Keppel Rd twd Arison Rd
 My Vehicle A: SLP2579H Vehicle B: SMC5278M Vehicle C/Others: SMT4659P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Date of Accident: <u>17/10/20</u>	Time of Accident: <u>2.30pm</u>
Vehicle A: <u>SLP2579H</u>	Vehicle B: <u>SMC5278M</u> Vehc: <u>SMT4659P</u>
<p>Traffic was moving slow, I saw infant vehicle stop. So I proceed to stop. Suddenly I heard a bang from my rear. Vehicle B had collided on to my rear.</p>	
<p>() Claim OD/TP at Ah Lim Motor (X) Claim OD/TP at other workshop () Reporting Only</p>	
<p>Remarks : Please forward a copy of my efile accident report to: My workshop : Accord Auto Services Pte Ltd email address : claims@mycarworkshop.com.sg & myself : email address : Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.</p>	

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.:

4-10-2020 10:10:10



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 19/10/12

To: Owner of Vehicle Number: CLP 257911

The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, ZILAV 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:

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.

WJ
Name and signature of workshop personnel including company stamp



Accord Auto Services Pte Ltd

Tel: 6481 9517 / 9740 0999 Fax: 6481 9516 Email: claims@mycarworkshop.com.sg

Particular Of Insured/Driver & Details Of The Accident

*Date of Accident: 17/10/20 *Time of Accident: 1400-1500 hrs 230pm
 *Accident Location: Keppel Road, (near PSA Engineering) Ford Arson Rd.

Vehicle Details

*Vehicle Number: SLP2579H *Make & Model: Honda B-5 V6

Insured / Policyholder

*Owner Name: Lee Wuan Hong *NRIC: 87527815B
 *Address: 9798 Bangkok Crescent #09-131 S532979
 *Email: kekeeth18@gmail.com *HP: 98589644
 *Occupation: Professional (Indoor / Outdoor) *Tel / H / Other: NA

Driver ☒ same as above

*Driver Name: _____ *NRIC: _____
 *Address: _____
 *Date of Birth: _____ *Driving Pass Date: _____ *HP: _____
 *Email: _____ *Gender: Male / Female
 *Occupation: _____ (Indoor / Outdoor) *Tel / H / Other: _____
 *Driver an employee: Yes / No (*If no, what is relationship with the policyholder: _____)

Passengers Details

*P/Name: June Yap (Male/Female) *P/Name: Mother in Law (Male/Female)
 *P/Name: Kate Lee (Male/Female) *P/Name: _____ (Male/Female)

Insurance Company

*Insurer: _____ *Coverage: C / TPFT / TPO *Policy No: _____

Detail of other vehicle / Property 1 2

Vehicle No.: SME 527BM
 Make & Model: Subaru
 Vehicle Category: _____
 Name of Driver: See Boon Siong
 NRIC : S7423 853 Z
 HP : 96745764
 No. of Passengers (Including Driver): 2

Detail of other vehicle / Property 2 3

Vehicle No.: SMT 4657P
 Make & Model: Honda Fit / Jazz
 Vehicle Category: _____
 Name of Driver: Tan Heng Xiang
 NRIC : S9964B47F
 HP : 92322602 Ning Yi
 No. of Passengers (Including Driver): 2

For Official Use Only

*Claiming against Own Ins.: Yes / No (If No, Reporting Only TP Claims)

General Information of the accident

*Type of accident: Head-Rear / Side swipe / others: chain collision
 *Weather conditions: Clear / Raining / others: _____ *Any video cam: Yes No
 *Road Surface: Dry / Wet / others: _____
 *Witness: Yes / No (Name: _____ NRIC: _____ HP: _____)
 *Accident reported to police: Yes / No *Summon against whom: _____
 *Injured party: Yes / No *No. of passengers (include driver): driver + 3
 -I/Name: _____ *Fasten seat belt: Yes / No *Conveyed by Ambulance: Yes No
 -I/Name: _____ *Fasten seat belt: Yes / No *Conveyed by Ambulance: Yes / No



redefining / insurance

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

Certificate of Insurance

account number
10954

-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)

Policy details

Policyholder name	LEE WUAN HONG	Certificate number	GA547031 / 1
Cover	Comprehensive	Chassis number	MRHCP36308P040043
Plan name	Essential	Engine number	J35Z21952592
NCD applicable	50%		
Vehicle registration number	SLP2579H		
Period of Insurance	from 12/08/2020 to 11/08/2021 (both dates inclusive)		
Finance loan company	Nil		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any Named Driver as stated in the Policy:
 1. YAP BBEE LIAN
 (c) 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 enactment 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, pace-making, 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, 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.
 * 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.

EXCESS	Basic Own Damage Excess	S\$0 400.00
	Windscreen Excess	S\$0 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/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 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised 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 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, endorsement etc.

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

1 of 3

Identification Card Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S7527815B**

Name
LEE WUAN HONG
(LI WENXIONG)

Birth Date: **14 Sep 1975**
Issue Date: **04 Feb 2013**

002145708B

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7527815B**

Name
LEE WUAN HONG
(LI WENXIONG)
李文雄

Race
CHINESE

Date of birth **14-09-1975** Sex **M**

Country of birth
SINGAPORE

STRICTLY
FOR WORKSHOP USAGE
USE FOR ACCIDENT
REPORTING ONLY

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

	EFFECTIVE DATE
Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg	04 Feb 2013

NP 428A

Licence No: **S7527815B**

3791883

NRIC No: **S7527815B**

Date of Issue
07-11-2005

Address
**APT BLK 879B BUANGKOK CRESCENT #09-131
SINGAPORE 532978**

NRIC No: **S7527815B** Date: **16/07/2020**

STRICTLY
FOR WORKSHOP USAGE
USE FOR ACCIDENT
REPORTING ONLY

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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