

## 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	13/11/2020 11:34
Date Of Accident	12/11/2020 13:45
Exact Location Of Accident	AH HOOD ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGS2575L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG YU XUAN NICHOLAS
NRIC No	SXXXX980G
Email Address	NICHOLAS.ONG.YX@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82887765
Alternative Phone No	OTHERS-82887765

### Vehicle Particulars

Manufacturer	TOYOTA
Model	MR-S 1.8 M
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	GA410482
Cover Note Number	08/03/2020 - 07/03/2021

### Driver

Name of Driver	ONG YU XUAN NICHOLAS
NRIC No	SXXXX980G
Date Of Birth	26/10/1989
Occupation	INDOOR
Date Of Driving Pass	27/06/2009
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82887765
Fax Number	
Contact Number	OTHERS-82887765
Email Address	NICHOLAS.ONG.YX@GMAIL.COM

Address	16 GRACE WALK
Postcode	557736
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?	YES
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	MOULMEIN NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE ATTACHED 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

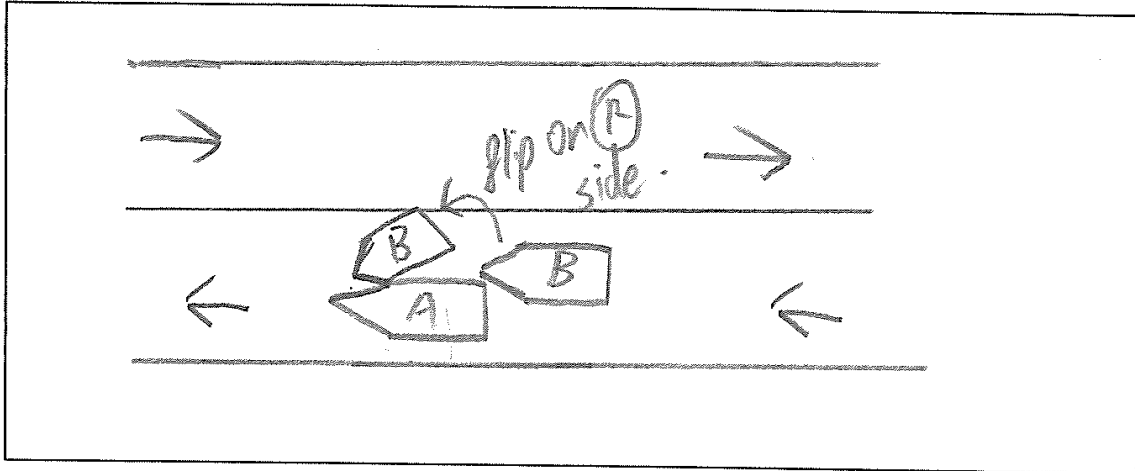
Vehicle Registration Number	SGG222G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PAUL
NRIC/Passport Number	
Contact Number	98571627
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	PAUL
Approximate Age	
Injuries Sustain	BODY UNWELL
Injured person in which vehicle?	SGG222G
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan Pg. 1

Date of accident: 12/11/20 Time: 1345 Location: Ah Hood Road  
 My Vehicle A: SGS2575L Vehicle B: SGG 222G Vehicle C: \_\_\_\_\_  
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report No. T/20201112/2094

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

*[Signature]*

Policyholder's Signature

Date & Time: 13/11/20

GIARMC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AH LIM MOTOR COMPANY

**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:

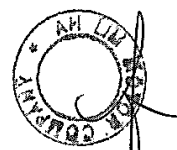
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 13/10/20  
1040am

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



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



**SINGAPORE  
POLICE FORCE**



T/20201112/2094

Police Station Of Origin:  
Moulmein NPP  
101 Jalan Rajah #01-01 SINGAPORE  
321101  
Tel No: 1800-25089999

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Report No. T/20201112/2094

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/11/2020 17:58		Vide Report No.:		Station Diary No.: 22	
<b>Informant's Particulars</b>					
Name of Informant: ONG YU XUAN, NICHOLAS			Address: 16 GRACE WALK SINGAPORE 557736		
ID Type / ID No.: NRIC NO / S8939980G			Contact No.: Home/Office: Mobile: 82887765		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 31	Date of Birth: 26/10/1989	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: DOCTOR			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/11/2020 13:45	Type of Location: Straight Road
Location:  AH HOOD ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGG222G	Car	LEXUS		White	Seriously Damaged	0
SGS2575L	Car	TOYOTA	MR-S 1.8 M	Grey	Seriously Damaged	0

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGS2575L	AXA INSURANCE SINGAPORE PTE LTD	GA410482	08/03/2020	07/03/2021



**SINGAPORE  
POLICE FORCE**



T/20201112/2094

Police Station Of Origin:  
Moulmein NPP  
101 Jalan Rajah #01-01 SINGAPORE  
321101  
Tel No: 1800-25089999

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Report No. T/20201112/2094

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	PAUL	ID No.	NIL
Related Vehicle	SGG222G (Car)	Contact No.	98571627
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	ONG YU XUAN, NICHOLAS	ID No.	S8939980G
Related Vehicle	SGS2575L (Car)	Contact No.	82887765
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 12/11/2020, at about 1345hrs, while I was driving along Ah Hood Rd, I noticed that there were noises coming from my vehicle's (SGS2575L) engine. Hence I pulled over by the side and made a check.

I alighted my vehicle and was at the rear doing my checks, I then noticed a white vehicle approaching me at a speed that seemed like it wasn't stopping. Hence, I moved away and the vehicle (SGG222G) knocked into my vehicle on the right rear area. Thereafter, the vehicle's (SGG222G) left wheel mounted my vehicle and it toppled sideways. One of the passerby's witnessed it and called for ambulance. Along with a few passerby, we managed to pull the owner of SGG222G out of the vehicle.

Ambulance and traffic police arrived and took over the situation. My vehicle was then towed back to my workshop. I wish to state that I sustained no injury.



**SINGAPORE  
POLICE FORCE**



T/20201112/2094

Police Station Of Origin:  
Moulmein NPP  
101 Jalan Rajah #01-01 SINGAPORE  
321101  
Tel No: 1800-25089999

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Report No. T/20201112/2094

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: E / Sgt 2 KOH WEN JUE 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 12/11/2020 17:58
Officer In Charge Of Case: TP / GIT / Staff Sgt TAN JUN YAN Contact No.: 65476311	Classification Of Case: <div data-bbox="614 1825 813 1904" data-label="Image"> </div> <div data-bbox="1013 1836 1085 1870" data-label="Text"> <p>SN 80</p> </div>
Authentication Stamp NP168	<div data-bbox="614 1904 1093 2027" data-label="Text">                   SIGNATURE             </div>





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  
16766

-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	ONG YU XUAN NICHOLAS	Certificate number	GA410482 / 1
Cover	Comprehensive	Chassis number	ZZW300077994
Plan name	Peace	Engine number	1ZZ2842740
NCD applicable	30%		
Vehicle registration number	SGS2575L		
Period of Insurance	from 08/03/2020 to 07/03/2021 (both dates inclusive)		
Finance loan company	Nil		

### 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 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.

<b>EXCESS</b>	Basic Own Damage Excess	SGD 500.00
	Windscreen Excess	SGD 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.



## POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 13/11/2020 To: Owner of Vehicle Number: SGS 2575 L

The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, Eileen, Zia, Mui Hong, Wei Jie. 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.
- ( ) ( ) You have agreed to let AXA assign a workshop for your vehicle repairs. In the process, your vehicle might be towed out to another workshop assigned by AXA. In return, you will get:
- > \$200 off on your Basic Own Damage Excess or
  - > \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit or
  - > Additional \$200 on top of existing Loss of Use Benefit if your policy has \$0 excess and existing Loss of Use benefit
- ( ) ( ) 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 \_\_\_\_\_

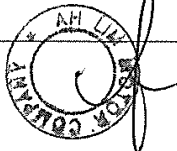
Signed and acknowledged by:

Nicholas Ang

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.

\_\_\_\_\_  
Name and signature of workshop personnel including company stamp



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo

