

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 Submission 18/12/2020 15:40 (SGT)
Date of Accident 16/12/2020 17:32 (SGT)
Exact Location of Accident Sims Ave, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLE9307M

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LEE JIA LI KELLY
NRIC No SXXXX016J
Email Address kellyjl.83@gmail.com
Mobile Phone No (Phone) +65-88212993
Alternative Phone No +65-88212993

VEHICLE PARTICULARS

Manufacturer Honda
Model Fit
Variant -
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 - Claiming third party
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA443568
Cover Note Number -

DRIVER

Name of Driver SIM GEOK KEE
NRIC No SXXXX020E
Date Of Birth 24/01/1957
Occupation Indoor

Date Of Driving Pass	29/08/1978
Driving experience	42 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-88212993
Alt. Phone Number	-
Email Address	noemail@noemail.com
Address	BLK 872 TAMPINES ST 84 #06-81
Address complement	-
Postcode	520872
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	CHEW WEI
Gender	Male

PASSENGER 2

Name	KENG HUA
Gender	Male

PASSENGER 3

Name	KELLY LEE
Gender	Female

PASSENGER 4

Name	BEE LAN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS ON SECOND LANE ALONG SIMS AVE MAKING A RIGHT TURN INTO TANJONG KATONG ROAD. WE WERE ALONG SIDE EACH OTHER VEHICLE. VEHICLE B SUDDENLY PICK UP AND HEAD STRIAIGHT, BANGING ONTO THE FRONT REGION OF MY CAR. AFTER THE ACCIDENT, VEHICLE B OWNER REFUSED TO ADMIT LIABILITY CLAIMING THAT HIS LANE CAN GO STRAIGHT AND I WAS THE PERSON WHO HAD CAUSED THE ACCIDENT. I WILL PROCEED TO FILE A POLICE REPORT.

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	SJY867R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

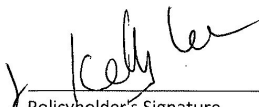
SKETCH PLAN**IMPORTANT NOTICE**

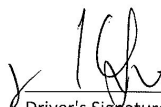
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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

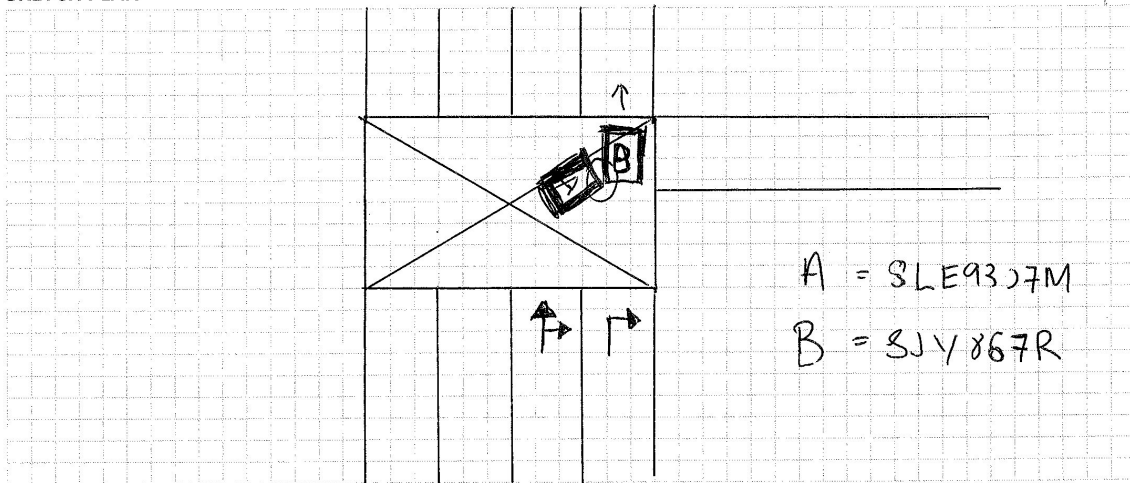
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

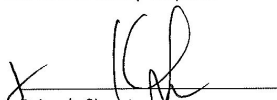
I was on second lane along Sims ave making a grt right turn into tanjong Katong Road. We were along side each other vehicle. Vehicle B suddenly pick up and head straight, banging onto the front region of my car.

~~He insisted~~ After the accident, vehicle B owner refused to admit to liability claiming that his lane can go straight. and I was ^{the} person who had cause the accident. I will proceed to file a police report.

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.:


















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

LEE JIA LI KELLY
 05-04
 36 MOONSTONE LANE
 SINGAPORE 328468

Renewal

date
13/02/2020

your servicing distributor
INSURE LINK PTE LTD / 04247

your servicing distributor contact
64444644

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name	LEE JIA LI KELLY	Policy number	VA1 / GA443568
Cover	Comprehensive	FIN / NRIC	S8327016J
Period of Insurance	from 06/03/2020 to 05/03/2021 (both dates inclusive)		

Premium breakdown

Gross Premium after 40% NCD	SGD 896.26
7% GST	SGD 62.74
Final Premium	SGD 959.00

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

Vehicle details

Make & Model of Vehicle	HONDA FIT 1.5	Year of manufacture	2008
Vehicle registration number	SLE9307M	Type of Use	Private use
Body type	HATCHB	Engine capacity (c.c.)	1496
Seating capacity (excl driver)	5	Engine number	L13A4036130
Off-Peak car	No	Chassis number	GE61032039

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	Nil

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

Basic Own Damage Excess	SGD 300.00
Windscreen Excess	SGD 100.00

Drivers details

Driver type	Driver name	Date of birth	Driving experience
Main Driver	LEE JIA LI KELLY	31/08/1983	18 year(s)

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

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