SB0G211C0003 / Borneo Motors Pte Ltd
ENTRY DATE & TIME: 12/01/2021 14:16 (SGT)
SUBMITTED BY: Ashlyn Chng
VERSION: 1 (12/01/2021 14:16 (SGT))

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 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.

ACCIDENT STATEMENT

Date of Submission	12/01/2021 14:16 (SGT)
Date of Accident	11/01/2021 19:05 (SGT)
Exact Location of Accident	Paya Lebar Rd, Paya Lebar Road Park, Singapore
Additional Location Information	PAYA LEBAR ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGS8900S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SOPHIA NG LEE PENG
NRIC No	S1470197D
Email Address	GLASGWHO@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-96742788
Alternative Phone No	(Home) +65-96742788

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Axa
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA546351/1
Cover Note Number	-

DRIVER

Name of Driver	VINCENT HO PANG CHENG
NRIC No	S1154989F
Date Of Birth	30/10/1956
Occupation	Indoor

Date Of Driving Pass	29/12/1976
Driving experience	44 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96742788
Alt. Phone Number	-
Email Address	GLASGWHO@SINGNET.COM.SG
Address	89 BLOXHOME DRIVE
Address complement	-
Postcode	559783
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

ATTACHMENT(S)

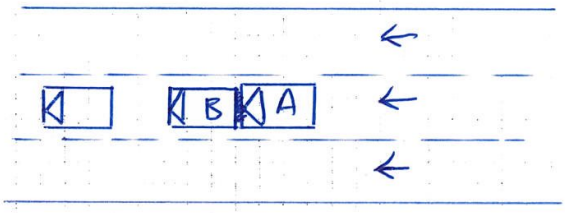
Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC2611D
Vehicle Manufacturer	Mercedes
Vehicle Model	E200
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	BOEY LIH HAN
NRIC No	S7705583E
Contact Number	(Phone) +65-92287655
Address	-
Address complement	-
Postcode	-

Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was driving along Paya Lebar Rd, the car (SMC 2611D) suddenly stopped immediately. ~~My~~ I braked immediately but still hit his back.
The driver told me the taxi infront suddenly stopped to avoid another car.

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.:

SKETCH PLAN

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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. 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: NRIC/FIN No.:

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

IMAGES #6

Date: 12/1/21

Attention: _____

LETTER OF AUTHORIZATION

I, NG LEE PENG SAMMY NRIC No. S1470197D, owner of vehicle no. SGS 8900S, authorize VINCENT HO PANG CHEONG NRIC No. S1154989F, to file an accident report and claim insurance for my vehicle.

SIGNATURE

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

SOPHIA NG LEE PENG
89 BLOXHOME DRIVE
SINGAPORE 559783

New business

date
17/07/2020

your servicing distributor
TM DIRECT-JOSHUA PINEDA / 14684

your servicing distributor contact

Policy Schedule

Your *SmartDrive Comprehensive Flexi Family*

Your policy snapshot

Policyholder name	**SOPHIA NG LEE PENG**	**Policy number**	**VA1 / GA546351**
Cover	**Comprehensive**	**FIN / NRIC**	**S1470197D**
Period of Insurance	from **28/07/2020** to **27/07/2021** (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,331.39
7% GST	SGD 93.20
Final Premium	**SGD 1,424.59**

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

Smart*Drive Comprehensive Flexi Family* Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Loss or Damage
- Legal Liability
- Workshop of Your Choice
- Personal accident benefit of up to $60,000 per person for you, your named drivers and your immediate family members
- Waiver of Named Young or Inexperienced Driver Excess
- Loss of personal effects in Singapore up to $6,000
- Medical and dental expenses up to $5,000 per person for you, your named drivers and your immediate family members
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)
- Monthly allowance of $3,000 for each injured person for you and your spouse up to eighteen (18) months in case of permanent disablement

Claim Protector Pack Benefits

- Basic own damage excess waiver
- No Claim Discount Protector

Vehicle details

Make & Model of Vehicle	**TOYOTA HARRIER 2.0 TURBO**	**Year of manufacture**	**2020**
Vehicle registration number	**SGS8900S**	Type of Use	Private use
Body type	SUV	Engine capacity (c.c.)	1998
Seating capacity (excl driver)	6	Engine number	8ARZ205821
Off-Peak car	No	Chassis number	JTEZB3GH20J005804

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	UNITED OVERSEAS BANK LIMITED

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