

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 08/04/2021 16:40 (SGT)
Date of Accident 06/04/2021 06:35 (SGT)
Exact Location of Accident Singapore
Additional Location Information Jalan Membina
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKZ1976K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Chow Wai Meng
NRIC No S1704308J
Email Address chowwaimeng@singnet.com.sg
Mobile Phone No (Phone) +65-96572480
Alternative Phone No +65-96572480

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla Altis 1.6
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 - Reporting only
Vehicle Category Private car
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA514031
Cover Note Number -

DRIVER

Name of Driver Chow Yue Sum
NRIC No S0278419Z

| | |
|--|-----------------------------|
| Date Of Birth | 10/07/1937 |
| Occupation | Indoor |
| Date Of Driving Pass | 20/12/1957 |
| Driving experience | 63 YEARS AND 4 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-93660321 |
| Alt. Phone Number | - |
| Email Address | chowwaimeng@singnet.com.sg |
| Address | Blk 23 Jalan Membina #12-76 |
| Address complement | - |
| Postcode | 163023 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Parent |
| 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 | Clear |
| Road Surface | Dry |

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? | Yes |
| Police Station Name | Tiong Bahru Neighbourhood Police Post |
| Police Station Phone No | (Phone) +65-18007759999 |
| Alt. Police Station Phone No | (Fax) +65-67764246 |
| Police Station Address | Blk 128 Kim Tian Road #01-123/ 125 Singapore 160128 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

Refer to sketch plan

ATTACHMENT(S)

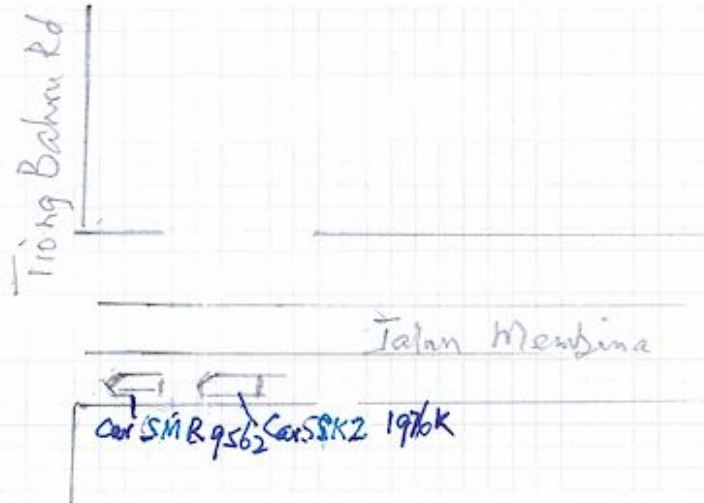
| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | No |
| Was there any audio recorded? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------------|-------------|
| Vehicle Registration Number | SMR9562 |
| 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 -
No. Of Passenger (Including Driver) -

SKETCH PLAN

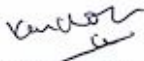



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 6/4/21 at about 6.35am I was driving my Car SKZ 1976K. I was driving at Jalan Membina toward Tiong Bahru Rd traffic light. At that time, a white Car SMR 9562 stopped at traffic light in front of my car. About one second my car moved forward at a slow moment and hit the white Car SMR 9562's back. There were no damage with both cars and there was no human injury too.

DECLARATION

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


 Policyholder's Signature
 Date & Time: 6/4/2021 6:35am


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 6/4/21 6:35am


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









