

# 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 ..... 15/04/2021 11:06 (SGT)  
Date of Accident ..... 14/04/2021 17:30 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... KALLANG WAY  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMH6790S

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... KANG MING SHUN WILSON (TANG MINGSHUN)  
NRIC No ..... S8727564G  
Email Address ..... kang.wilson@hotmail.com  
Mobile Phone No ..... (Phone) +65-98420420  
Alternative Phone No ..... +65-98420420

### VEHICLE PARTICULARS

Manufacturer ..... Hyundai  
Model ..... Avante  
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? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1600

### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... VPA/P2246554  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... LOKE JIA QI , KIMBERLY  
NRIC No ..... S9237291Z

Date Of Birth .....	02/10/1992
Occupation .....	Indoor
Date Of Driving Pass .....	25/08/2016
Driving experience .....	4 YEARS AND 8 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-90285464
Alt. Phone Number .....	-
Email Address .....	KIMBERLY_LOKE@HOTMAIL.COM
Address .....	BLK 677B YISHUN RING ROAD #06-1972
Address complement .....	-
Postcode .....	762677
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 .....	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? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER SKETCH PLAN & STATEMENT

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SLZ8371Y
Vehicle Manufacturer .....	Honda
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	TAN JEANNE
NRIC No .....	S7423994C
Contact Number .....	(Phone) +65-92967471
Address .....	-

Address complement .....	-
Postcode .....	-
Insurance Company Name .....	Sompo Insurance Singapore Pte. Ltd.
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**AXA INSURANCE PTE LTD**  
 8 Shenton Way, #24-01  
 AXA Tower, Singapore 068811  
 Customer Centre #01-21  
 Tel: 1800 8804888 Fax:-  
 Website: www.axa.com.sg  
 GST Registration Number: 199903512M  
 customer.care@axa.com.sg

**CERTIFICATE OF INSURANCE**

■ 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)

<b>CERTIFICATE NO.</b>	<b>VPA/P2246554</b>	<b>Account No. : 08260</b>
<b>Coverage</b>	<b>Comprehensive</b>	
<b>Sum Insured</b>	<b>Market Value At The Time Of Loss</b>	
<b>Name of Policy Holder</b>	<b>KANG MING SHUN WILSON (TANG MINGSHUN)</b>	
<b>Vehicle Registration No.</b>	<b>SMH6790S</b>	
<b>Period of Insurance</b>	<b>From 30/01/2021 To 29/01/2022 (Both Dates Inclusive)</b>	

**PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\***

- (a) The Policyholder  
 The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner
- (b) Any other person who is driving on the Policyholder's order or with his 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.

**LIMITATIONS 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, speedtesting, 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.

(01)

**Basic Own Damage Excess**

:

An Additional Excess is applicable as follows:

S\$500.00 for Unnamed Authorized Driver

S\$2,500.00 for Undeclared Young and Inexperienced Driver.

(Please refer to your policy on the terms & conditions)


\* 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.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

**N.B :**

Your authorised workshop is Komoco Motors Pte Ltd.

AXA INSURANCE PTE LTD

  
 Authorized Signature

Issued by - SGOLAKS on 23/12/2020

**IMPORTANT :**

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, covernote and endorsement etc.

## SKETCH PLAN

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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 purposes 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:

15 Apr 2021 09:50

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was at a traffic light junction at the intersection of Kallang Way. The traffic was red and my car was at complete stop. When the light turn green, I move off. The front car (SLZ 8371 Y) also move off. There was another lorry in front of SLZ 8371 Y which brake, causing SLZ 8371 Y to brake. I did not brake in time, and ~~knock~~ knock into SLZ 8371 Y rear bumper.

DECLARATION

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

*[Signature]*

*[Signature]*































