

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	08/06/2021 13:52 (SGT)
Date of Accident	08/06/2021 08:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF TPE SLIP ROAD AND TAMPINES AVE 10
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD9448S
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	200303878K
Company Reg No	TXXXXXXXXXXXXXXXXXXXXX LTD
Email Address	Claims@transcab.com.sg
Mobile Phone No	(Phone) +65-62866666
Alternative Phone No	(Office) +65-62866666

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1767

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	VFX/P2413997
Cover Note Number	-

DRIVER

Name of Driver	PNG BAN HUAT PAUL
NRIC No	SXXXX937Z

SKETCH PLAN

A - SHD 94418
B - SHD 36880

Dampier Ave 10

TPE SHIP ROAD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

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

VERIFY BY AJAX MARS (ARC) REPORTING OFFICER
WONG JUN KEAT

Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELING ALONG TPE SLIP ROAD TOWARDS TAMPINES AVE 10 . WHEN I STOPPED MY VEHICLE FOR CHECKING THE ONCOMING TRAFFIC , SUDDENLY VEHICLE B COLLIDED ONTO REAR OF MY VEHICLE .

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:

8/6/2021

VERIFY BY AJAX MARS (ARC)

REPORTING OFFICER

WONG JUN KEAT

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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