SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 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.

- 3. Information provided must be as truthful and accurate as possible. Only William and 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	08/06/2021 13:52 (SGT) 08/06/2021 08:45 (SGT) Singapore JUNCTION OF TPE SLIP ROAD AND TAMPINES AVE 10 Singapore
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DETAILS OF OWN VEHICLE

CHUOVISC

,	SHU3440S
INSURED/POLICYHOLDER	Ave.
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes 200303878K TXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
VEHICLE PARTICULARS	

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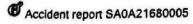
Vehicle Registration Number

Model	Prius
Variant	
Exact purpose for which vehicle was being used at time of	LANDSHEE VALUE
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
	for

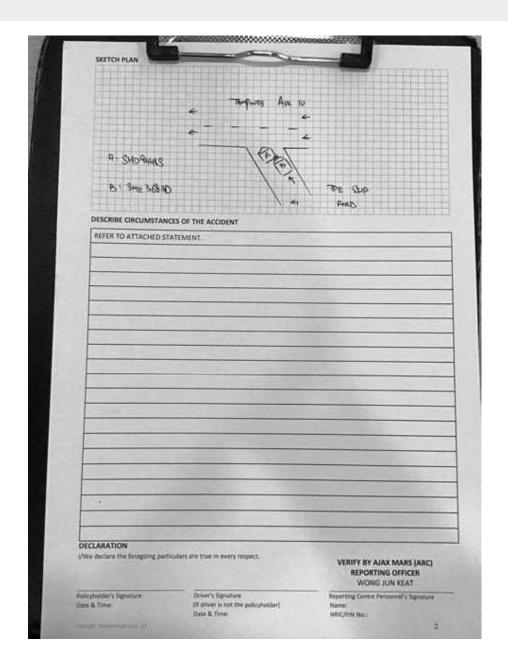
INSURANCE COMPANY

AXA Insurance Pte Ltd
. ThirdParty
Yes
VFX/P2413997
•

Name of Driver	PNG BAN HUAT PAUL
NRIC No	SXXXX937Z



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SKETCH PLAN			
REFER TO ATTAC	CHED ACCIDENT DIAGRAM		
DESCRIBE CIRCUMSTANCE		OWARDS TAMPINES AVE 1	
VEHICLE.			
DECLARATION			
I/ we declare the foregoing part	iculars are true in every respect.	VERIFY BY AJAX MARS (ARE REPORTING OFFICER WONG JUN KEAT	c)
Policyholder's Signature Date & Time:	Oriver's Signature (If driver is not the policyholder) Date & Time: 8/6/2021	Reporting Centre Personnel's Signatus Name: NRIC/FIN-No.:	
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