

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 25/03/2021 12:10 (SGT)
Date of Accident 23/03/2021 15:55 (SGT)
Exact Location of Accident Singapore
Additional Location Information COLLYER QUAY TOWARDS NICOLL HIGHWAY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKW6026K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHOONG SHEEN MAO
NRIC No S8825297G
Email Address sheenm20@emf.com.sg
Mobile Phone No (Phone) +65-97562239
Alternative Phone No +65-97562239

VEHICLE PARTICULARS

Manufacturer Porsche
Model Macan
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1984

INSURANCE COMPANY

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

DRIVER

Name of Driver CHOONG SHEEN MAO
NRIC No S8825297G

Date Of Birth	13/07/1988
Occupation	Indoor
Date Of Driving Pass	30/07/2008
Driving experience	12 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97562239
Alt. Phone Number	+65-97562239
Email Address	sheenm20@emf.com.sg
Address	5 DRAYCOTT DRIVE #27-01 SPORE 259420
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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 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	SHB834E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YQ630X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
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)	-

INJURED PERSONS DETAILS

INJURED 1


Name of injured person	CHOONG SHEEN MAO
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKW6026K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

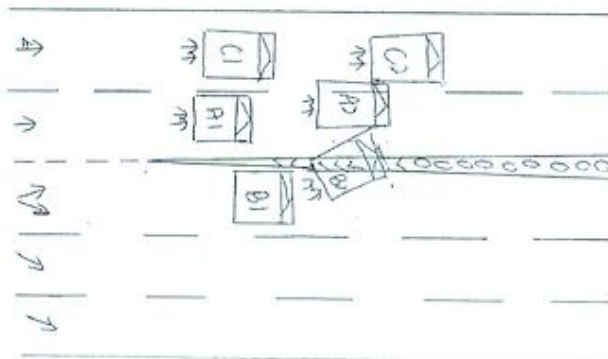
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer , my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or 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 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.


 Policyholder's Signature / Date & Time


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


 Witnessed by Reporting Centre Personnel

Sketch Plan



Vehicle A: SKW6036K
 Vehicle B: SHB834E
 Vehicle C: YQ630X

Collyer Quay towards Nicoll Highway

Describe Circumstances of the Accident

On the stated date & time, I, vehicle A (SKW606K) was travelling along at the stated location on the second lane from the left. Suddenly, vehicle B (SHB634E) which was initially stationary in the third lane from the left cut across the chevron marking and double white lines between the 2nd and 3rd lanes from the left into my vehicle's path abruptly.

I was totally caught unaware as I had not anticipated that a vehicle would perform an illegal manoeuvre by cutting across the chevron marking and double white lines.

I jammed on my brakes and swerved to the left in order to avoid the collision but to no avail. Vehicle B (SHB634E) collided into my front right portion and pushed me over to the extreme left lane, resulting in me colliding into the rear right portion of vehicle C (YQ630X).

Declaration

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


Witnessed by Reporting Centre Personnel

















Underwritten by:



redefining / insurance

Distributed by:



6220 9266 motor@gm.com.sg

AXA Insurance Pte Ltd

1800 880 4888

(65) 6880 4740

customer.care@axa.com.sg

www.axa.com.sg

date

29/10/2020

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))

Policy details

Policyholder name	CHONG SHEEN MAO (ZHONG XUNMAO)	Certificate number	GA406733 / 1
Cover	Comprehensive	Chassis number	WP1ZZ295ZGLB05849
Plan name	Porsche Prime	Engine number	139290
NCD applicable	50%	Finance loan company	HL BANK
Vehicle registration number	SKW6026X	Sum Insured	SGD 179,000
Period of Insurance	from 05/11/2020 to 05/11/2021 (both dates inclusive)		

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 Named Driver as stated in the Policy

(c) 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.

Limitation 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, speed testing, 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.

* 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.

EXCESS	Sect I - Used In Spore Only	SGD 2,000.00
	Sect I - Used Outside Spore	SGD 4,000.00
	Fire&Theft - Outside Spore	SGD 4,000.00
	Windscreen Excess	SGD 500.00

An Additional Section 1 Excess of \$3,000 will apply for Authorized drivers who are at the age of 23 years old or below and/or with less than 3 years of driving experience.

Additional clauses & endorsements to your policy

Nil

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

AXA Insurance Pte Ltd

Authorized signatory

Important note

AXA Insurance Pte Ltd (199903512M)
8 Shenton Way, #24-01, AXA Tower,
Singapore 068811
Customer Centre, #B1-01

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