## **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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 16/08/2021 16:48 (SGT) Date of Accident 15/08/2021 18:35 (SGT) Exact Location of Accident Singapore Additional Location Information CITY HALL B2 CAR PARK ENTRANCE Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SI B1086T

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **CHAN BAN GUAN SUNNY** NRIC No. S1264440Z Email Address SKYBERRYTREE@GMAIL.COM Mobile Phone No (Phone) +65-97287022 Alternative Phone No +65-97287022

#### VEHICLE PARTICULARS

Manufacturer Hyundai Model Avante Variant Exact purpose for which vehicle was being used at time of accident 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 Nο Policy Number CN136705 Cover Note Number

#### DRIVER

Name of Driver **CHAN BAN GUAN SUNNY** NRIC No. S1264440Z

Date Of Birth 03/12/1956 Occupation Indoor Date Of Driving Pass 26/04/1977 Driving experience 44 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-97287022 Alt. Phone Number +65-97287022 Email Address SKYBERRYTREE@GMAIL.COM Address BLK 317 SERANGOON AVE 2 #14-234 Address complement Postcode 550317 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 Side Swipe Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name CHEW PECK HOON ESTHER Gender Female PASSENGER 2 Name CHAN YING HUI STEPHANIE Gender Female PASSENGER 3 Name CHAN LI ZAN EPHRAIM Gender DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο 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**

SKS8069U
Audi
Tt
-
-
Private car
CHARLES CHANG
(Phone) +65-96886610
-
-
-
-
GRAZING ON FRONT & REAR R/H MUD GUARDS
-
-

## AXA INSURANCE PTE LTD

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



#### Original

Agent Code: 08260

Policy No.(if any): TBA

**New Business** 

SmartDrive Quote Ref:

## MOTOR COVER NOTE

- The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore; or
   The Road Transport Act 1987 of Malaysia; or
   The Agreement between the Minister of Finance (Singapore) and the Motor Insurers' Bureau of Singapore dated

22 February 1975; or

• The Agreement between the Minister for Transport (Malaysia) and the Motor Insurers' Bureau of West Malaysia dated 30 March 1992;

• And any subsequent revisions to the above Acts and Agreements

The Insured mentioned in the Schedule, having proposed for insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

## SCHEDULE

AXA PREMIUM WORKSHOP?	NO
EXCESS (S\$)	AS PER POLICY
PERIOD OF INSURANCE	FROM: 12/07/2021 TO: 11/07/2022
VALUE (S\$)	AS PER MARKET VALUE
The state of the s	NIL /
HIRE PURCHASE	COMPREHENSIVE
COVER TYPE	
ENGINE CAPACITY/TONNAGE	1598
CHASSIS NO.	KMHLN41ETNU212434
ENGINE NO.	G4FMMU047532 /
YEAR OF MANUFACTURE	2021
VEHICLE REGISTRATION NO.	SLB1086T
MAKE AND DESCRIPTION OF VEHICLE	HYUNDAI AVANTE 1.6 AUTO ELITE (SIR)
INSURED	CHAN BAN GUAN SUNNY
THE COMPANY	AXA INSURANCE PTE LTD

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA).

AXA INSURANCE PTE LTD

Issued by Rosnani BTE MOHAMAD NOOR on 12/07/2021 3:02 pm

Authorised Signature

Note: This Cover Note is only valid for 60 days from the date of issue unless replaced by the Certificate of Insurance issued by the Company.

- Premium for time on risk will be charged subject to minimum of S\$53.50 (inclusive of GST), if the policy is cancelled after the inception date.
- An administrative fee of S\$26.75 (inclusive of GST) will be charged:
   Cover note issued and cancelled before inception.

  - Retaining the old registration number for a new vehicle insuring with AXA.

## PREMIUM WARRANTY

For Individual Customers:

Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

For Non-Individual Customers:

Please note that where the period of cover is for more than 60 days, the premium in full should be paid within 60 days on inception / renewal / endorsement. For all other cases, the premium in full should be paid before inception.

MTR/C/NOTE/V01/03

#### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- The lasue and acceptance of this Formby 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.
- 8. The 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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 deta/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' law yers/faw 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 law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

SLB10867

Witnessed by Reporting Centre Personnel

Sketch Plan

Car Park Bawier

From.

SKS 8069 U

car Park

CITY HALL B2 CARPARK ENTRANCE

2

Describe Circumstances of the Accide	nt 1: 1 with with
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my family (wite, s	on and daughter) to City Hall for
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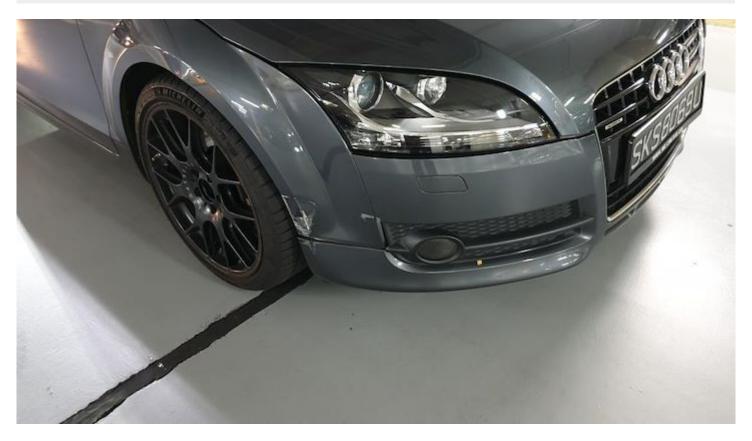
## Declaration

IWe 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













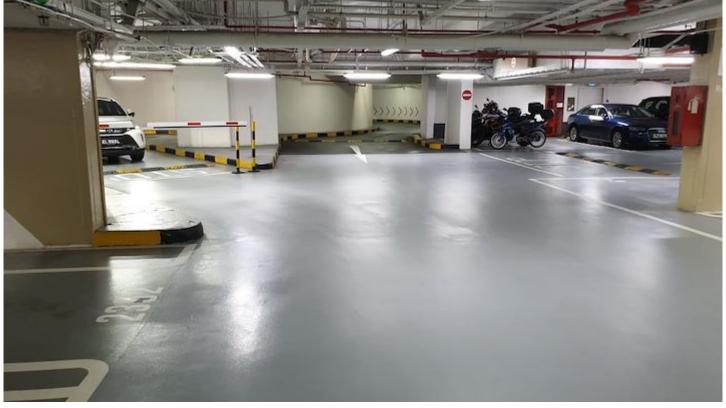


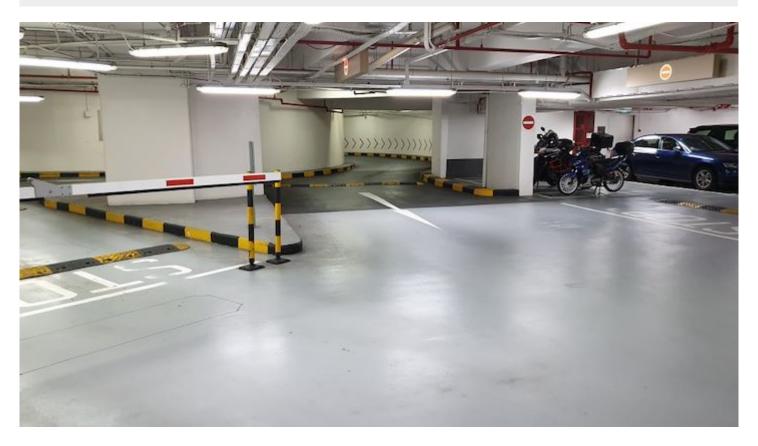




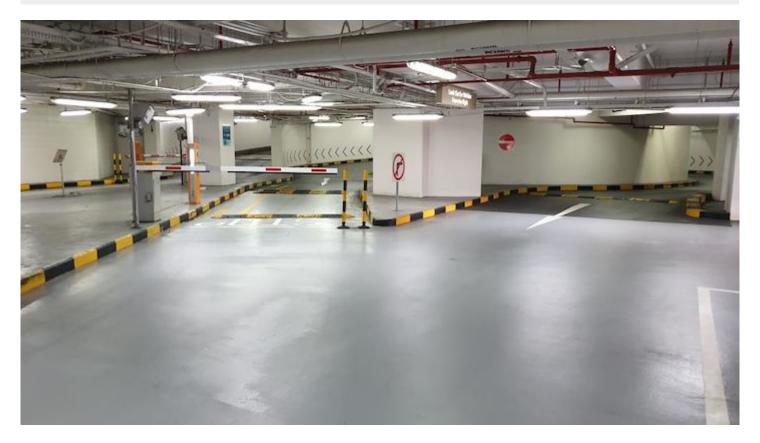






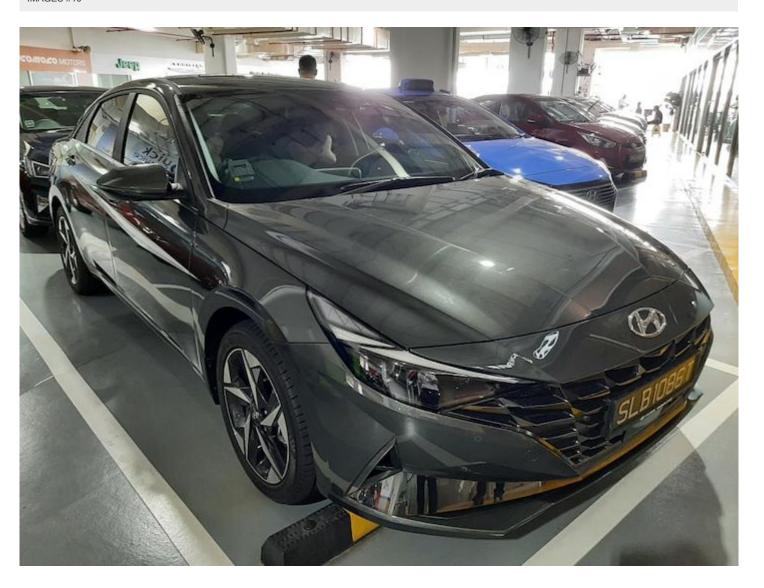


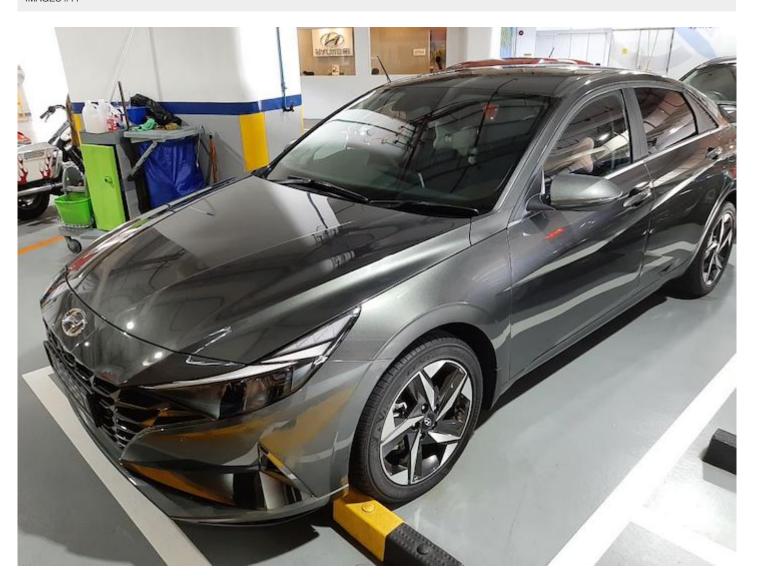


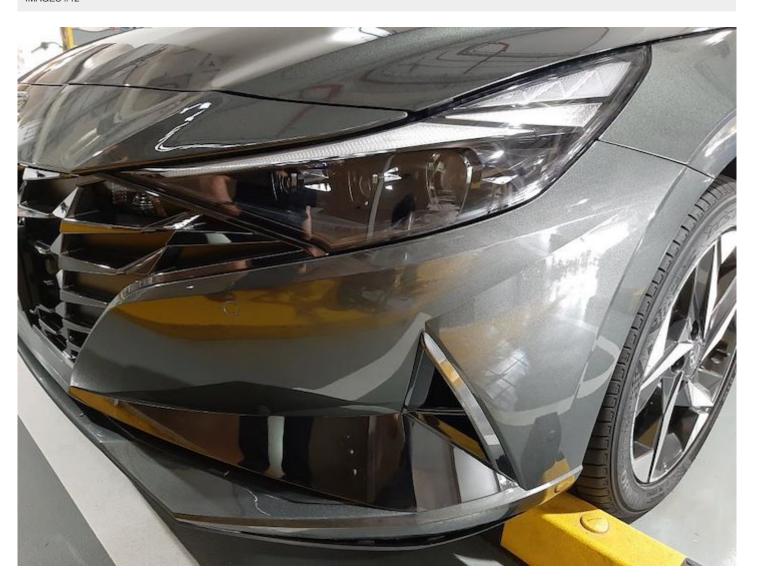


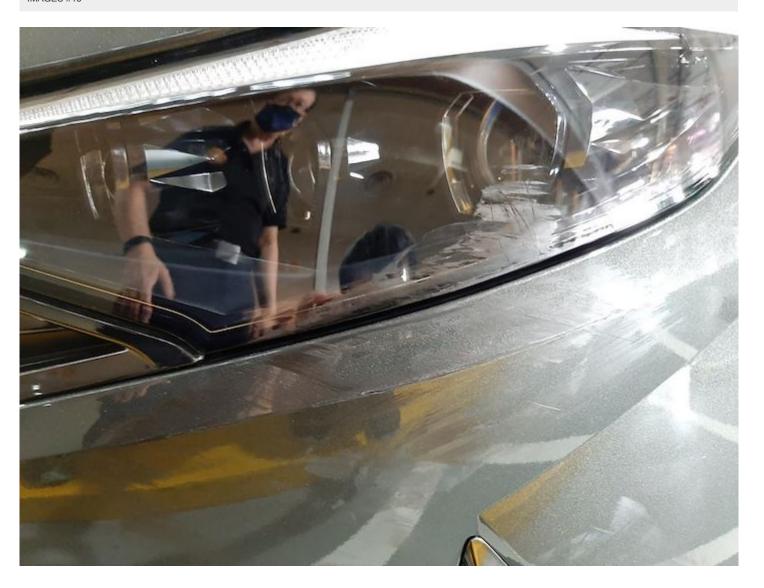


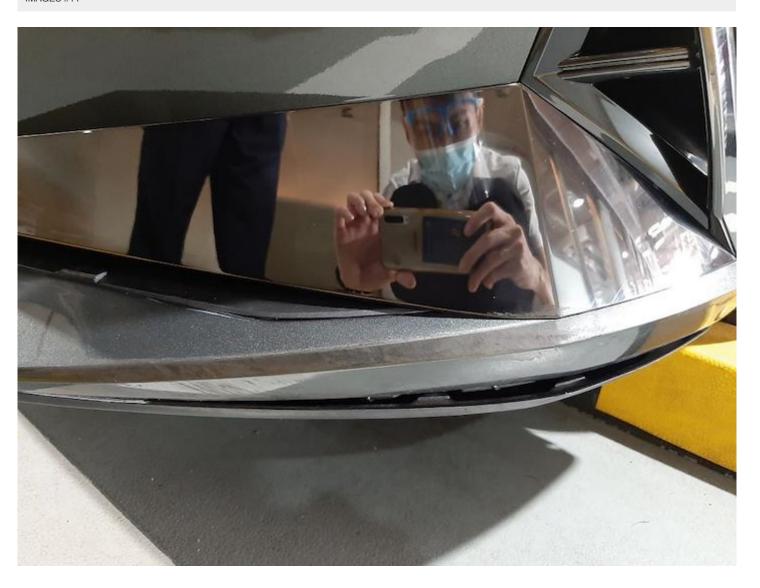


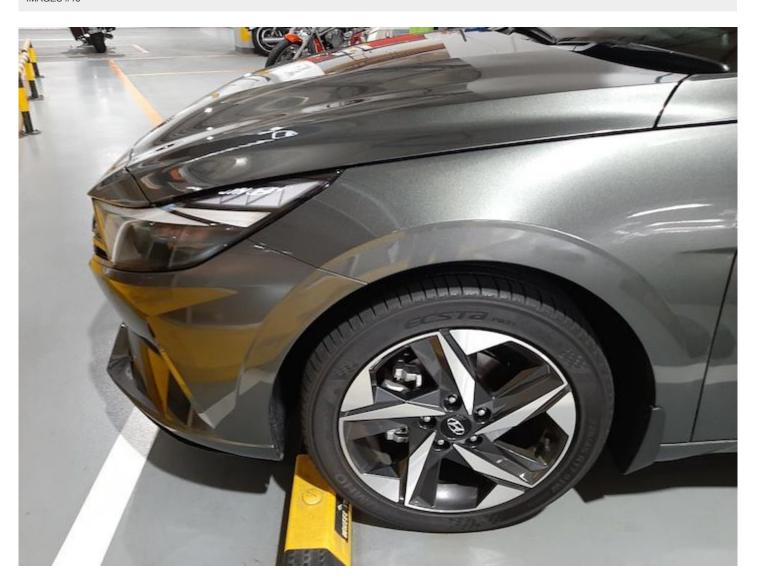














# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030

REC	ASSOCIATION ORDS MANAGEMENT CENTRE	Operating Hours: Monday to Friday, 09:00 - 1 UEN: S66SS0020G / GST Reg. No.: M400017735	17:00	
MI	PORTANTNOTE: Ple wi	ease submit the completed Addenc th whom you submitted the Origin	lum form to the <u>same</u> Author al Report.	ised Reporting Centre
		ADDEND	UM	
A)	PARTICULARS OF PE	ERSON MAKING THE AMENDMENT	rs:	
	Original Report No	:	Vehicle Registration No:	SL8 10867
		: CHAM BAN GUAN JUHNY		
	(*Vehicle Driver/Ve	ehicle Owner) (*) Please delete as a	ppropriate	
	Address	: Blk 317 Stephicoon AVE 2 4	14-234	Singapore(350317
	and the second	::		
	Email Address	: Scy Benefteel @ GABL COM		
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