

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 02/10/2021 14:09 (SGT)
Date of Accident 01/10/2021 17:10 (SGT)
Exact Location of Accident E Coast Rd, Singapore
Additional Location Information TOWARDS KATONG.
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDT67E

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LAU TZE YING
NRIC No S7243844B
Email Address JESSICA.LAUTY@GMAIL.COM
Mobile Phone No (Phone) +65-97456552
Alternative Phone No +65-97456552

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model Golf
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 - Reporting only
Vehicle Category Private car
Transmission Auto
CC 2000

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA561668
Cover Note Number -

DRIVER

Name of Driver QUEK ZEE WEE
NRIC No S7242425E

Date Of Birth	14/11/1972
Occupation	Indoor
Date Of Driving Pass	15/01/1993
Driving experience	28 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97624241
Alt. Phone Number	-
Email Address	zeewee.quek@gmail.com
Address	260 JOO CHIAT PLACE #02-03
Address complement	-
Postcode	427941
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 - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

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 vehicle 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

I CHECK ON MY RIGHT TRAFFIC CLEAR, WHEN I CAME OUT FROM PARKING LOT, SUDDENLY VEHICLE B FROM MY RIGHT IN FAST SPEED COME TO MY RIGHT, I CANNOT STOP IN TIME AND HIT VEHICLE B REAR LH PORTION.

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	SLZ6206E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	2

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 purpose(s) of :

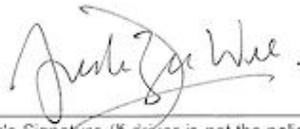
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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



Describe Circumstances of the Accident

I check my right Traffic clear, when I come out from parking lot, suddenly veh B from my right in fast speed come to my right, I cannot stop in time & hit veh B near LH portion.

Jude Zuhlee

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

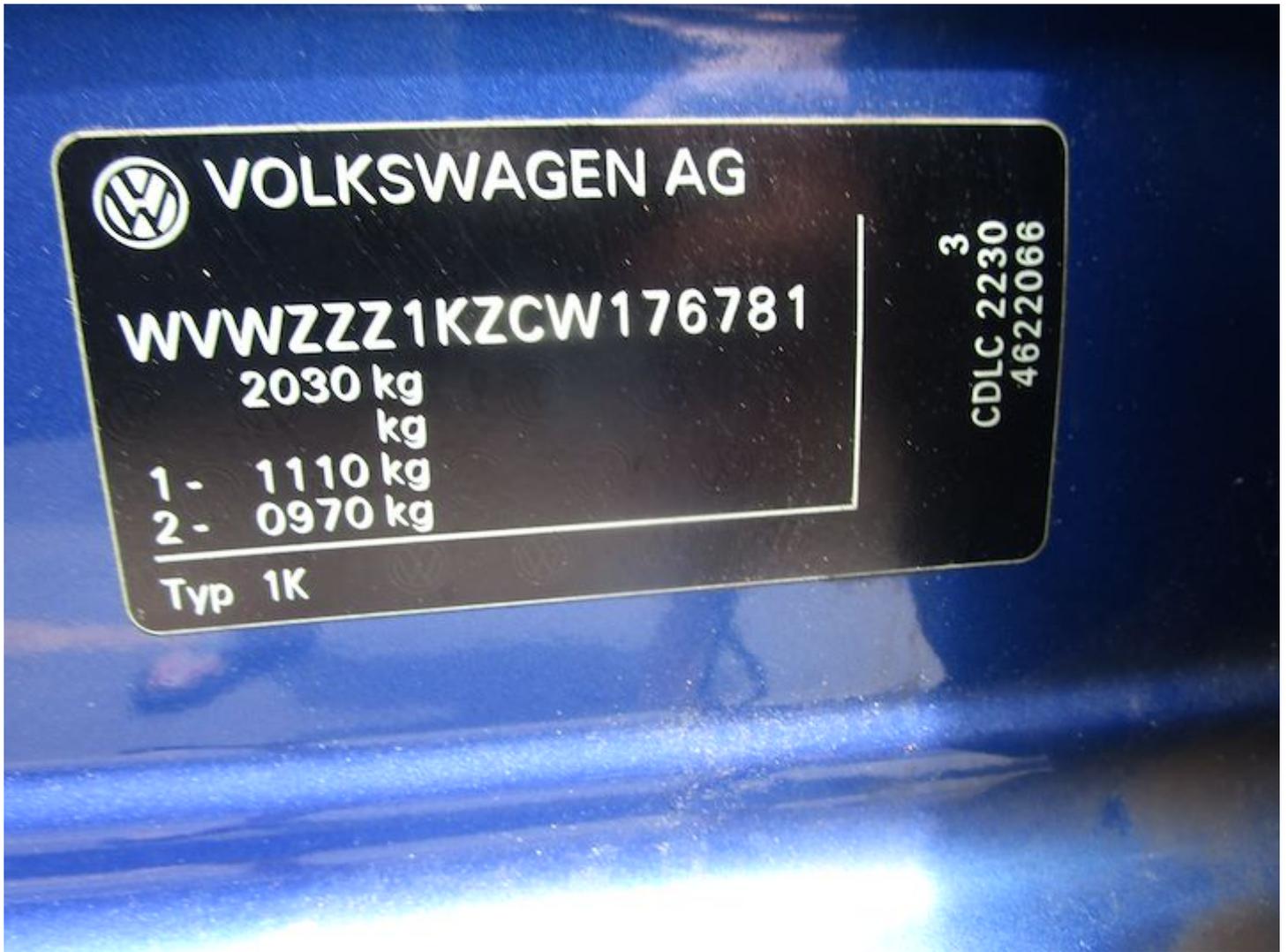














redefining / insurance

LAU TZE YING
260 JOO CHIAT PLACE
#02-03
SINGAPORE 427941

AXA Insurance Pte Ltd
☎ 1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
☎ (65) 6880 4740
✉ customer.care@axa.com.sg
🌐 www.axa.com.sg

New business

date
30/12/2020

your servicing distributor
FLEXI-ASSURE SERVICES / 04407

your servicing distributor contact
65471626

Policy Schedule

Your SmartDrive Comprehensive Essential

Your policy snapshot

Policyholder name	LAU TZE YING	Policy number	GA561668
Cover	Comprehensive	FIN / NRIC	XXXXX844B
Period of Insurance	from 05/01/2021 to 04/01/2022 (both dates inclusive)		

Premium breakdown

Gross Premium after 0% NCD	SGD 2,045.27
Total Discounts	- SGD 269.57
7% GST	SGD 124.30
Final Premium	SGD 1,900.00

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Essential Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

Add-on Benefits

- Personal accident benefit of up to \$ 50,000.00 for you and your named drivers

Vehicle details

Make & Model of Vehicle	VOLKSWAGEN GOLF R 2.0	Year of manufacture	2011
Vehicle registration number	SDT67E	Type of Use	Private use
Body type	HATCHB	Engine capacity (c.c.)	1984
Seating capacity (excl driver)	4	Engine number	CDL068870
Off-Peak car	No	Chassis number	WWZ221K2CW176781

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	UNITED OVERSEAS BANK LIMITED

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess	SGD 800.00
Windscreen Excess	SGD 100.00

Drivers details

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

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