

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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	21/10/2021 12:21 (SGT)
Date of Accident	20/10/2021 13:20 (SGT)
Exact Location of Accident	50 Gambas Cres, Singapore 757022
Additional Location Information	PROXIMA @ 50 GAMBAS CRES (CAR PARK)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM524U
INSURED POLICY HOLDER	
Is company?	No
Name Of Registered Owner	ELTON LIM SEOW LONG
NRIC No	SXXXX402B
Email Address	eltonlim73@gmail.com
Mobile Phone No	(Phone) +65-90026432
Alternative Phone No	(Home) +65-90026432

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Tt
Variant	AUDI / TT COUPE 2.0A
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

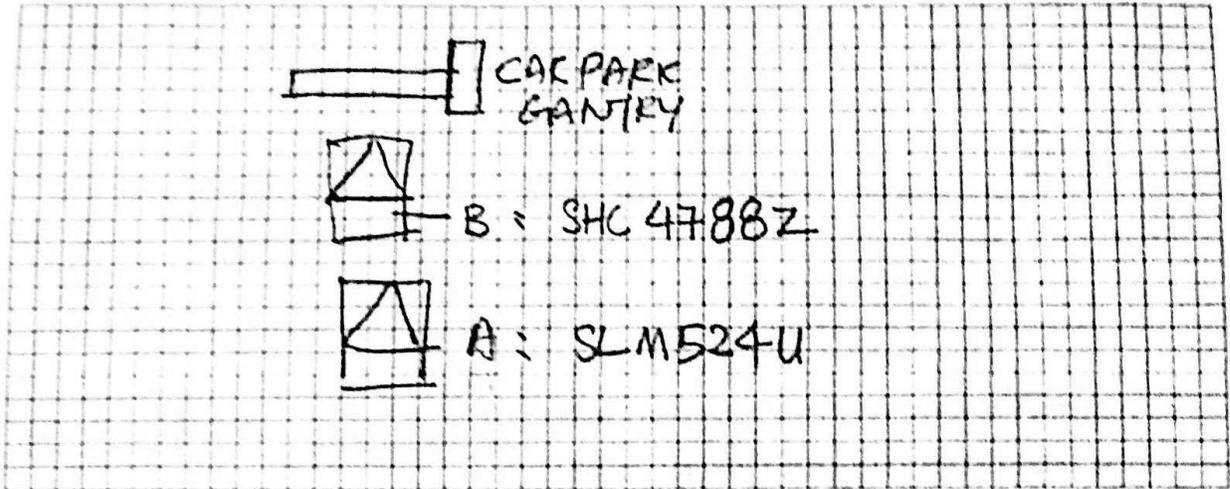
INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA394272
Cover Note Number	GA394272 / 1

DRIVER

Name of Driver	ELTON LIM SEOW LONG
NRIC No	SXXXX402B

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20 October, at Proxima @ Gambas 50
Gambas Crescent S 757022 about 1.20pm
I'm driving, waiting in line to drive out
of car park gantry, a taxi SHC 4788Z
reverse his car and head hit on my car
SLM524U.

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:


Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.: