

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	25/10/2021 17:29 (SGT)
Date of Accident	25/10/2021 07:15 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	EXIT TWDS PASIR RIS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT505Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN TECK LIANG
NRIC No	S7014503J
Email Address	geraldtan55@gmail.com
Mobile Phone No	(Phone) +65-96872050
Alternative Phone No	+65-96872050

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?	Yes
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	GA495642
Cover Note Number	-

DRIVER

Name of Driver	CHONG LEV SEV ALICIA
NRIC No	S7020927F

Date Of Birth	29/06/1970
Occupation	Indoor
Date Of Driving Pass	04/05/2005
Driving experience	16 YEARS AND 5 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94559040
Alt. Phone Number	-
Email Address	chongalicia@hotmail.com
Address	73 SIGLAP PLAIN
Address complement	-
Postcode	456049
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 - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	ZARA MIN TAN
Gender	Female

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

VEHICLE B IN FRONT OF ME GO AND STOP. I CHECK MY RIGHT TRAFFIC AND DIDN'T KNOW VEHICLE B STOP. I HIT ONTO VEHICLE B REAR 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	SJF5764X
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	VEHICLE B
No. Of Passenger (Including Driver)	-

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.

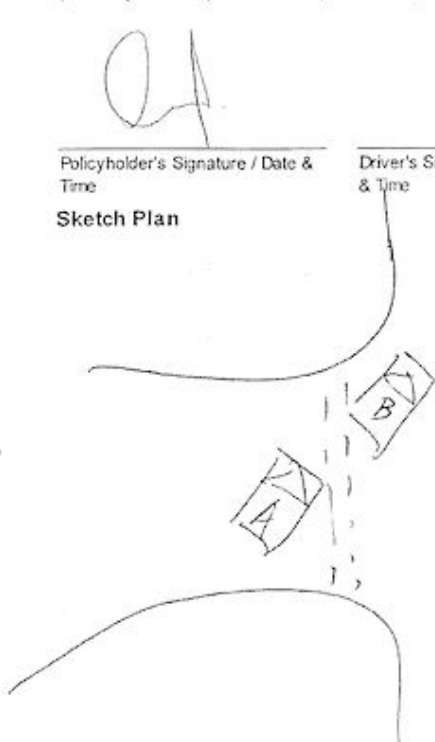
Policyholder's Signature / Date & Time

Sketch Plan

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

TPE

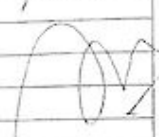
Witnessed by Reporting Centre Personnel



SINE

Describe Circumstances of the Accident

Veh B in front of me go a stop, I check my right Traffic
 & didn't know Veh B stop, I hit on Veh B rear portion.



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



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 25/10/21To: Owner of Vehicle Number: SGT 5054

The following has been advised to you via your workshop, SINE MOTOR PTE LTD through their staff, _____ . Please tick the applicable box if you had been advised on any of the following:

- (☒) You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- (☒) You had been advised by the workshop on the liability and merits of the case accordingly.
- (☐) You had been advised by the workshop of the claims procedure as follows.
- if fire damage and you claim under your own insurance, any applicable excess will be waived. However, there will be **no recovery prospect** and NCD will be affected.
 - if fire damage and you are claiming against the Third Party, your NCD will not be affected. However, **the recovery is not guaranteed**, and AXA will not be held responsible.
- (☐) If you had been involved in an accident with a foreign registered vehicle and wished to attempt recovery with AXA help, please forward the photos of the front and back of the NRIC and driving license to motor.doc@axa.com.sg
- (☐) You have agreed to let AXA **assign a workshop** for your vehicle repairs. In the process, your vehicle might be towed out to another workshop assigned by AXA. In return, you will get:
- \$200 off on your Basic Own Damage Excess **or**
 - \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit **or**
 - Additional \$200 on top of existing Loss of Use Benefit if your policy has \$0 excess and existing Loss of Use benefit
- (☐) There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas. The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- (☒) There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- (☐) You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
- (☐) For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- (☒) For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.
- For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using **any combination** of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.
- (☒) You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.



Signed and acknowledged by:

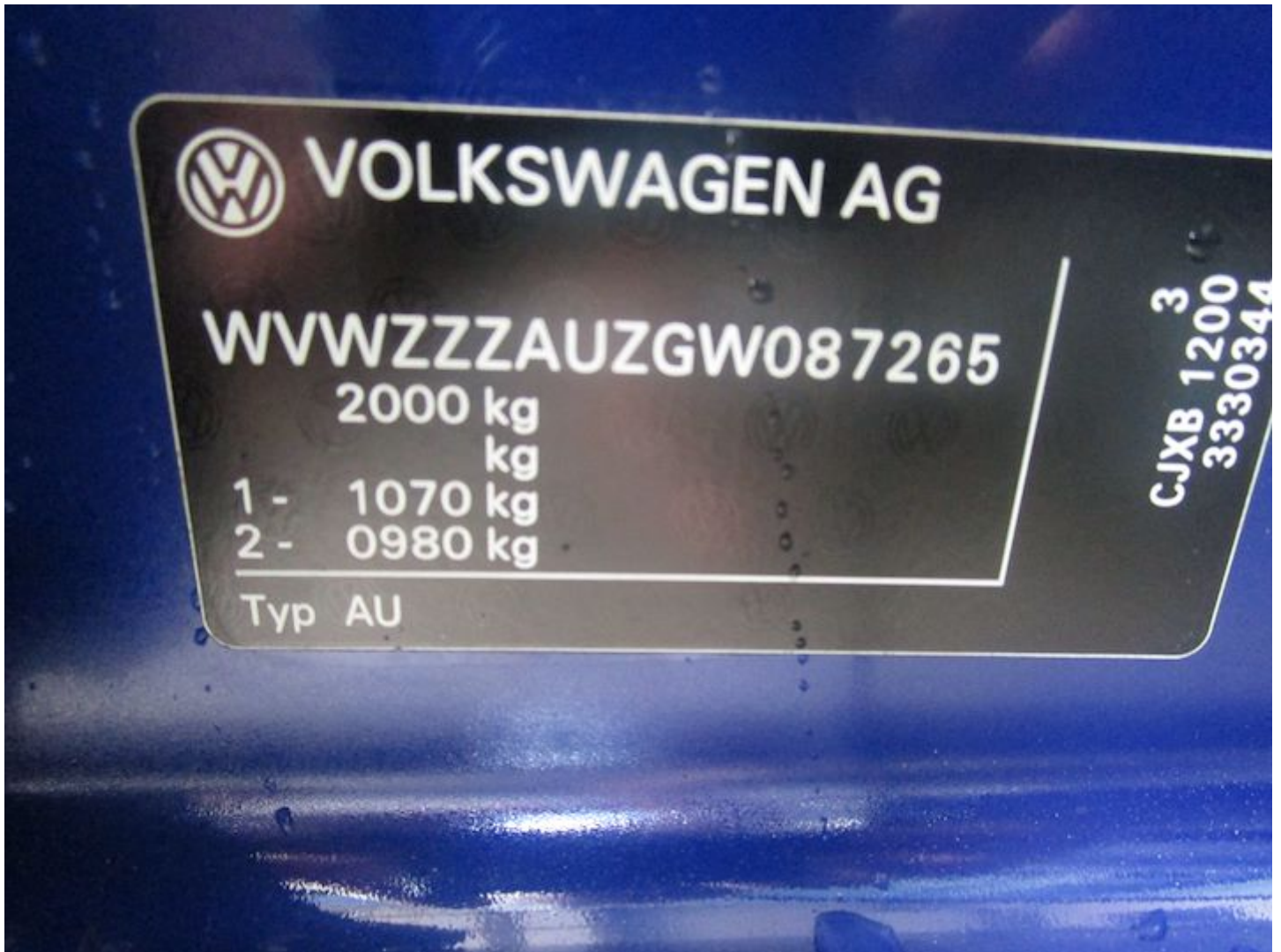
x

Name and signature of policyholder/ authorized driver* and company stamp (where applicable)

*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

Name and signature of workshop personnel including company stamp

AXA Insurance Pte Ltd (Company Reg. No. 19950101291)
3 Shenton Way #24-01 AXA Tower Singapore 068111
AXA Customer Centre 911-21/22
Telephone: +65 6883-4598 | axa.com.sg













redefining / insurance

TAN TECK LIANG
73 SIGLAP PLAIN
SINGAPORE 456049

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

Renewal

date
06/10/2020

your servicing distributor
SAFE HARBOUR ASSURANCE AGENCY /
04111

your servicing distributor contact
6285 7633-IRENE

Policy Schedule

Your SmartDrive Comprehensive Peace

Your policy snapshot

Policyholder name	TAN TECK LIANG	Policy number	VA1 / GA495642
Cover	Comprehensive	FIN / NRIC	S7014503J
Period of Insurance	from 28/10/2020 to 27/10/2021 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,003.83
7% GST	SGD 70.27
Final Premium	SGD 1,074.10

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Peace Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability
- Medical and dental expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Loss of Personal Effects in Singapore up to \$3,000
- Delivery of repaired car to your preferred location
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

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	2015
Vehicle registration number	SGT505Y	Type of Use	Private use
Body type	HATCHB	Engine capacity (c.c.)	1984
Seating capacity (excl driver)	4	Engine number	CJX080450
Off-Peak car	No	Chassis number	WVWZZZAUZGW087265

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	Nil

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

Basic Own Damage Excess	SGD 400.00
Windscreen Excess	SGD 100.00

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

1 of 2