

LIBERTY LAW PRACTICE LLP
ADVOCATES & SOLICITORS

Your reference: **SMF 2347B**

Our reference: **CS/1075/21YB**

Date: **28 June 2021**

133 New Bridge Road
#17-03, Chinatown Point
Singapore 059413
UEN: T08LL0754D
Tel : (65) 6223 6787
Fax : (65) 6223 7262
(Not for service of Court Documents)
E-mail: chris@libertylaw.com.sg

Selva K. Naidu LL.B. (Hons.) S'pore
Christine Sekhon LL.B. (Hons.) S'pore

AXA Insurance Pte Ltd
8 Shenton Way
#24-01 AXA Tower
Singapore 068811

By Email: motor.doc@axa.com.sg

Leong Siew Pui
Block 896A Tampines Street 81
#04-870
Singapore 521896

IMPORTANT
BY CERTIFICATE OF POSTING

Dear Sirs,

CHRISTOPHER TAN

C/o 133 New Bridge Road #17-03 Chinatown Point Singapore 059413

ACCIDENT ON 08.06.21 INVOLVING SJF 7080Y AND SMF 2347B ALONG ANG MO KIO AVENUE 5.

We refer to the above matter.

We are instructed by the above named to claim damages against you / your authorised driver / your insured in connection with a road traffic accident on 8 June 2021 along Ang Mo Kio Avenue 5, involving our client's motor vehicle bearing registration number SJF 7080Y, and the motor vehicle bearing registration number **SMF 2347B**, which was driven / owned / insured by you at the material time.

We are instructed that the accident was caused by your / your authorised driver's / your insured's negligent driving and/or management of the motor vehicle **SMF 2347B**. As a result of the accident, our client's car was damaged and our client has been put to loss and expenses, particulars of which are as follows: -

(1) Cost of repairs	- \$ 3,800.00
(2) Loss of use	- \$ 720.00
(3) Survey fee	- \$ 456.00
(4) Accident report	- \$ 29.00
(5) LTA search	- \$ 10.00
(6) Incidentals	- \$ 100.00
(7) Costs	- \$ 900.00
	<u>\$ 6,015.00</u>

A copy each of the supporting documents are enclosed.

<u>S/NO.</u>	<u>AVAILABLE DOCS</u>	<u>PARTICULARS</u>
<u>Client's Documents</u>		
1.	09.06.2021	GIA Statement / Traffic Police report
2.	-	Witness(es) Statement
3.		Photos taken at the accident scene
4.	undated	Video footage (to insurer only) / CCTV / CD recording
5.	23.06.2021	Repair Bill / Tax Invoice / Excess Tax invoice
6.		Rental invoice and Rental Agreement / check in / out report / receipts
7.	-	Spare Part Ordering Form
8.	21.06.2021	Survey invoice and surveyor's report
9.	21.06.2021	26 Original / Copies of damage photographs
10.	09.06.2021	Enquire PARF/COE Rebate for Registered Vehicle/Register New Vehicle (Acknowledgement)
11.		Certificate of Insurance / Enquire Vehicle & Owner Information / Enquire Transfer fee / Transfer of ownership
12.	09.06.2021 10.06.2021	Pre-repair Inspection Notices
13.		Estimate of repair costs with agreement by surveyor (exclusive of GST)
14.	-	Traffic Police investigation results
15.	23.06.2021	Tax invoice and search result from General Insurance Association of Singapore (GIA)
<u>Third Party's Documents</u>		
16.	09.06.2021	GIA Statement / Traffic Police report
17.	-	Admission Note
18.	09.06.2021	LTA search / LTA clarification letter / tax invoice
19.		RCB / ACRA search

We have on 9 June 2021 and 10 June 2021 notified you / your insurer of the accident and a pre-repair inspection of our client's vehicle was ~~waived / not carried out~~ / carried out by the appointed surveyor 11 June, 16 June and 21 June 2021 respectively.

Please note that you / your insurer should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you / your insurer. In this event, you / your insurer will be liable for any and all legal costs incurred.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter, which we will then forward to our client and/or the insurers for consideration on a without prejudice basis.

For avoidance of doubt, kindly note that this claim is made without prejudice to our client's personal injury claims.

Yours faithfully,



Enc.
cc Client



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	09/06/2021 11:01 (SGT)
Date of Accident	08/06/2021 15:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ANG MO KIO AVE 5
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF7080Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHRISTOPHER TAN
NRIC No	
Email Address	liplp8800@gmail.com
Mobile Phone No	(Phone) +65-
Alternative Phone No	(Office) +65-

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	8
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	2300

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D19MPC0000045_02
Cover Note Number	-

DRIVER

Name of Driver	CHRISTOPHER TAN
NRIC No	

Date Of Birth	
Occupation	Indoor
Date Of Driving Pass	
Driving experience	
Gender	Male
Mobile Number	(Phone) +65-
Alt. Phone Number	(Office) +65-
Email Address	llpllp8800@gmail.com
Address	
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	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	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material 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	CAREN TEE
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

REFER TO STATEMENT ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMF2347B
Vehicle Manufacturer	Kia
Vehicle Model	Cerato
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car

Name of Driver
NRIC No
Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

LEONG SIEW PUI
SXXXX656D

SKETCH PLAN

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 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. 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 completion 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)**
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 claim 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 issuing 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 enclosed/enclosed 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.

09 JUN 2021



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Ref to sketch attached

A - SJF 7080Y
B - SMF 2347B

DNA - 8/6/21

Describe Circumstances of the Accident

Refer to statement attached

Declaration

We declare the foregoing particulars are true in every respect

09 JUN 2011

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

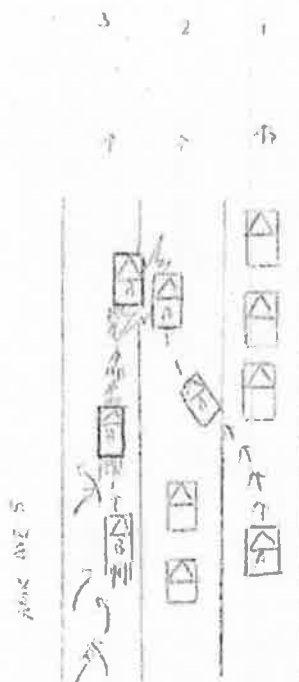


CIRCUMSTANCES OF ACCIDENT

At this place and time I was travelling Ang mo kio Ave 5. Infront vehicles was congested, So I indicated left signal and check my 2nd lane was cleared, So I proceed on. After I was in my 2nd lane, Out of sudden vehicle B speed up and cut through my lane without any signal and collided on my left hand portion.

SJF 7080Y

09 JUN 2021



A - SJF 7080Y
B - SMF 2347B

DOA - 8/6/21

SJF 7080Y

09 JUN 2021

29 FERNVALE CLOSE #02-22 RIVERTRESS RESIDENCES SINGAPORE 797464
Registration No: 201706505N TEL:88764961

DATE: 23/06/2021



AUTO PERFORMANCE APPRAISAL

APA

TAX INVOICE

Christopher Tan
C/O Infinity Coach & Trading
29 Fervavle Close #02-22
Rivertrees Residences
Singapore 797464

INVOICE NO : APA21002220

DATE : 21/06/2021

VEHICLE NO : SJF7080Y
JOB REFERENCE NO : 21/002323
ACCIDENT DATE : 08/06/2021
SURVEY DATE : 09/06/2021

<u>DESCRIPTION</u>	<u>AMOUNT</u>
Survey Fees Inclusive Of Transportation	\$430.00
Photographs (\$1) Per Copies : 26	\$26.00
TOTAL AMOUNT	\$456.00

Notes :

All cheque payment should be "Crossed" and made payable to "Auto Performance Appraisal"

Auto Performance Appraisal



VEHICLE SURVEY REPORTS																																				
<p>Christopher Tan C/O Infinity Coach & Trading 29 Fervavle Close #02-22 Rivertrees Residences Singapore 797464</p>																																				
1	Reference Job Reference No : 21/002323 Claim No : - Claim Type : Third Party Accident Date : 08/06/2021 Survey Date : 09/06/2021 Survey Report Date : 21/06/2021																																			
2	Particulars Of Vehicle Vehicle Registration No : SJF7080Y Make & Model : Mazda 8 2.3L Vehicle Registration Date : 31/12/2012 Chassis No : JM6LY1033D0300346 Engine No : Blocked Colour : Black																																			
3	Condition Of Vehicle And Tyres <table border="0"> <tr> <td><u>Mileage (KM)</u></td> <td><u>Brakes</u></td> <td><u>Steering</u></td> <td><u>Modification</u></td> </tr> <tr> <td>175170</td> <td>Serviceable</td> <td>Serviceable</td> <td>None</td> </tr> <tr> <td colspan="4"> </td> </tr> <tr> <td><u>Tyres</u></td> <td><u>Make</u></td> <td><u>Size</u></td> <td><u>Balance (MM)</u></td> </tr> <tr> <td>Front RHS</td> <td>Michelin</td> <td>215/65R16</td> <td>5</td> </tr> <tr> <td>Front LHS</td> <td>Michelin</td> <td>215/65R16</td> <td>5</td> </tr> <tr> <td>Rear RHS</td> <td>Michelin</td> <td>215/65R16</td> <td>6</td> </tr> <tr> <td>Rear LHS</td> <td>Michelin</td> <td>215/65R16</td> <td>6</td> </tr> </table>				<u>Mileage (KM)</u>	<u>Brakes</u>	<u>Steering</u>	<u>Modification</u>	175170	Serviceable	Serviceable	None					<u>Tyres</u>	<u>Make</u>	<u>Size</u>	<u>Balance (MM)</u>	Front RHS	Michelin	215/65R16	5	Front LHS	Michelin	215/65R16	5	Rear RHS	Michelin	215/65R16	6	Rear LHS	Michelin	215/65R16	6
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Front LHS	Michelin	215/65R16	5																																	
Rear RHS	Michelin	215/65R16	6																																	
Rear LHS	Michelin	215/65R16	6																																	
4	Description Of Damages The vehicle sustained damages at front left hand portion. (For information of damages please refer to Parts/Labour/Photographs attached)																																			
5	Instruction This survey was conducted entirely on a "WITHOUT PREJUDICE" basis, and we have not authorised any repair.																																			

AUTO PERFORMANCE APPRAISAL

Annex A

Vehicle Assessment Reports

Ref No : 21/002323

Damage And Repair Cost Adjustment

<u>S/No</u>	<u>Qty</u>	<u>Parts Description</u>	<u>Comments/condition</u>	<u>Workshop Estimate (\$)</u>	<u>Our Assessment (\$)</u>
			<u>List Items</u>		
1	1	Front bumper	Deformed	1,063.60	1,063.60
2	1	Front bumper fog lamp cover	Serviceable/reuse	136.90	-
3	1	Front bumper LH side retainer	Broken	52.00	52.00
4	1	Front bumper LH inner side bracket	Serviceable/reuse	58.00	-
5	1 set	Front bumper clips	Broken/necessary	40.00	40.00
6	1	LH headlamp (HID)	Broken/cut	2,106.30	2,106.30
7	1	Front LH fender	Dented/bent	460.00	460.00
8	1	Front LH fender under shield	Serviceable/reuse	232.00	-
9	1 set	Front fender under shield clips	Necessary	40.00	40.00
				4,188.80	3,761.90
Less discount 20%				837.76	752.38
Total :				3,351.04	3,009.52
			<u>Special Nett Items</u>		
10	1	Front LH sports rims	Dented/warped	550.00	550.00
11	1	Front LH tyre	Serviceable/reuse	260.00	-
Total :				810.00	550.00
Total Spare Parts :				4,161.04	3,559.52

AUTO PERFORMANCE APPRAISAL

Vehicle Assessment Reports

Annex B

Ref No : 21/002323

Damage And Repair Cost Adjustment

<u>Items</u>	<u>Job Description</u>	<u>Workshop Estimate (\$)</u>	<u>Adjusted Costs (\$)</u>
1	To remove, jack out, straighten, panel beating, align and renew replaced parts.	800.00	500.00
2	To putty and respray painting charges.	1,000.00	600.00
3	To check wirings & lightings.	50.00	30.00
4	To conduct computerise wheel alignment test.	80.00	60.00
5	To supplied and applied anti rust treatments.	50.00	30.00
Total Labour :		1,980.00	1,220.00
Total Spare Parts :		4,161.04	3,559.52
Total Labour :		1,980.00	1,220.00
Total Repair Costs :		6,141.04	4,779.52

Assessor's Recommendation

Repairer Estimate : 6,141.04
Our Adjustment : 4,779.52

Remarks

The repairer has agreed to undertake the repair on a lump sum basis of \$3,800.00, with a repair period of 4 working days.

Surveyed By:



Lek Boon Hwee
Automobile Appraiser

Job Reference No : 21/002323

APA



Job Reference No : 21/002323

APA



Job Reference No : 21/002323

APA



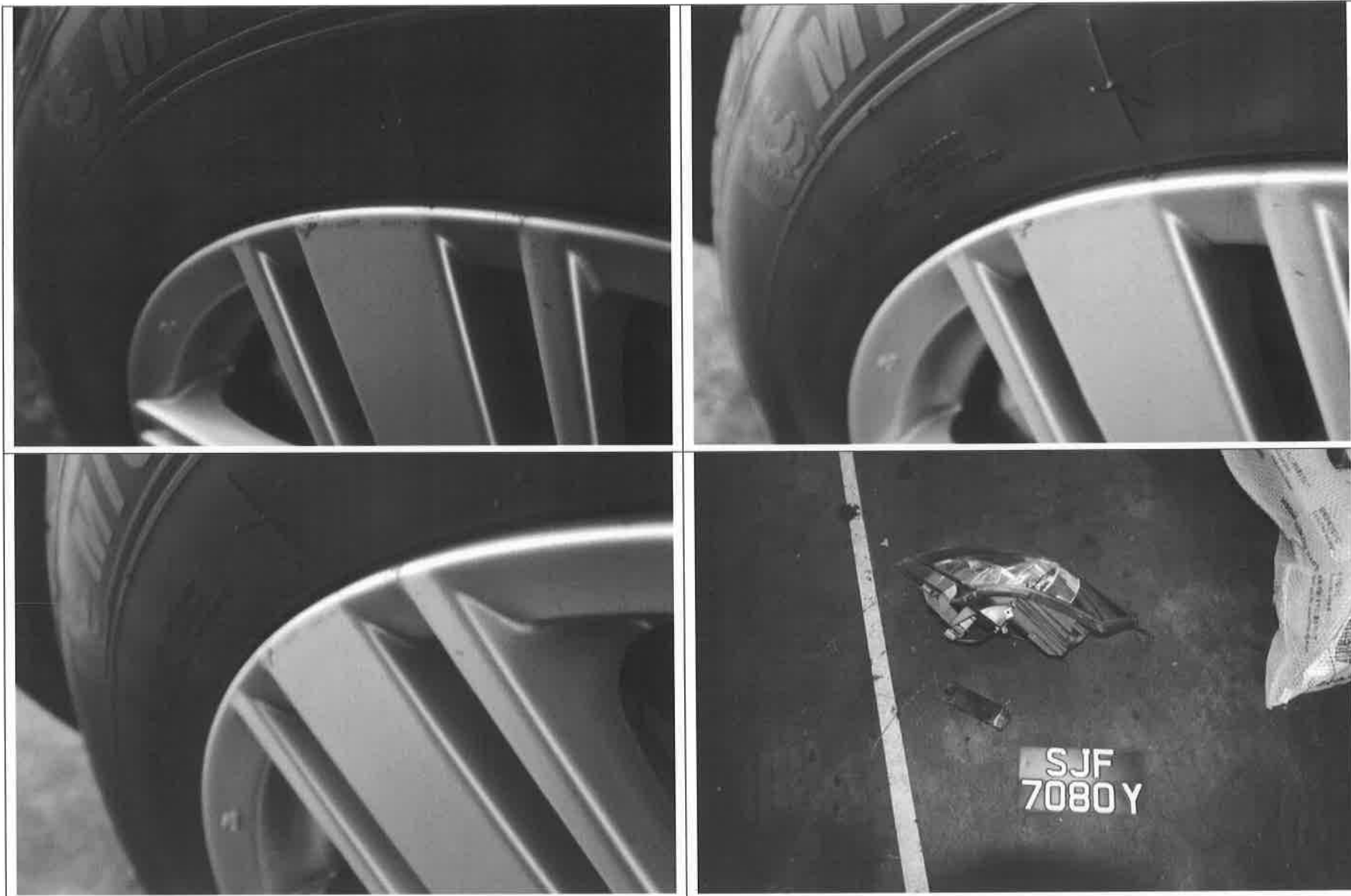
Job Reference No : 21/002323

APA



Job Reference No : 21/002323

APA



Job Reference No : 21/002323

APA



Job Reference No : 21/002323

APA



Inquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 713A

Vehicle Details

Vehicle No.: SJF7080Y

Vehicle to be Exported: Yes

Intended Deregistration Date: 09 Jun 2021

Vehicle Make: MAZDA

Vehicle Model: MAZDA8 2.3L AT ABS D/AB 2WD 5DR GAS/D

Primary Colour: Black

Manufacturing Year: 2012

Engine No.: L310546343

Chassis No.: JM6LY1033D0300346

Maximum Power Output: 120.0 kW (160 bhp)

Open Market Value: \$30,437.00

Original Registration Date: 31 Dec 2012

First Registration Date: 31 Dec 2012

Transfer Count: 0

Actual ARF Paid: \$30,437.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 30 Dec 2022

PARF Rebate Amount: \$16,740.00

Intended COE Rebate Details

COE Expiry Date: 30 Dec 2022

COE Category: B - Car (1601cc & above)

COE Period(Years): 10

QP Paid: \$93,501.00

COE Rebate Amount: \$14,552.00

Total Rebate Amount: \$31,292.00

The information contained herein is correct as at 09 Jun 2021

OK

Your Insured's vehicle : **SMF 2347B**
Our client's vehicle: **SJF 7080Y**
Date: **9 June 2021**

Our ref: **CS/1075/21/YB**
Fax: **6223 7262**
Tel: **3152 0980**

By Email: motor.survey@axa.com.sg only

AXA Insurance Pte Ltd

Dear Sirs,

DATE OF ACCIDENT: 8 JUNE 2021
NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY

We are instructed by Christopher Tan to notify you of a road traffic accident on 8 June 2021 at about 15.20p.m. along Ang Mo Kio Avenue 5 involving our client's vehicle registration number SJF 7080Y and vehicle registration number SMF 2347B which was insured by you at the material time. A copy of the Singapore Accident Statement/Traffic Police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within **2 working days excluding any intervening Saturday, Sunday and/or Public Holiday** of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

NB. Any settlement or offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude client's driver/passenger from claiming injury-related damages arising from this accident.

Yours sincerely,

May Ng

Enc.

Your Ref : S1M03BKL_TP

Our Ref : CS/1075/21/YB

Date : 10 June 2021

Fax : 6223 7262

Tel : 3152 0980

Email : may@libertylaw.com.sg

AXA Insurance Pte Ltd

BY EMAIL ONLY

DATE OF ACCIDENT: 8 JUNE 2021

NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We refer to your email dated 10 June 2021.

Please be informed that our client is not agreeable to your proposed motor surveyors. Instead we propose you to choose a surveyor from our client's list of surveyors as appended below:-

S/no.	Name of Surveyor	Company Name
1.	Lek Boon Hwee	Auto Performance Appraisal
2.	Oh Han Cheong	Oh Appraisal Services
3.	Lim Say Koon	SK Appraisal Pte Ltd
4.	Edwin Koh	Auto Hyperdeals Pte Ltd

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our list of motor surveyors. You will be deemed to have agreed to any of the above motor surveyors as a "single joint expert". We will inform you who the "single joint expert" is in due course.

If you object to our client's list of motor surveyors, we will accordingly inform the client to instruct his choice of motor surveyor to conduct the pre-repair survey. Also, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle failing which our client will commence repairs thereafter without any further notice or reference to you. Please be informed that the said vehicle can be surveyed / inspected at:

Address : Infinity Coach & Trading Pte Ltd
160 Sin Ming Drive,
#01-07 Sin Ming Auto City,
Singapore 575722

Contact Person/Tel : Mr Dave Lim (h/p: 9833 5843)

Yours faithfully,

May Ng

Your Ref : SMF 2347B

Our Ref : SJF 7080Y

Date :

Acknowledgement

This is to confirm that I _____ [Full Name of Surveyor] of _____ [Surveyor's Company] have completed as follows:-

(a) Pre- Repair Survey/Inspection on 11/6/21 [Date] at 10:40 [Time]. 82235769

Thavan 
Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(b) Pre- Repair Survey/Inspection (during dismantling) on 16/6/21 [Date] at 11:48 [Time].

Thavan 
Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(c) Re-inspection of new replacement part (part by part) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(d) Post - Repair Survey/Inspection on 21/6/21 [Date] at 1500 [Time].

Thavan  Lhk
Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:



RECORD MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Date of Request: 23/06/2021

Your Ref No: CS/1075/21/YB

Dear Sir/Madam,

Date of Accident: 08/06/2021 00:00 (SGT)

Vehicle No: SJF 7080Y

Place of Accident: Ang Mo Kio Ave 5, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SMF 2347B	Ang Mo Kio Ave 5, Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.



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	09/06/2021 13:29 (SGT)
Date of Accident	08/06/2021 15:30 (SGT)
Exact Location of Accident	Ang Mo Kio Ave 5, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF2347B
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEONG SIEW PUI

VEHICLE PARTICULARS

Manufacturer	Kia
Model	K3
Variant	-
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA554945
Cover Note Number	-

DRIVER

Name of Driver	LEONG SIEW PUI
NRIC No	S1151656D
Address	BLK 896A TAMPINES ST 81 #04-870
Address complement	-
Postcode	521896
Does Driver Own Other Vehicles?	No

GENERAL INFORMATION OF THE ACCIDENT



Type of Accident
Weather Conditions

Collision - Change/cross lane
Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
Was anybody injured in the Accident? No
Was any other material or property damaged? Yes
Number of Passengers (Including Driver) 2

CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING STRAIGHT. SUDDENLY, VEHICLE B FROM MY RIGHT CUT INTO MY LANE AND HIT ONTO MY VEHICLE REAR RIGHT 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 SJF7080Y
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver -
Insurance Company Name -

SKETCH PLAN

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 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. 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)**
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 was travelling straight, suddenly vehicle B from
my right cut into my lane and hit onto my
vehicle rear right 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

LETTER OF UNDERTAKING

I/We, BOONCEI SIEW PUT, the owner of vehicle no. 9M72347E

My/Our Insurance is under M/s AXA Insurance Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Pte Ltd with all relevant facts and documents within 14 (fourteen) days of occurrence or discovery of damage.

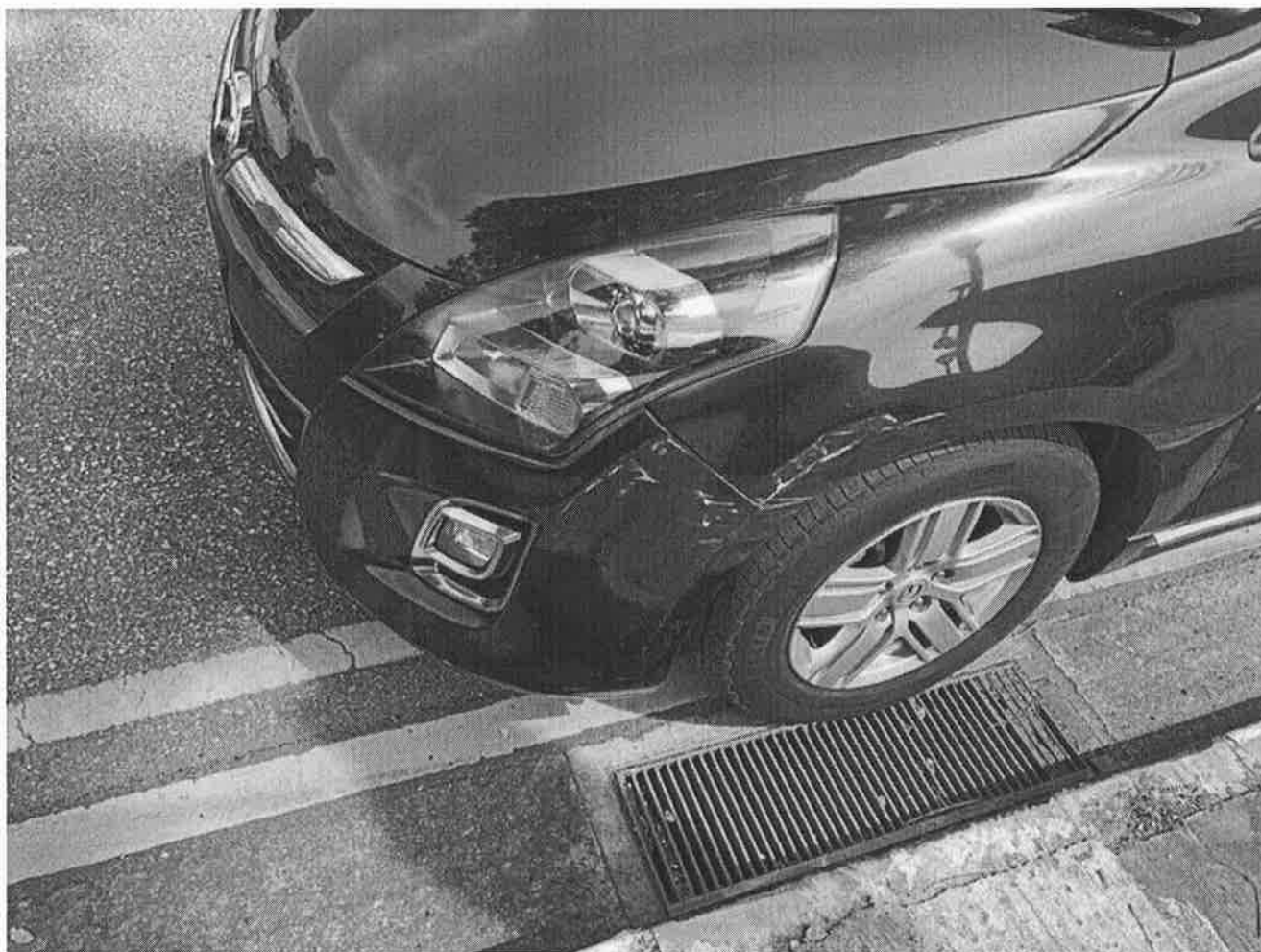
My/Our Third Party claim is handle by my/our preferred workshop, _____

Signed and Acknowledge by:


 Name & signature of policyholder

Company stamp

09/06/21
 Date





















redefining / insurance

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

Account Number:
 16302

Certificate of Insurance

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Regulations, 1989 (Malaysia)
 Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia)

Policy details

Policyholder name	LEONG SIEW PUI	Certificate number	GASS4945 / 1
Cover	Comprehensive	Chassis number	101M3416M45010812
Plan name	Essential	Engine number	046QJH708833
NCD applicable	0%		
Vehicle registration number	SMF2347B		
Period of insurance	From 11/10/2020 to 11/10/2021 (both dates inclusive)		
Finance lease company	OMNILET FINANCIAL SERVICES ASIA PACIFIC LTD		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any person who is driving on the Policyholder's order or with their permission.

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 to 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.
 This 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 trades 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.

* Limitation imposed in accordance by Section 8 of the Motor Vehicle (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 85 of the Road Transport Act, 1987 (Malaysia), are not to be initiated under these conditions.

EXCESS	Basic Own Damage Excess	S\$0 600.00
	Windscreen Excess	S\$0 100.00

An Additional Excess is applicable as follows:

- S\$500 for Unlicensed / Learner Drivers
- S\$500 for declared Young and Inexperienced Driver
- S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Waiver.

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

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).
 The Vehicle Warranty Obligation requires the premium to be paid in full within a specified period failing which there would be no liability under the policy in the event of a claim.

AXA Insurance Pte Ltd (199903512N)
 3 Shenton Way, #24-01, AXA Tower,
 Singapore 069511
 Customer Centre, 951-06

1 of 2

Enquire Vehicle's Insurance Particulars (As At 08 Jun 2021 / 15:20:00)

Vehicle No.:

SMF2347B

Make Description/Model:

KIA / CERATO 1.6(A) SX

Insurance Company Name:

AXA INSURANCE PTE LTD

Business Transaction Reference No.:

20210609122233302885

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Printed on 09 Jun 2021 12:23:25

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