

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 03/01/2022 16:36 (SGT)
Date of Accident 30/12/2021 16:25 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information CTE (CITY)TOWARDS MOULMEIN EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLA8607A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ONG AUTOMOTIVE
Company Reg No 53401601D
Email Address ongautomotiveaccident@gmail.com
Mobile Phone No (Phone) +65-98800332
Alternative Phone No +65-98800332

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Elantra
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 1600

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy Yes
Policy Number P2417354
Cover Note Number -

DRIVER

Name of Driver PATRICK CHNG KIAN WEE
NRIC No S9090659C

Date Of Birth	12/10/1990
Occupation	Indoor
Date Of Driving Pass	30/11/2012
Driving experience	9 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-87761210
Alt. Phone Number	-
Email Address	ongautomotiveaccident@gmail.com
Address	52 MARINE TERRACE #10-209
Address complement	-
Postcode	440052
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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

PLEASE REFER TO ATTACHED.

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

Vehicle Registration Number	SMQ5682E
Vehicle Manufacturer	Kia
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	KAY KIAT
NRIC No	S9703328E
Contact Number	(Phone) +65-86996468
Address	-

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SCW30G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	EUGENE
Contact Number	(Phone) +65-96211314
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	Audi
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	Mercedes
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	PATRICK CHNG KIAN WEE
Gender	Male
Phone No	(Phone) +65-87761210
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK AND HEAD PAIN
Injured person in which vehicle?	SLA8607A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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

CTE

A: SLA 8607A
B: SMA 5682E
C: SCW 30G
D: Unknown
E: Unknown



Describe Circumstances of the Accident

On 30/12/2021 4.25pm I was driving along CTE (CITY) toward moulmien on lane 1 suddenly the taxi in front of me sawn brake and i managed to stop in time suddenly i felt a Collision from the back of my car.

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

Witnessed by Reporting Centre Personnel



AXA Insurance Pte Ltd
 ☎ 1800 8804888
 ✉ customer.care@axa.com.sg
 🌐 www.axa.com.sg

Certificate of Insurance

- Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189)
- Road Transport Act, 1987 (Malaysia)
- Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
- Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

CERTIFICATE NO.	P2417354	Account No.	03926
Name of Policy Holder	ONG AUTOMOTIVE		
Coverage	Comprehensive		
Sum Insured*	Market Value At The Time Of Loss		
Vehicle Registration	SLA8607A		
Period of Insurance	From 05/12/2021 To 04/12/2022 (Both Dates Inclusive)		

Persons or classes of persons entitled to drive*

Named Driver(s) as stated in the Policy

1. ANY AUTHORISED DRIVER

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 in that behalf from driving the Motor Vehicle.

Limitation as to use*

(a) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(b) Use for social, domestic and pleasure purposes.

The Policy does not cover

(a) Use for racing, pace making, reliability trial or speed-testing

(b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle

(04)


Excess

Sect I - Used In S'pore Only	: SGD 2,000.00
Sect II-Used In Singapore Only	: SGD 1,500.00
W/screen Excess in Singapore	: SGD 100.00
Sect I - Used Outside S'pore	: SGD 4,000.00
Sect II-Driven Outside S'pore	: SGD 3,000.00
W/screenExcess (Outside S'pore)	: SGD 100.00

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions 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


 Authorized Signature

Issued by - SGVOKRS on 16/12/2021

IMPORTANT:

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 Vehicle (Third-Party Risks and Compensation) Act (Cap. 189).

FOR INDIVIDUAL CUSTOMERS : Cover Under the policy is valid only upon the payment of the full premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS : Please refer to the Premium Warranty Clause on the policy.

AXA Insurance Pte Ltd
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Centre #01-21
 GST Registration Number: 199903512M



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 03/01/22 To: Owner of Vehicle Number: 3LA8607A

The following has been advised to you via your workshop, EDGE through their staff, Brenda. 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.
- ☐ 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

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.: 19590351211)
 5 Shenton Way #24-01 AXA Tower Singapore 068511
 AXA Customer Centre #03-71127
 Telephone: +65 6860 4896 - AXA (toll-free)

ONG AUTOMOTIVEVEHICLE LEASE AGREEMENTAgreement Date: 30.12.2021Referrer Name: Carouse 11

NRIC: _____

Car plate no.: _____

Company **ONG AUTOMOTIVE**
53401601DRental Begins on: 30.12.2021Time Out & Sign: 12.45pm 

Office No:

Office hour: 10 am – 7 pm

Date & Time In: _____

Signed by Staff: _____

Hirer's Name: Patrick Chng Kian Wee. IC: S9090659CAddress: AP1 Bkt 52 Marine Terrace #10-209 S(440052)

(hereinafter known as "the Hirer")

hereby agrees that the Owner shall let and the Hirer shall take the vehicle described below or a replacement vehicle provided by the Owner (hereinafter known as "the Vehicle") upon the terms and conditions hereinafter appearing.

1. DESCRIPTION OF VEHICLE

- a. Make & Model : Hyundai Elantra
- b. Registration No : SEA 8607A
- c. Mileage : _____
- d. Contact No : 8776 1210
- e. Bank Account : _____
- f. Email : _____

2. RENTAL PERIOD: 3 month3. DEPOSIT AMOUNT: 21500 + upfront



4. FIRST WEEK RENTAL STARTS ON _____ AMOUNT _____

5. RENTAL FEE : \$ 385 per week

a. Rental Fee includes the following items:

- i. Unlimited mileage;
- ii. Service and maintenance;
- iii. Road Tax and Radio License;
- iv. Motor Insurance Coverage (Excess applicable);
- v. 24-hours breakdown and emergency service (in Singapore only); and

1

	
Hirer's Initial	Owner's Initial

ONG AUTOMOTIVE

REG No. 53401601D

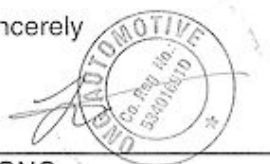
LETTER OF AUTHORIZATION

I, Yee Si Wei, NRIC NO : 39710685A is
hereby authorized to make accident reporting on behalf of company
and also be authorized to sign, initial accept or execute all documents
in connection with the following transaction : -

Accident Report

Vehicle No. : SLA 8607 A

Yours sincerely



JASON ONG
DIRECTOR

















