

# 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 ..... 21/03/2022 11:40 (SGT)  
Date of Accident ..... 20/03/2022 08:10 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... HDB CAR PARK BESIDE WEST COAST PLAZA  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... EV8882T

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TWOON KOK YAM  
NRIC No ..... SXXXX248D  
Email Address ..... TWOONKY@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-94559618  
Alternative Phone No ..... (Home) +65-64639968

### VEHICLE PARTICULARS

Manufacturer ..... Opel  
Model ..... Insignia  
Variant ..... INSIGNIA GRANDSPORT 1.5  
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 ..... 1500

### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... VPA/P2151427  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TWOON KOK YAM  
NRIC No ..... SXXXX248D

Date Of Birth .....	24/12/1958
Occupation .....	Indoor
Date Of Driving Pass .....	05/11/1983
Driving experience .....	38 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94559618
Alt. Phone Number .....	(Home) +65-64639968
Email Address .....	TWOONKY@GMAIL.COM
Address .....	107 PAVILION CIRCLE
Address complement .....	-
Postcode .....	658541
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 .....	Hit and run / Vandalism / Damaged whilst parked
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) .....	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

#### REFER REPORT

#### 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 .....	SLB9375G
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Wish
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) ..... -

#### WITNESS DETAILS

##### WITNESS 1

Name ..... JACELYN LING  
Phone ..... (Phone) +65-96743321  
Email ..... -

PERSONAL PARTICULARS

TYPE OF CLAIM: OWN DAMAGE [ ] 3RD PARTY [✓] REPORTING ONLY [ ]

DATE OF ACCIDENT: 20/3/22 TIME OF ACCIDENT: 0810H  
 LOCATION OF ACCIDENT: HOB CAR PARK BESIDE WEST COAST PLAZA.  
 VEHICLE REGISTRATION NO.: EV88827 MANUFACTURER: OPEL MODEL: INSIGNIA  
 NAME OF REGISTERED OWNER / INSURED: TWOON KOK YAM NRIC NO.: S2504248D  
 PURPOSE OF FOR WHICH WAS BRING USED AT TIME OF ACCIDENT: PRIVATE USE  
 INSURANCE COMPANY: AXA POLICY NO.: VPA/P2151427  
 NAME OF DRIVER: TWOON KOK YAM NRIC NO.: S2504248D  
 GENDER: MALE / FEMALE  
 HOME TEL: 64639968 HP NO.: 94559618 FAX NO.: -  
 EMAIL: twoonky@gmail.com  
 ADDRESS: 107, PAVILION CIRCLE POSTAL CODE: 658541  
 DATE OF BIRTH: 24/12/58 DRIVING PASS DATE: 1978

(PLEASE TICK THE RELEVANT CHOICES)

WAS DRIVER AN EMPLOYEE OF THE INSURED'S: ( ) YES (✓) NO

IF NO, RELATIONSHIP OF DRIVER WITH INSURED: \_\_\_\_\_

INSURANCE POLICY NO.: \_\_\_\_\_

WEATHER CONDITIONS?

(✓) CLEAR ( ) RAINING ( ) OTHERS \_\_\_\_\_

WAS ACCIDENT REPORTED TO THE POLICE?

(✓) NO ( ) YES, WHICH POLICE STATION: \_\_\_\_\_

WAS ANYBODY INJURED IN THE ACCIDENT?

(✓) NO ( ) YES, NAME: \_\_\_\_\_ INJURIES SUSTAINED: \_\_\_\_\_

NO OF PASSENGER INCLUDING DRIVER: \_\_\_\_\_ NAME (1): \_\_\_\_\_ (M/F)

NAME (2): \_\_\_\_\_ (M/F)

NAME (3): \_\_\_\_\_ (M/F)

NAME (4): \_\_\_\_\_ (M/F)

VEHICLE NO. OF INJURED / PASSENGER OR OTHERS: \_\_\_\_\_

CONVEYED TO HOSPITAL ( ) NO ( ) YES, AT WHICH HOSPITAL: \_\_\_\_\_

(THIRD PARTY DRIVER'S PARTICULARS)

DRIVER NAME: \_\_\_\_\_ NRIC: \_\_\_\_\_ HP NO: \_\_\_\_\_

VEHICLE REGISTRATION NO.: SLB 937SG MANUFACTURER: TOYOTA MODEL: WISH.

WITNESS'S PARTICULARS

NAME: JACELYN LING NRIC: \_\_\_\_\_ HP NO: 96743321

\* DOCUMENTS TO ATTACH: I/C & DRIVING LICENCE FRT / BACK  
 INSURANCE CERT, SITE PHOTOS, VIDEO

## SKETCH PLAN

## IMPORTANT NOTICE

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7. By the lodging 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

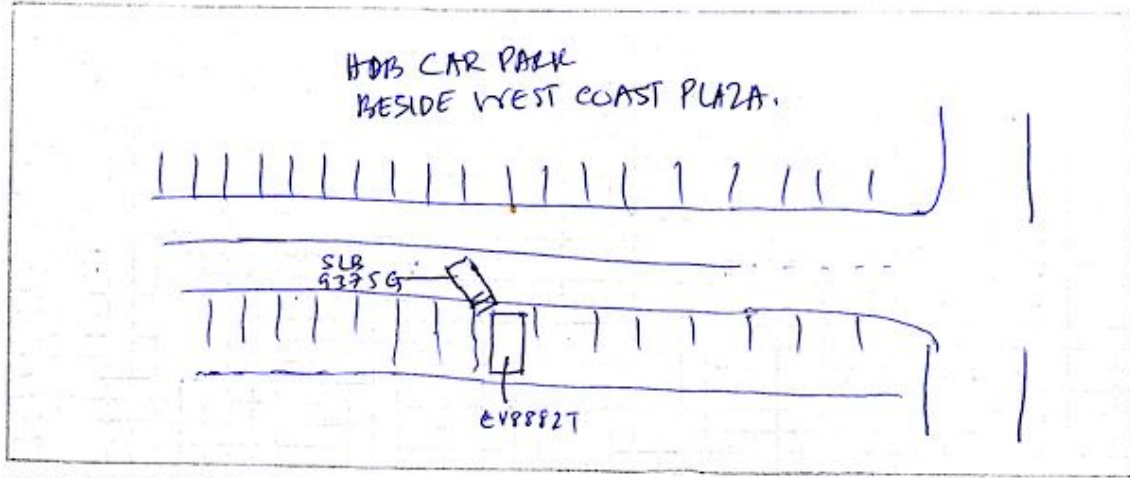
Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On Sunday 20 March 22, I parked my car at the HDB open car park, at around 8.05 am, and made my way to the Clementi Bible Centre to attend the morning service. After service at around 10 am, I went to my car and saw an envelope with a short note on my car. The person has left informed me that another driver hit my car (hit & run case). She gave me her contact and told me that she can provide me with the video footage as evidence of the incident. Her name was Jacelyn Ling. She I contacted her and she kindly provided me the video footage, showing the other driver hit my car whilst reversing his/her car.

DECLARATION

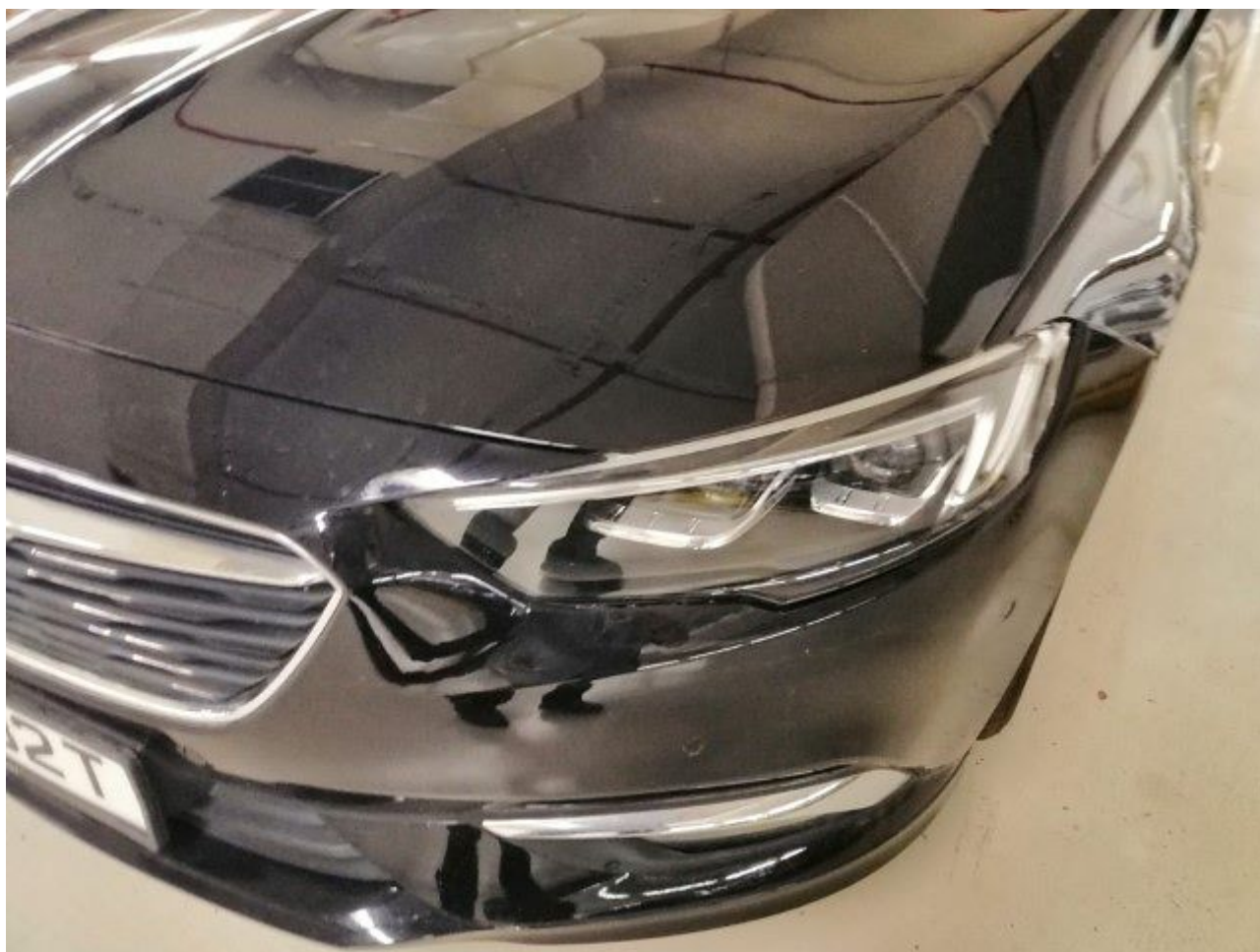
I/We declare the foregoing particulars are true in every respect.

*[Signature]* 21/3/22  
Policyholder's Signature  
Date & Time:

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

*[Signature]*  
Reporting Centre Person's Signature  
Name:  
NRIC/FIN No.:

































AXA INSURANCE PTE LTD  
8 Shenton Way, #24-01  
AXA Tower, Singapore 068811  
Customer Centre #01-21  
Tel: 1800 8804888 Fax:-  
Website: www.axa.com.sg  
GST Registration Number: 199903512M  
customer.care@axa.com.sg



# CERTIFICATE OF INSURANCE

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

CERTIFICATE NO.	: VPA/P2151427	Account No. : 15038
Coverage	: Comprehensive	
Sum Insured	: Market Value At The Time Of Loss	
Name of Policy Holder	: TWOON KOK YAM	
Vehicle Registration No.	: EV8882T	
Period of Insurance	: From 27/06/2021 To 26/06/2022 (Both Dates Inclusive)	

## PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

- (a) The Policyholder  
The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner
- (b) Any other person who is driving on the Policyholder's order or with his 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 in that behalf from driving the Motor Vehicle.

## LIMITATIONS AS TO USE\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; 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.

(01)

Basic Own Damage Excess : SGD 750.00

An Additional Excess is applicable as follows:  
S\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver.  
S\$5,000.00 for Undeclared Young and Inexperienced Driver.  
(Please refer to your policy on the terms & conditions)

\* 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, 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 - SGRAC02 on 17/06/2021

### 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).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.