

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 04/04/2022 16:40 (SGT)
Date of Accident 01/04/2022 17:00 (SGT)
Exact Location of Accident Hougang Street 21, Singapore
Additional Location Information Blk 202 Hougang Street 21 (open air carpark)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKL6131Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Hung Wei Loong David
NRIC No S1650244H
Email Address lausiew@siew@gmail.com
Mobile Phone No (Phone) +65-96622305
Alternative Phone No (Home) +65-96622305

VEHICLE PARTICULARS

Manufacturer Toyota
Model Lexus IS250
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 2500

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA603927
Cover Note Number -

DRIVER

Name of Driver Hung Chen En Elnathan
NRIC No S9813993A

| | |
|--|-----------------------|
| Date Of Birth | 30/04/1998 |
| Occupation | Indoor |
| Date Of Driving Pass | 21/09/2017 |
| Driving experience | 4 YEARS AND 7 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96385669 |
| Alt. Phone Number | - |
| Email Address | lausiewsiew@gmail.com |
| Address | 21 Poh Huat Road |
| Address complement | - |
| Postcode | 546719 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Child |
| 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) | 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 attached 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 | SMG4888M |
| Vehicle Manufacturer | Mercedes |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | Tan Choon Kian |
| NRIC No | S7128414Z |
| Contact Number | (Phone) +65-96223458 |
| Address | - |

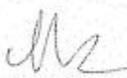
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

Describe Circumstances of the Accident

I was trying to find an empty lot within an open air carpark (252 Henggang Street). The road was sloped at an angle where in order to reverse back into a parking lot, I would have needed to press on my accelerator a bit harder than the usual. Upon finding a desired lot, I positioned my car at an angle so such that it looked like I was intending to park my car. For safety, I checked both side mirrors and saw no sign of any vehicles or people behind me. The other car (the Mercedes) was driving relatively close to my rear. At the moment my car stopped at an angle, the other car stopped relatively close to my rear side. As I thought I was in the clear to reverse into my lot, I carried on doing so. However I did not realize that the other car was partially blocking my way into the lot. As I reversed in at an angle, the bumper of my car contacted into the other car's number plate. Only at the very last moment as my car was very near to the other car, the other driver braked ~~at~~ at the very last moment. After the hit, I got out of my car to check on the other driver. While I was conversing with the other driver, the other driver let go of his brake. As a result of the other car rolled forward towards my car as while I was getting out of my car before the other driver reversed his car a bit. The other car collide with my bumper again.

Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date & Time

 04/04/22 1500hrs.
 Driver's Signature (if driver is not the policyholder) / Date & Time


 Witnessed by Reporting Centre Personnel



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 04/04/22

To: Owner of Vehicle Number: SKL 6131Y

The following has been advised to you via your workshop, S2H Motor through their staff, Mr Wong. 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:

HUNG WEI LOONG DAVID HUNG CHEN GU SWATHA

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, permit drivers who are permitted to drive the insured Vehicle.

[Signature]
 Name and signature of workshop personnel including company stamp

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)
 8 Shenton Way #24-01 AXA Tower Singapore 068811
 AXA Customer Centre #01-21/22

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.

[Handwritten Signature]
 Policyholder's Signature / Date & Time

[Handwritten Signature] 04/04/22 1500hrs.
 Driver's Signature (If driver is not the policyholder) / Date & Time

[Handwritten Signature]
 Witnessed by Reporting Centre Personnel

Sketch Plan

