

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 25/07/2022 17:49 (SGT)
Reported by Both
Date of Accident 24/07/2022 11:50 (SGT)
Exact Location of Accident 41 Pasir Ris Drive 6, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKJ9559M

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner PHEY CHOON HOCK
NRIC No S1579183G
Email Address msphey7388@gmail.com
Mobile Phone No (Phone) +65-96668172
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Glc250
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 - Reporting only
Vehicle Category Private car
Transmission Auto
CC 2000

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Policy Number / Cover Note Number GA552732/1

DRIVER

Name of Driver PHEY CHOON HOCK
NRIC No S1579183G
Date Of Birth 14/05/1963
Occupation Indoor

Date Of Driving Pass	20/11/2019
Driving experience	2 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96668172
Alt. Phone Number	-
Email Address	msphey7388@gmail.com
Address	19 PASIR RIS DRIVE #12-40
Address complement	-
Postcode	518089
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	Collided into Parked Vehicle
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Pasir Ris Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005852999
Alt. Police Station Phone No	(Fax) +65-65855261
Police Station Address	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20220724/2079.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
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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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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
(Name as in NRIC/ID card)

Sketch Plan

Vehicle A = SKJ 9559 M
Vehicle B = Unknown



441A Pasir Ris Drive 6 Car Park

Describe Circumstance of the Accident

Refer

Refer to Police Report : T/20220724/2079

Declaration

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

[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

LETTER OF UNDERTAKING

I/We, PHBY CHHON HOEK, the owner of vehicle no. SEJ 9559W

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.**

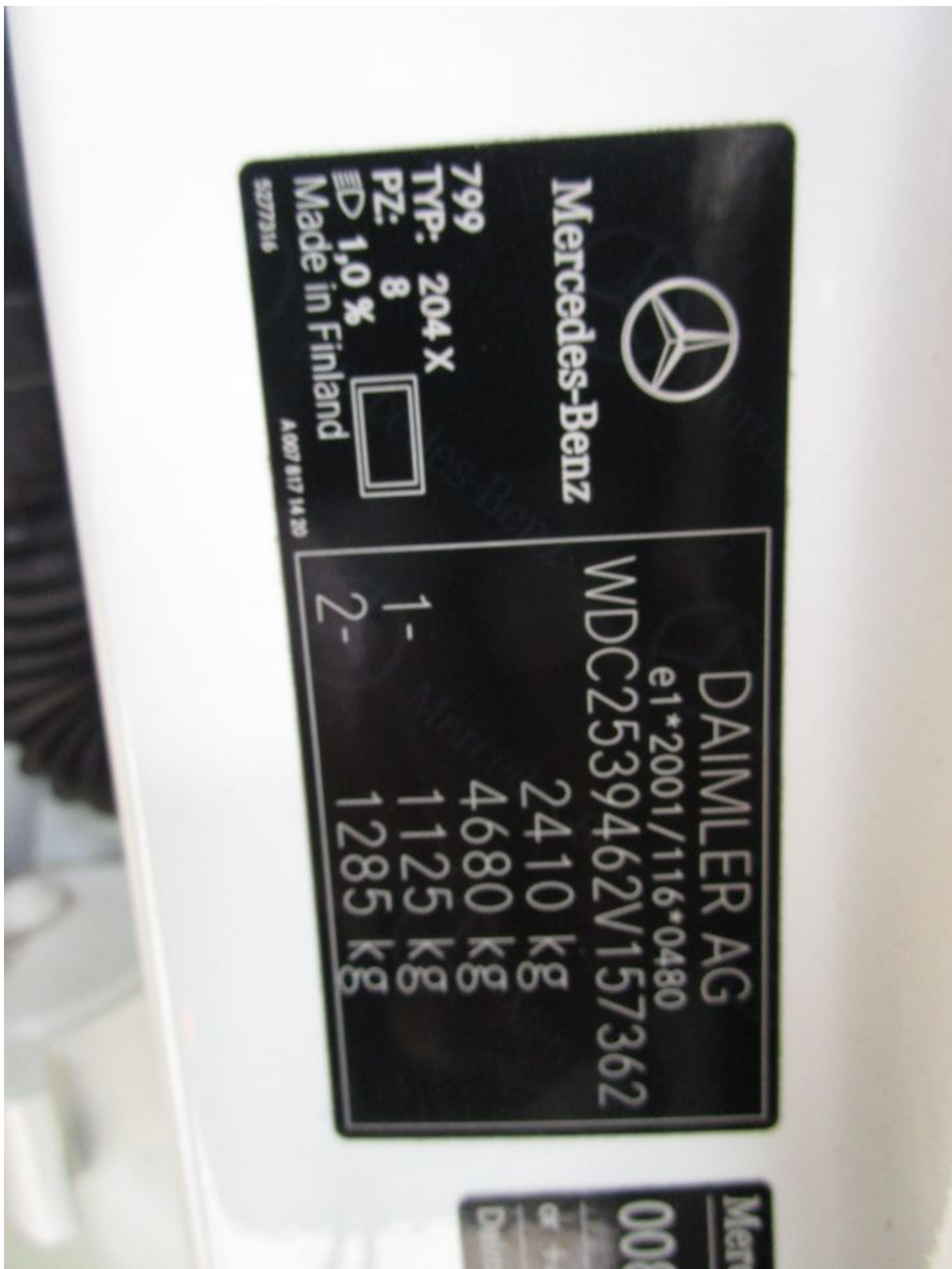
My/Our Third Party claim is handle by my/our preferred workshop, _____

Signed and Acknowledge by:

1579183/G 
Nric no. & signature of policyholder

Company stamp

25/7/22
Date















**SINGAPORE
POLICE FORCE**



T/20220724/2079

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20220724/2079

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/07/2022 21:37	Vide Report No.:	Station Diary No.: 46
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Informant's Particulars

Name of Informant: PHEY CHOON HOCK			Address: 19 PASIR RIS RISE #12-40 SINGAPORE 518089	
ID Type / ID No.: NRIC NO / S1579183G			Contact No.:	
Nationality: SINGAPORE CITIZEN			Home/Office:	Mobile: 96668172
			Email:	
Sex: Male	Age: 59	Date of Birth: 14/05/1963	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 24/07/2022 12:00	Type of Location: Car Park
Location: PASIR RIS DRIVE 6				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKJ9559M	Car	MERCEDES BENZ	GLC250 AMG LINE 4MATIC AUTO	White	No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKJ9559M	AXA INSURANCE SINGAPORE PTE LTD	GA552732	26/09/2021	25/09/2022



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T/20220724/2079

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519457
Tel No: 1800-5852999

2 of 3

Report No. T/20220724/2079

CONTINUATION OF REPORT**Brief Details.**

On 24/7/2022, at about 11.50am, I drove my vehicle into Blk 441A Pasir Ris Drive 6 and I parked my vehicle at either deck 3A or deck 3B. I remembered that I had parked my vehicle beside a wall, and the vehicle that was parked beside mine was an old Mercedes Benz, but I cannot recall the colour or any other details. Thereafter, I went to a nearby food centre to buy packed food. About 10 minutes later, I came back to my vehicle and drove off.

The slope down the the deck below was near to my parking lot of the left. Hence, I drove out of my parking lot and turned left, and while I was entering the downward slope, I felt that my vehicle's tyres had collided onto the kerb at the slope as the MSCP was quite narrow. At that point in time, I was also playing music in my vehicle. I assumed that my vehicle's tyre had strike onto the kerb and I went on and drove down the MSCP to and left the location to go back home.

At about 7.51pm, I received WhatsApp message and a call from an investigation officer of Traffic Police, stating that I have to lodge a police report regarding an accident that occurred at Blk 441A Pasir Ris Drive 6 MSCP at about 12pm. I was given an incident number for the case, G/20220724/0182. I clarified that I do not know that my vehicle had collided onto another vehicle and to check the left side of my vehicle. I then went to make a check on my vehicle and noticed that there were no damages on the left side of my vehicle. I have an in-car camera that I have yet to check whether there was any video footages which captured what had happened.



**SINGAPORE
POLICE FORCE**



T/20220724/2079

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3

Report No. T/20220724/2079

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:
G /
SGT 3 OH JIA KAI JACKIE

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
24/07/2022 21:37

Officer In Charge Of Case:
TP / GIA /
SR STAFF SGT MUHAMMAD NOOR BIN
ABDUL RAHMAN
Contact No.: 65476219

Classification Of Case:

NP168



redefining / Insurance

AXA Insurance Pte Ltd

1800 880 488 (Within Singapore)
(65) 6880 4888 (International)

(65) 6880 4710

customer.care@axa.com.sg

www.axa.com.sg

Certificate of Insurance

 Account number
05185

Policy details

Policyholder name	PHEY CHOON ROCK	Certificate number	GA552732 / 1
Cover	Comprehensive	Chassis number	SC2154320000000000
Plan name	Flexi	Engine number	2743200000000000
NCD applicable	40%		
Vehicle registration number	SKJ9559M		
Period of Insurance	26/09/2021 to 25/09/2022		
Finance/loan company			

Persons or classes of persons entitled to drive*

Limitation as to use*

EXCESS	Loss/Damage Excess	SGD 300.00
	And deductibles	SGD 100.00

Additional clauses & endorsements to your policy

AXA Insurance Pte Ltd

Important note

 AXA Insurance Pte Ltd : 199903512M
 8 Shenton Way, #24 02, AXA Tower
 Singapore 068811
 Customer Centre, #B1 01

1 of 2