SS31229Q0002 / SPECIALISTS MOTOR PTE LTD ENTRY DATE & TIME: 26/09/2022 11:52 (SGT) SUBMITTED BY: Irene Ting VERSION: 1 (26/09/2022 11:52 (SGT))

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Actual Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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 26/09/2022 11:52 (SGT) Reported by Driver Date of Accident 25/09/2022 12:26 (SGT) **Exact Location of Accident** Upper Bukit Timah Rd, Singapore Additional Location Information UPPER BUKIT TIMAH ROAD Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMN7080U INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner ACE DRIVE PTE LTD Company Reg No 2XXXXX348K

**Email Address** accidentreport@acedrive.sg Mobile Phone No (Phone) +65-93268363 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Freed Variant

Exact purpose for which vehicle was being used at time of Private use

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Policy Number / Cover Note Number VFX/P2415936

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LIM HUI XIAN, CHARMAINE SXXXX555A 04/12/1985 Indoor

No - Claiming third party

Private car

Date Of Driving Pass 05/04/2007 Driving experience 15 YEARS AND 5 MONTHS Gender Female Mobile Number (Phone) +65-90624094 Alt. Phone Number **Email Address** accidentreport@acedrive.sg Address BLK 4 PANDAN VALLEY #04-416 Address complement Postcode 597628 Is the driver the policyholder? Nο 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 Collision - Major/Minor Rd Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 3 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 PASSENGER 1 Name NG ENG SIANG Gender Male PASSENGER 2 Name **DECLAN NG** 

Name DECLAN
Gender Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

AT AROUND 12.26PM, 25TH SEPTEMBER 2022, WHILE DRIVING ALONG UPPER BUKIT TIMAH ROAD APPROACHING BUKIT TIMAH PLAZA. AS I APPROACHED THE ENTRANCE, SUDDENLY VEHICLE B (SKH1947P) CAME OUT FROM THE CARPARK EXIT AND COLLIDED INTO THE LEFT SIDE OF MY VEHICLE (SMN7080U). NO ONE WAS INJURED.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident

Yes Yes

FILE TOO BIG

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category 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)

SKH1947P

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Private car

ANG CHUN HWEE BENNY (WENG JUNHUI)

SXXXX777F

(Phone) +65-98531845

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#### **SKETCH PLAN**

### **IMPORTANT NOTICE**

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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.

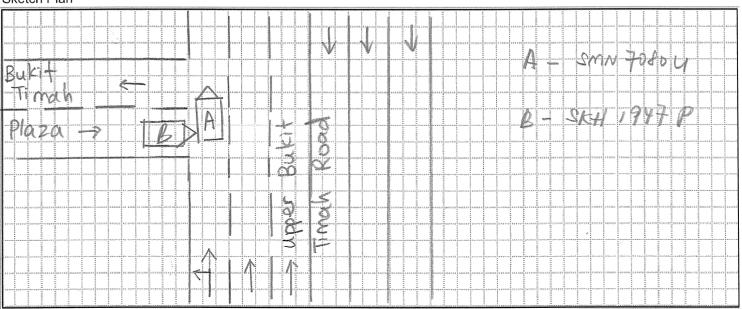
Policyholder's Signature / Date & Time

DRIVE CONTRACTOR DRIVE Pte. Ltd.

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

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

# Sketch Plan



Describe Circumstance of the Accident	
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## Declaration

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

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

