

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 Actual 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	02/11/2022 21:19 (SGT)
Reported by	Both
Date of Accident	02/11/2022 12:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	FARRER ROAD TO BT TIMAH ROAD (NEAR ST. MARGARET)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX8313B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KENNY TAY XIAN KHING
NRIC No	SXXXX277C
Email Address	KENNYTAYXK@GMAIL.COM
Mobile Phone No	(Phone) +65-81616551
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Civic
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	GA615555/1

DRIVER

Name of Driver	KENNY TAY XIAN KHING
NRIC No	SXXXX277C
Date Of Birth	27/02/1984
Occupation	Indoor

Date Of Driving Pass	09/09/2004
Driving experience	18 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81616551
Alt. Phone Number	-
Email Address	KENNYTAYXK@GMAIL.COM
Address	28 WATTEN VIEW
Address complement	-
Postcode	287150
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	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	3
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)	2
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	WIFE
Gender	Female

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 SKETCH PLAN.

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	SJC3158A
Vehicle Manufacturer	Honda
Vehicle Model	Civic
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHER TSER NAM, JAMES
NRIC No	SXXXX111E
Contact Number	(Phone) +65-98793581
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLD9382A
Vehicle Manufacturer	Audi
Vehicle Model	A3
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	YANG SHUXIANG
NRIC No	SXXXX286G
Contact Number	(Phone) +65-90303896
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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.

[Signature] 1340h
2/11/22

Policyholder's Signature / Date & Time

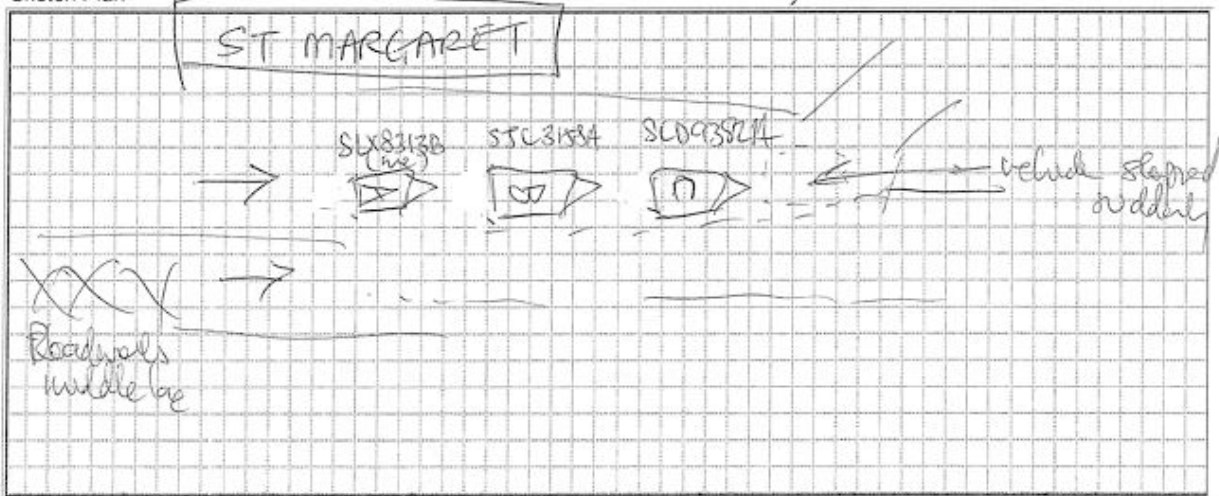
[Signature] 1340h
2/11/22

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

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



Sketch Plan



vJun2022

1

Describe Circumstance of the Accident


1. Roadworks middle lane closing view of left most lane (middle lane closed off) from before Empress market to near filter lane.
2. I changed lane from right to middle + then to left.
3. in front of SLD 9382A, a vehicle had stopped suddenly.
4. Despite braking, unable to stop in time + hit SJC 3183A (middle car between me + SLD 9382A).

Declaration

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

 1340h
2/4/22

Policyholder's Signature / Date & Time

 1340h
2/4/22

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


W. KIM HIN AUTO PTE LTD
TEL: 6452 7018
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Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)























