

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 10/11/2022 11:29 (SGT)
Reported by Driver
Date of Accident 09/11/2022 22:40 (SGT)
Exact Location of Accident Bencoolen St, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SCP3737T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN CHO HIANG
NRIC No S1303017J
Email Address elvintan@eps2008.com.sg
Mobile Phone No (Phone) +65-96175779
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Audi
Model A6
Variant A6 1.8 TFSI ULTRA (PI) (NAV)
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1798

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Policy Number / Cover Note Number GA088496

DRIVER

Name of Driver KENNY TAN YONG HOCK
NRIC No S8944845Z
Date Of Birth 11/12/1989
Occupation Indoor

Date Of Driving Pass	27/05/2008
Driving experience	14 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97767863
Alt. Phone Number	-
Email Address	kennytyh89@gmail.com
Address	502 SERANGOON NORTH AVE 4
Address complement	#14-504
Postcode	550502
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	Raining
Road Surface	Wet

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)	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	JJ
Gender	Male

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

PLS REFER TO THE SKETCH PLAN BY DRIVER

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	SFM1834P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

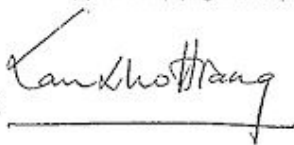
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT NOTICE

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7. By the lodgment 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.

X 

Policyholder's Signature
Date & Time:

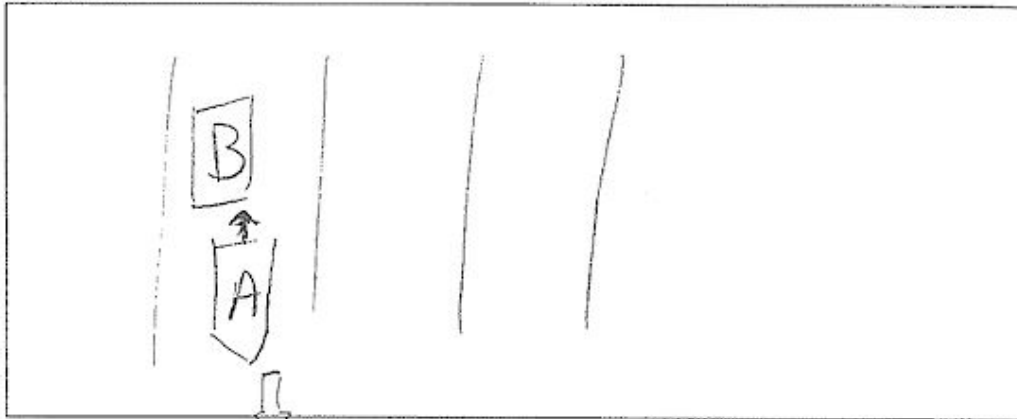


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Ah Lim Motor Company

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

Date of accident: 09/11/2022 Time: 10:40pm Location: Bencoolen Street
 My Vehicle A: SCP3737 T Vehicle B: SFM 1834 P Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Was at traffic Light when I dropped something & shift my gear to parked. When light turned green, instead of shifting to drive, I shifted to ^{reverse} ~~reverse~~ and that is when I hit the other party.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :

Email address :

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

X Kan Shu Heng
 Policyholder's Signature
 Date & Time: _____

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

Zila
 Ah Lim Motor Company
 Reporting Centre Personnel's Signature
 Name: _____
 NRIC/FIN No.: _____

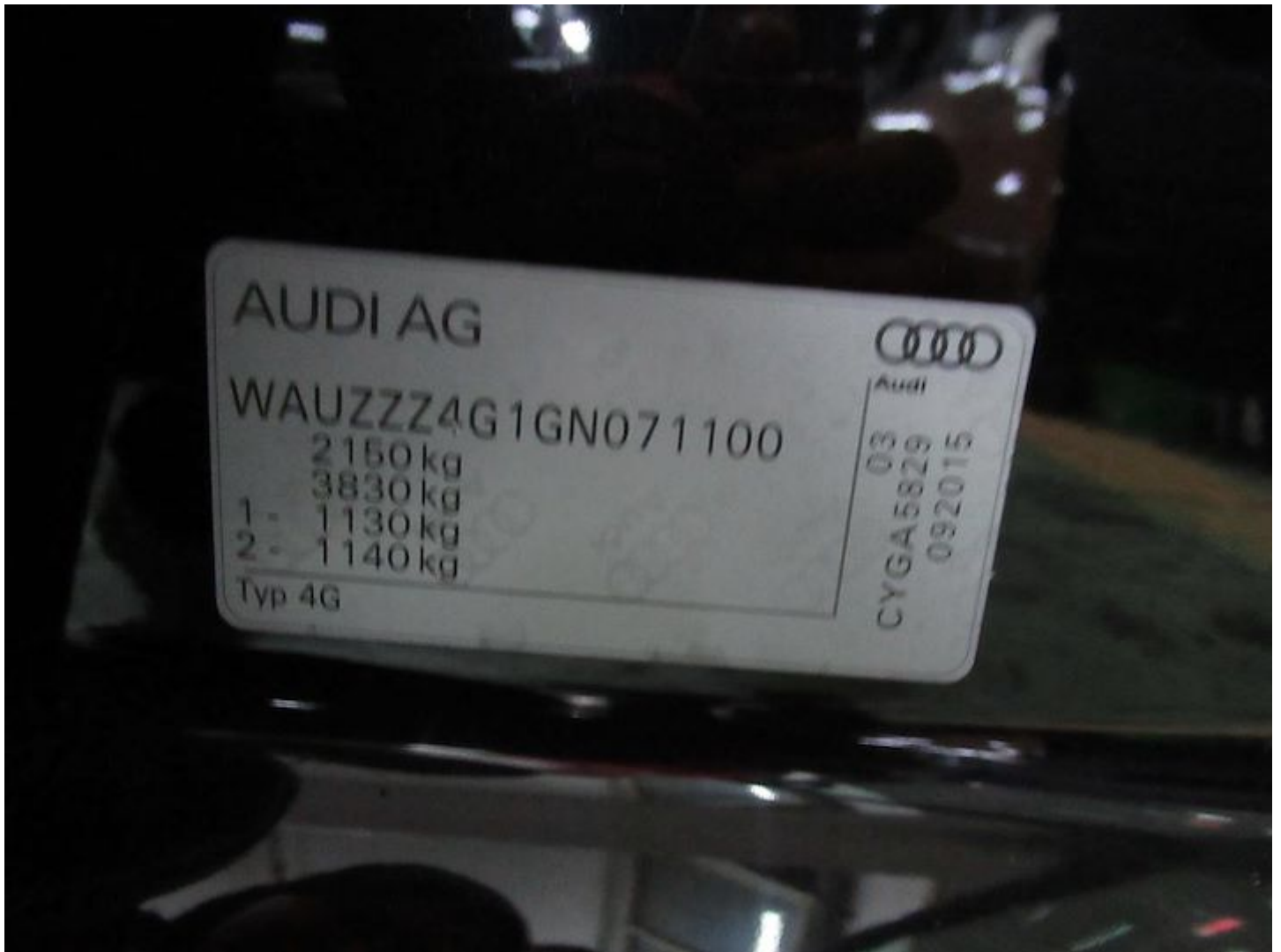
AH LIM MOTOR COMPANY



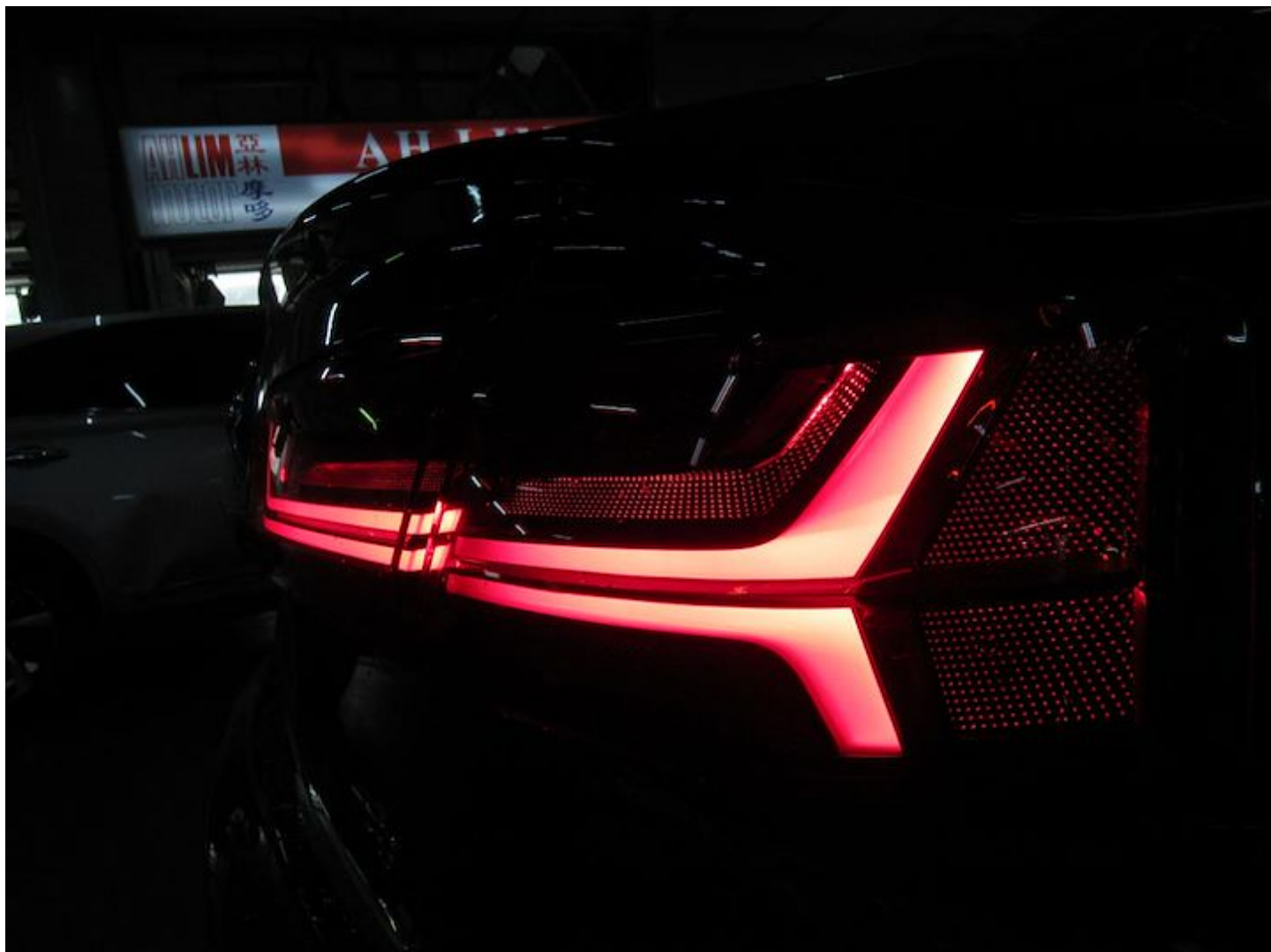




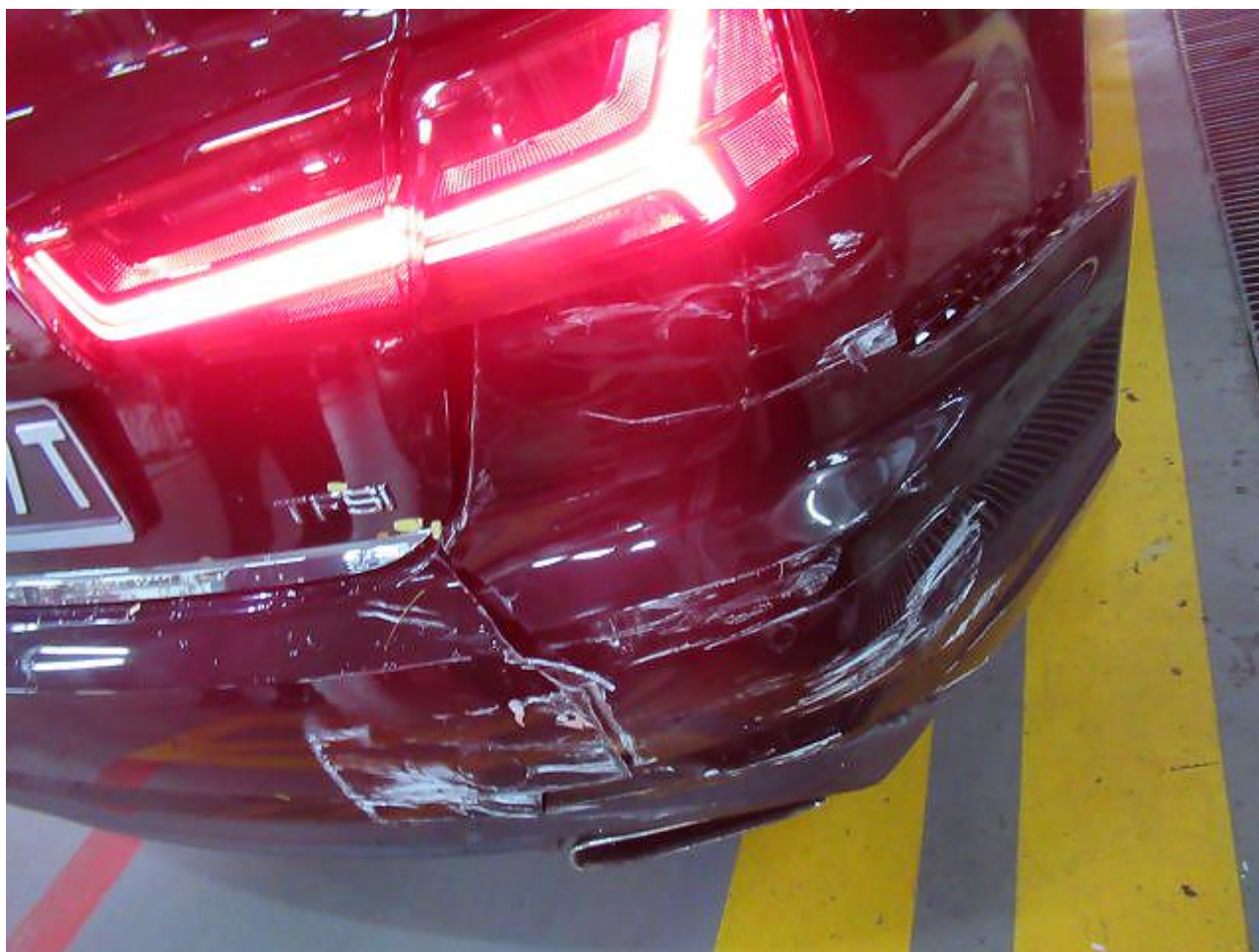










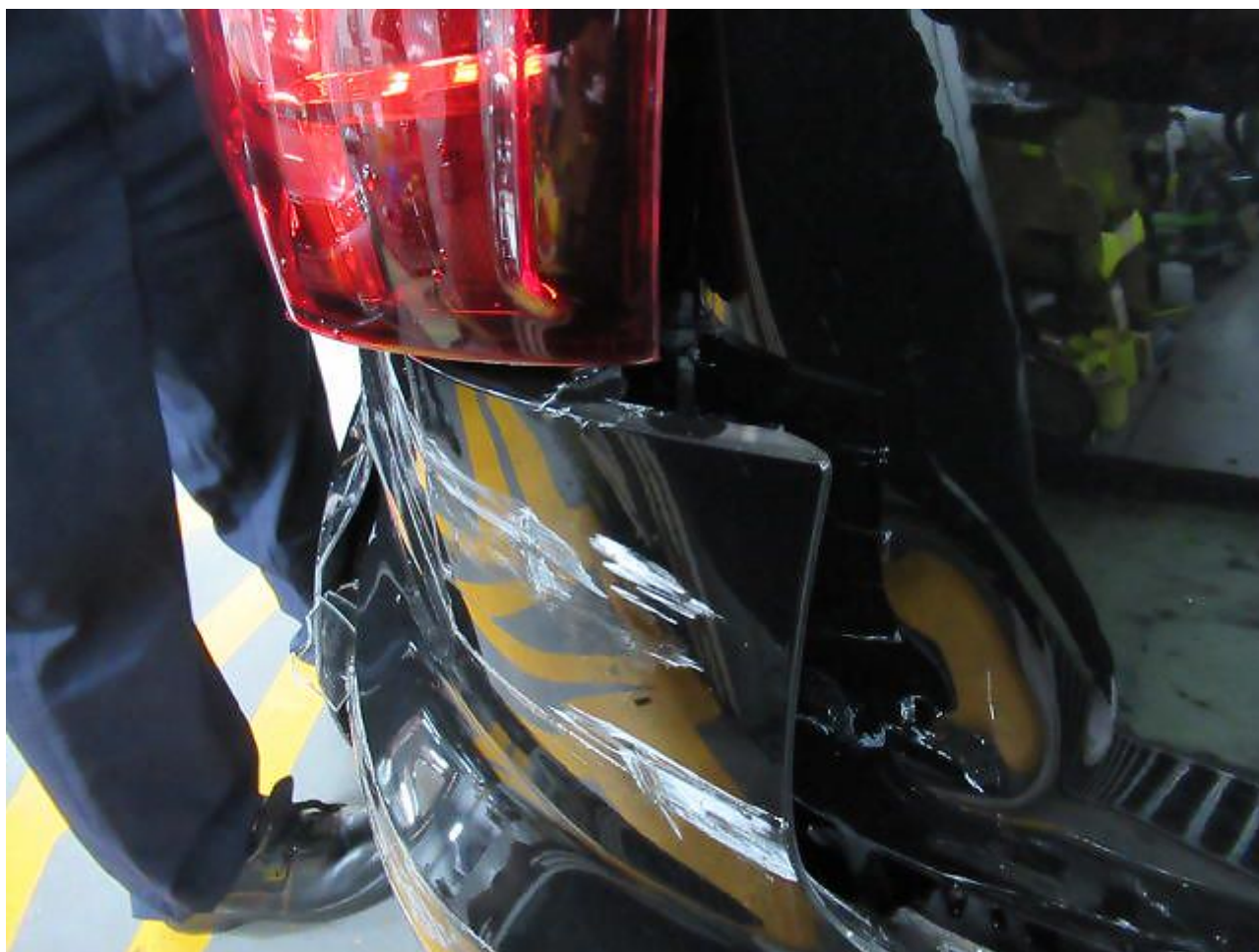






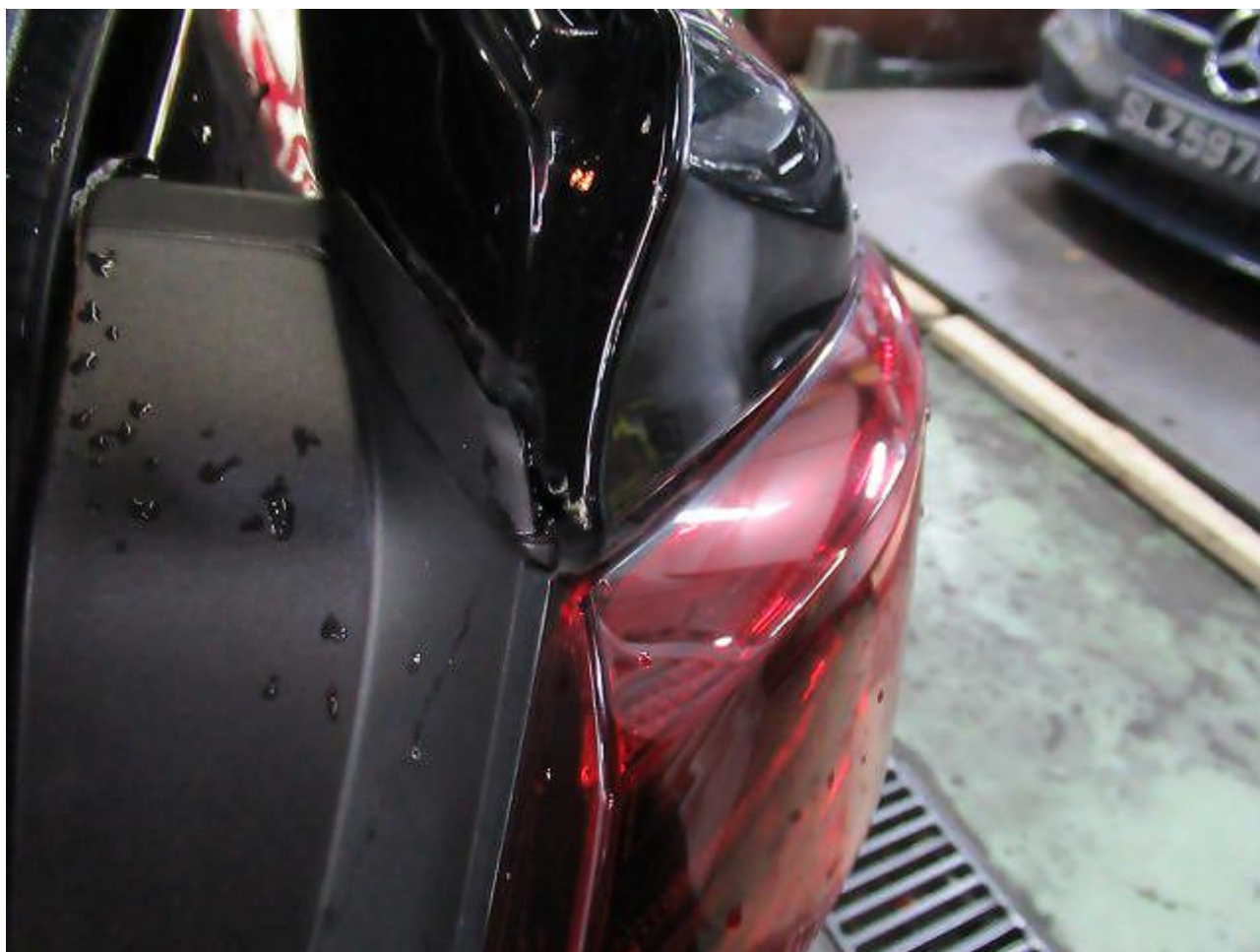


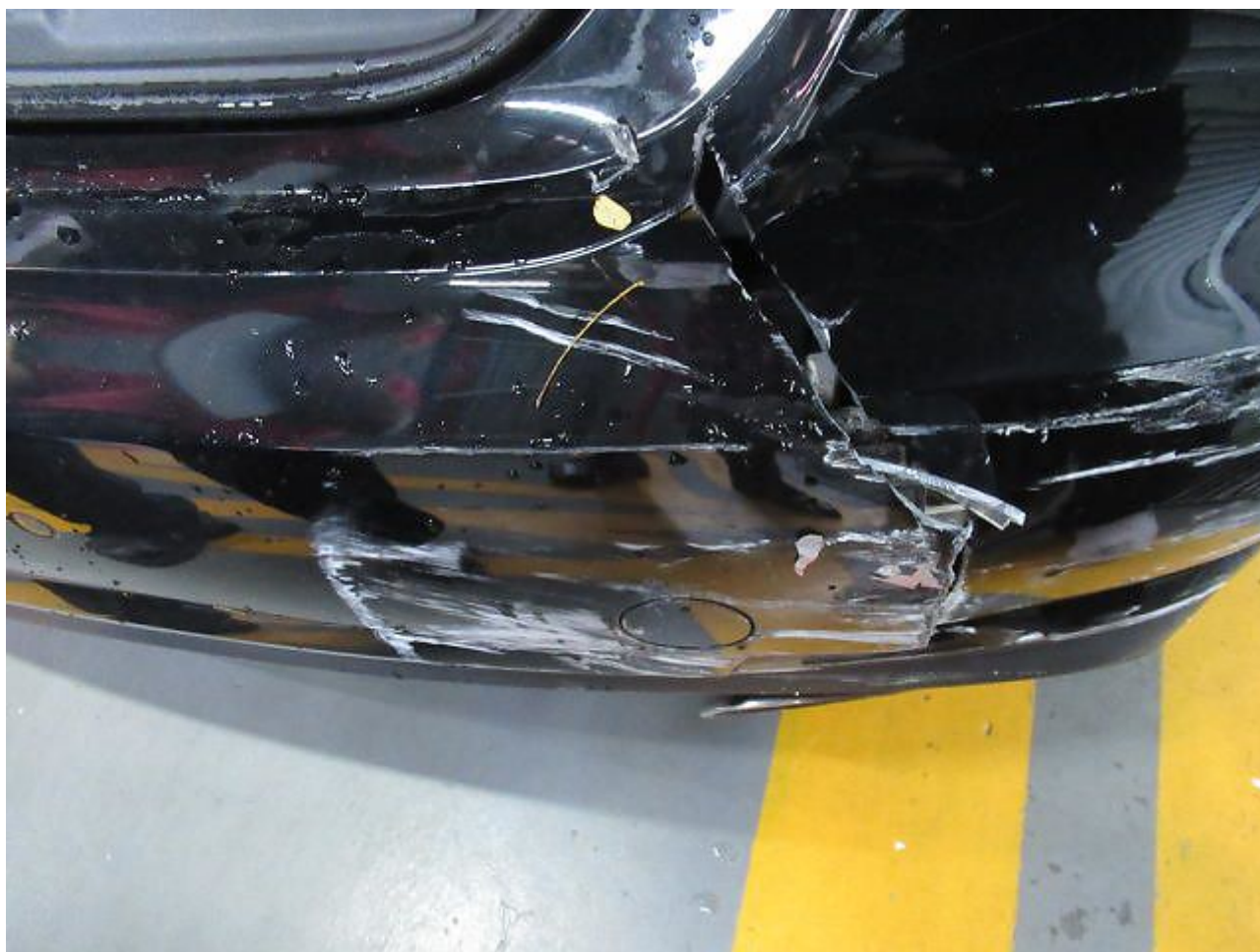












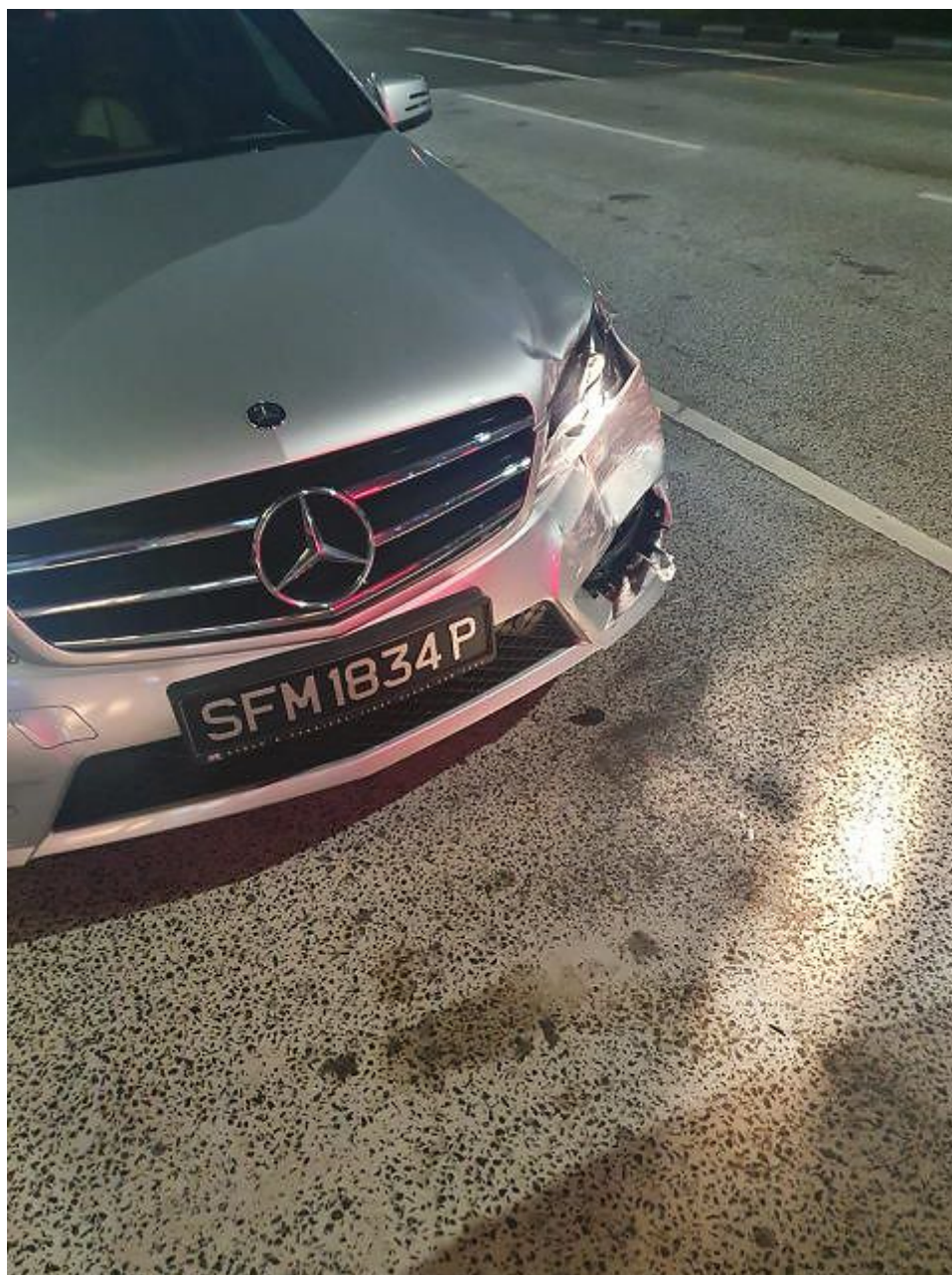












To Whom It May Concern,

Accident involving my vehicle no. PCP3737T on 09/11/22 (date) with
SFM1374P (other vehicle no) along Penroden St

I, TAN CHO HANG Nric No. S1303017-J

Owner of vehicle no. SCP3737T am aware of the accident of my vehicle on
09/11/22 (Date) while car was driven by Kenny Tan Yany Hock
 Nric No. S89449452. I hereby, authorise him / her to make the report.

X Tan Cho Hang
 Name Tan Cho Hang
 Date: 10th Nov 2022

.....
 ..
 To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
 above accident.

X Tan Cho Hang
 Name Tan Cho Hang
 Date: 10th Nov. 2022



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 10 NOV 2022

To: Owner of Vehicle Number: SC3A37T

The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, Eileen, Zila, Mui Hong, Wei Jie. 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 on the claims procedure for the type of claim that you will be making due to this accident.
- > 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.
- ☒ 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.
- ☒ 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.
- ☒ The estimated waiting time for the spare parts to arrive is TBA. The estimated arrival time does not include the repair period.
- ☐ 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 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.
- ☐ 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.
- ☐ Others _____

Signed and acknowledged by:

Name and signature of policyholder/ authorized driver* and company stamp (where applicable)

*authorized driver: either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

Zila Name and signature of workshop personnel including company stamp
 Ah Lim Motor Company



redefining / insurance

TAN CHO HIANG
23 PARK VILLAS TERRACE
SINGAPORE 548302

AXA Insurance Pte Ltd
☎ 1800 880 4888 (Within Singapore)
(65) 6330 4888 (International)
☎ (65) 6880 4740
✉ customer.care@axa.com.sg
🌐 www.axa.com.sg

Renewal

date
13/01/2022

your servicing distributor
MAXURANCE VENTURE / 03926

your servicing distributor contact
61002592

Policy Schedule

Your SmartDrive Comprehensive Flexi

Your policy snapshot

Policyholder name	TAN CHO HIANG	Policy number	GA088496
Cover	Comprehensive	FIN / NRIC	XXXXX017J
Period of Insurance	from 29/01/2022 to 28/01/2023 (both dates inclusive)		

Premium breakdown

Gross Premium after 40% NCD	SGD 2,165.98
Total Discounts	- SGD 115.48
7% GST	SGD 143.53
Final Premium	SGD 2,194.03

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Flexi Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Coverage
- Loss or Damage
- Legal Liability
- Workshop of your Choice
- Medical and hospital expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Reimbursement of 110% of your car's market value in the event of total loss due to flood (without Basic Own Damage Excess)

Add-on Benefits

- Personal Accident benefit of up to \$50,000.00 for you and your named drivers
- 1st Chain (Personal Protector)

Vehicle details

Make & Model of Vehicle	AUDI A6 1.8 TURBO ULTRA	Year of manufacture	2015
Vehicle registration number	SCP3737T	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	1798
Seating capacity (incl. driver)	4	Engine number	CYG009170
On-Road tax	No	Chassis number	WAUZZZ4G1GN071100

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	DBS BANK LTD

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess	SGD 1,000.00
Windscreen Excess	SGD 100.00

AXA Insurance Pte Ltd (199903513M)
8 Shenton Way #24-01 AXA Tower
Singapore 069511
Customer Centre #B1-01

1 of 2

VA1/ GA088496

Drivers details

Driver type	Driver name	Date of birth	Driving experience
Main Driver	TAN CHO HIANG	28/09/1958	44 year(s)
Additional Driver	TAN YONG HOCK KENNY	11/12/1989	11 year(s)

Additional clauses & endorsements to your policy

Nil

What you should do

- Keep this Policy Schedule as record of insurance cover for your vehicle
- This Schedule should be read in conjunction with the Terms and Conditions of the Policy Wording

AXA Insurance Pte Ltd

This is an auto-generated document and hence no signature is required

Issued by BANNIRAJU Chinmay on 13/01/2022 06:14:47 PM
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redefining / insurance

