

# 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 .....	02/12/2022 15:45 (SGT)
Reported by .....	Driver
Date of Accident .....	01/12/2022 17:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	OUTSIDE 17 BEGONIA WALK
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLC9325X
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN JEE JIAR ANDREW JAIR
NRIC No .....	S1165379J
Email Address .....	ANDREW.TANJJ@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-98776011
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	WISH 1.8 CVT
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? .....	Yes
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1798

### INSURANCE COMPANY

Name of Insurance Company .....	AXA Insurance Pte Ltd
Policy Number / Cover Note Number .....	GA351195

### DRIVER

Name of Driver .....	TAN XING LIANG
NRIC No .....	S9431759B
Date Of Birth .....	30/08/1994
Occupation .....	Indoor

Date Of Driving Pass .....	23/04/2015
Driving experience .....	7 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90926802
Alt. Phone Number .....	-
Email Address .....	TAN.XING.LIANG94@GMAIL.COM
Address .....	20 SARACA VIEW
Address complement .....	-
Postcode .....	807296
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 .....	Collided into Parked Vehicle
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) .....	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 .....	JEANNIE
Gender .....	Female

#### PASSENGER 2

Name .....	ARIELLE
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 TO THE ATTACHED SKETCH PLAN BY DRIVER.

#### ATTACHMENT(S)

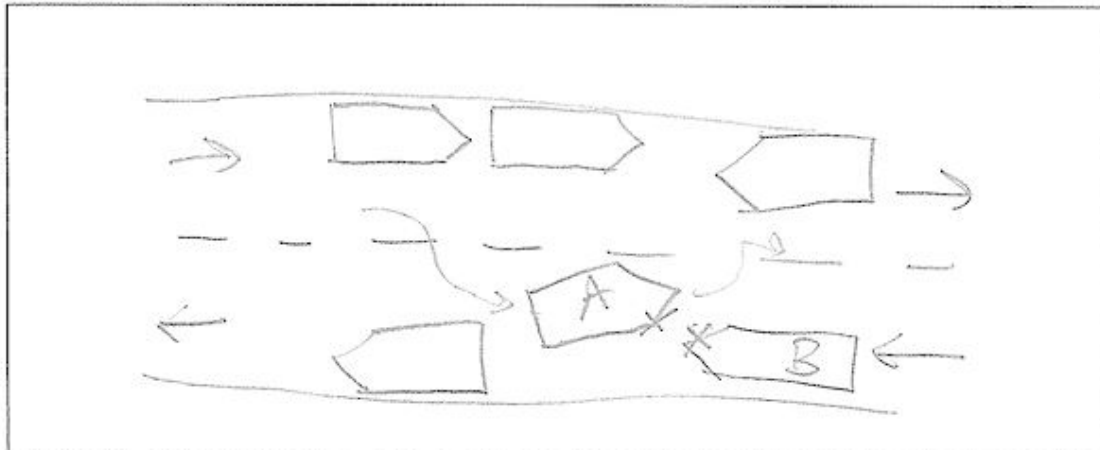
Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJD5867T
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) .....	-

Date of accident: 1st Dec 2022 Time: 17:30 Location: Outside 17 Begonia Walk  
 My Vehicle A: SLC 9325X Vehicle B: STD 5867T Vehicle C: -

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

It was raining heavily and I was driving along Begonia Walk. It is a narrow road with cars parked on BOTH sides of the road making it hard to navigate through. I was suddenly bitten by an insect on my neck which caused me to turn the car steering wheel slightly and hit car B on the right side of car B.

☒ 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.

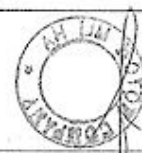
DECLARATION

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

Policyholder's Signature  
 Date & Time:

2 Dec 22

Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 2 Dec 2022,



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

AH LIM MOTOR COMPANY

## SKETCH PLAN

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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.

Policyholder's Signature  
Date & Time:

2 Dec 22

Driver's Signature  
(If driver is not the policyholder)

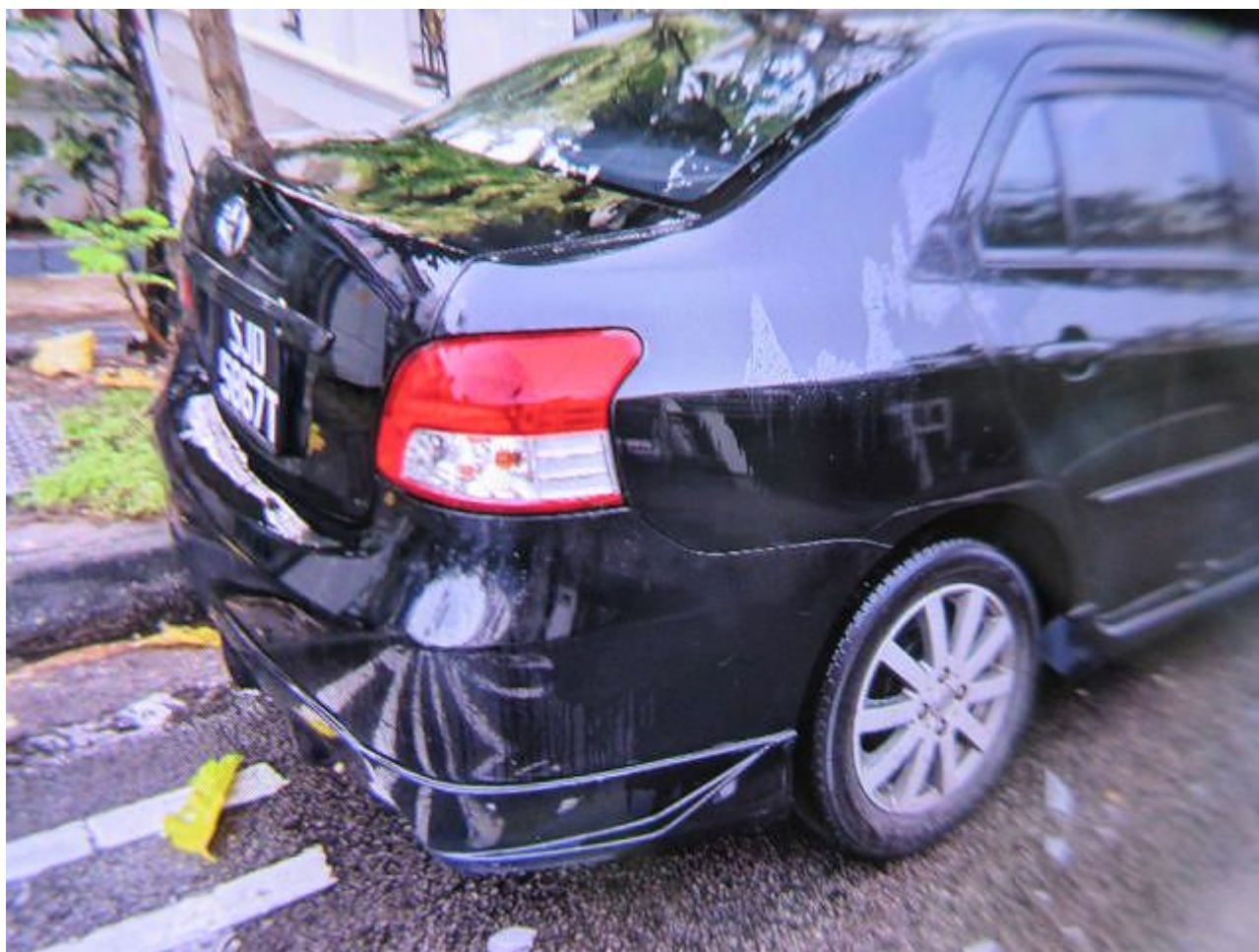
Date & Time: 2 Dec 2022

Reporting Centre Personnel's Signature  
Name:

NRIC/FIN No.:





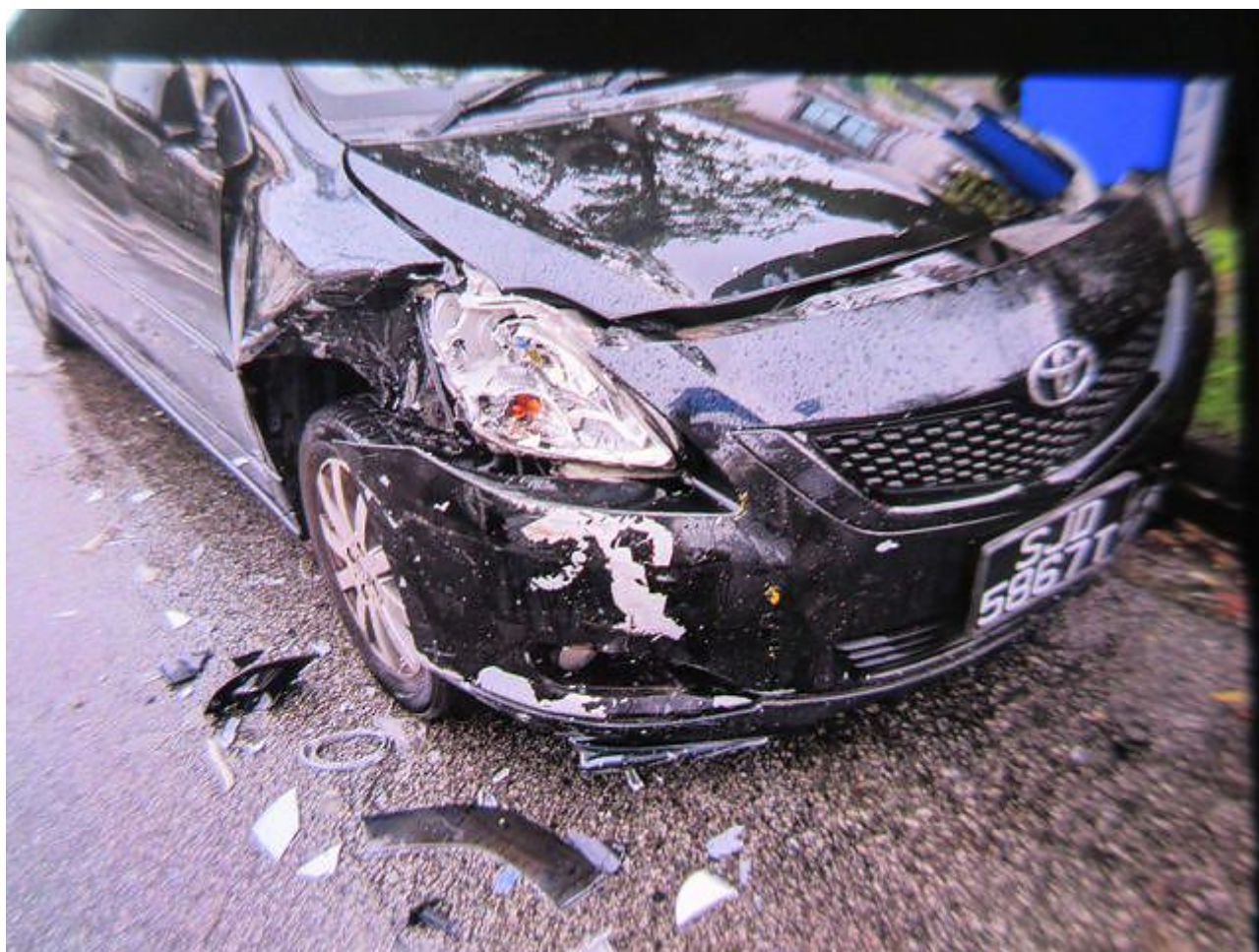












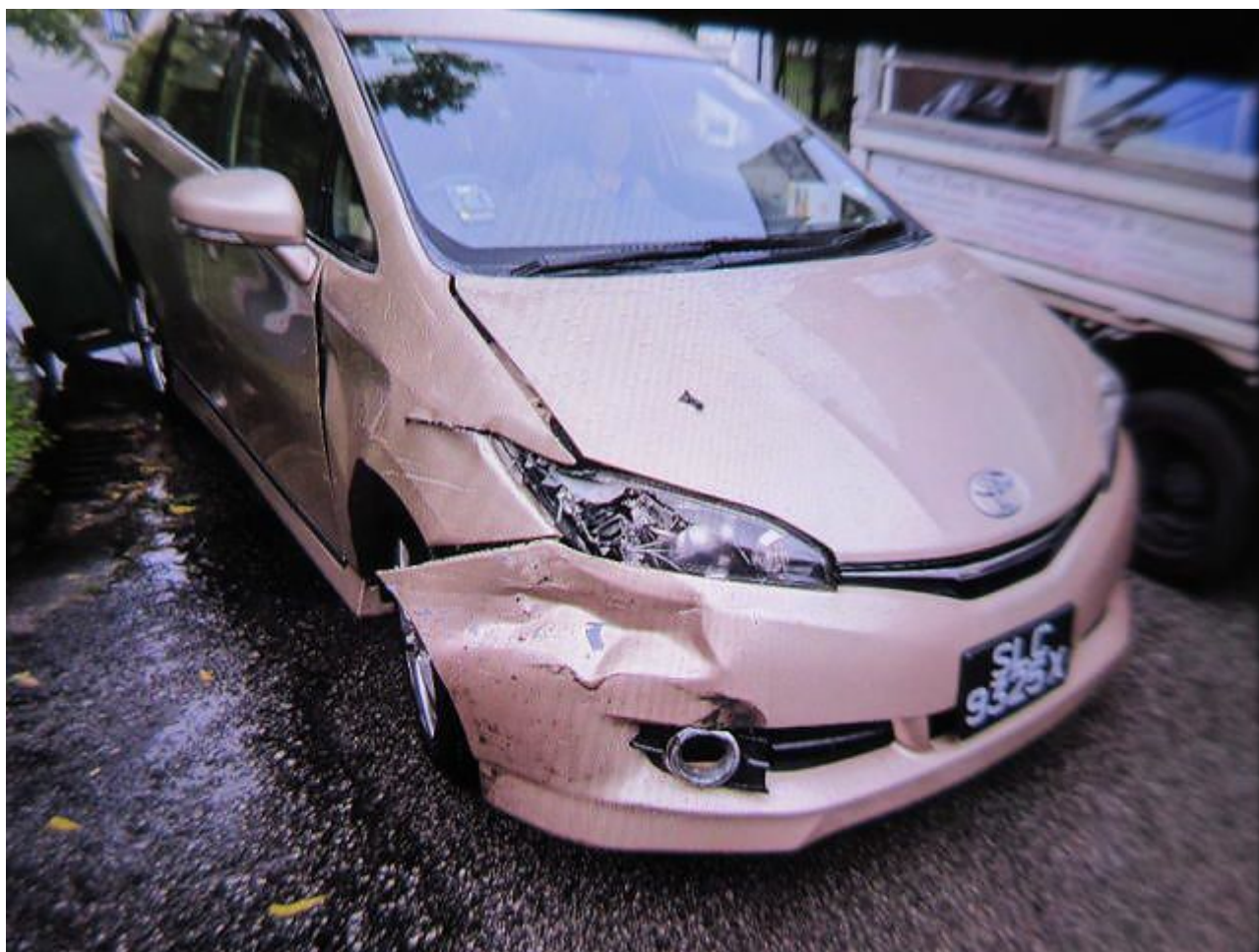






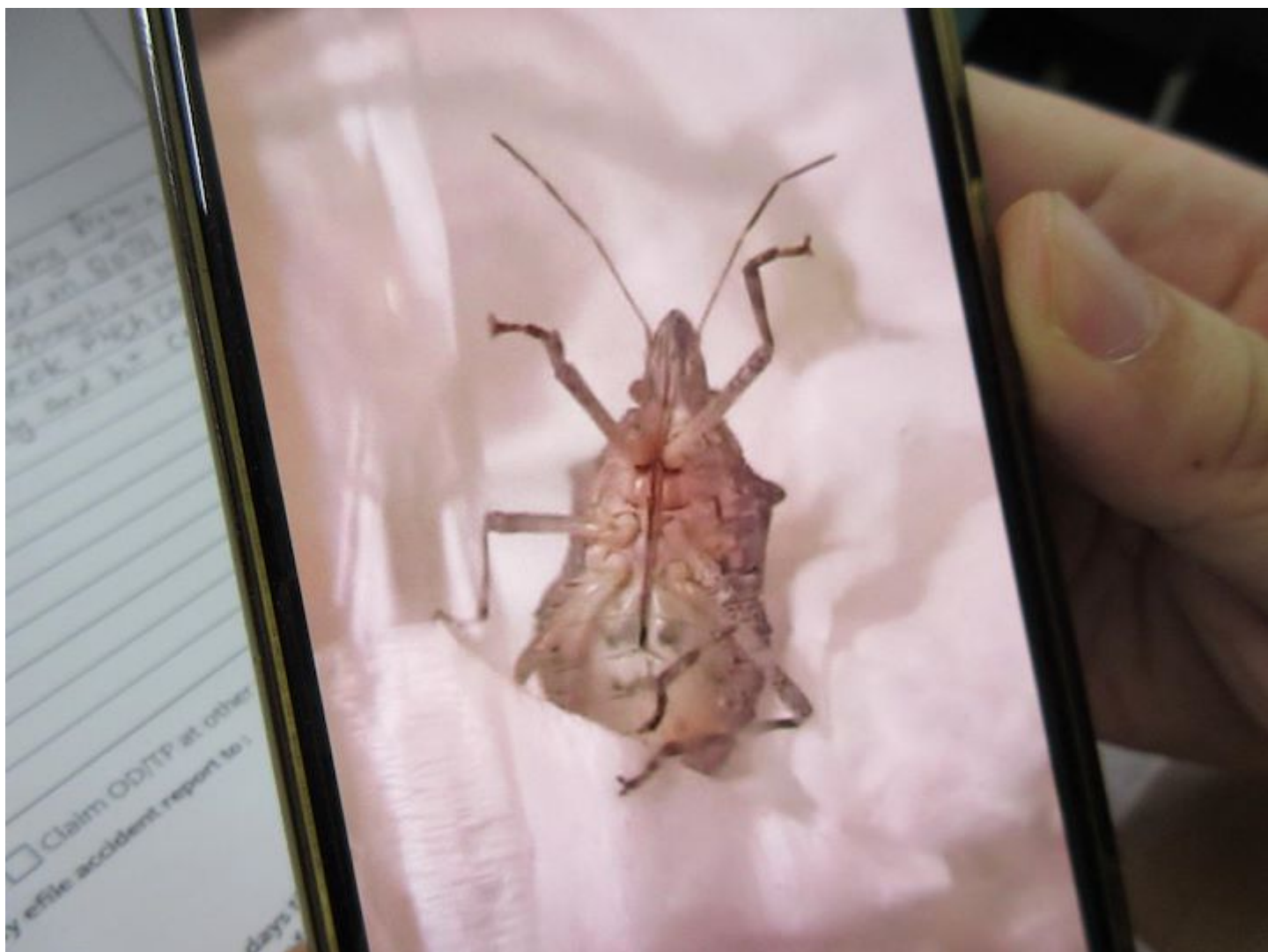
















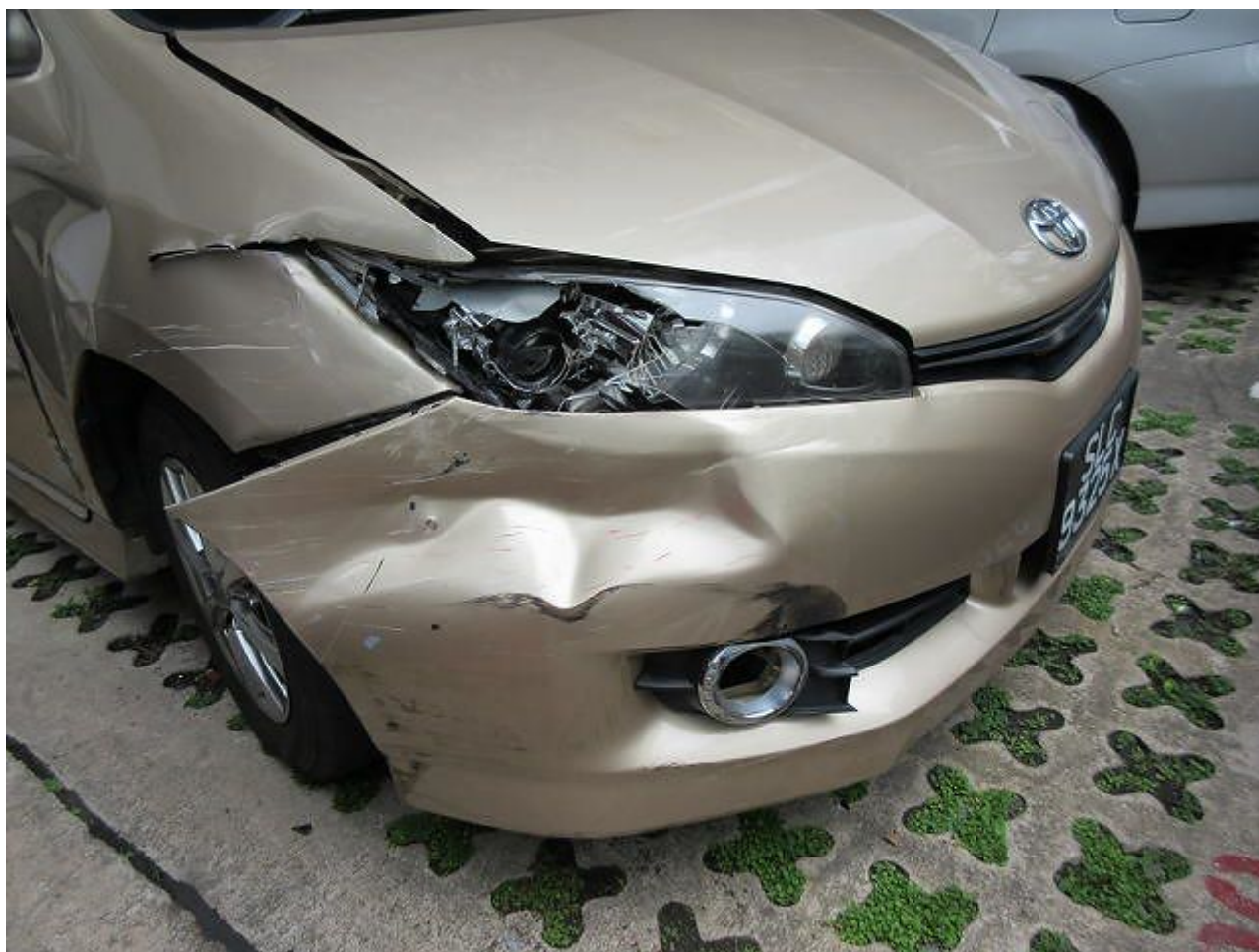
















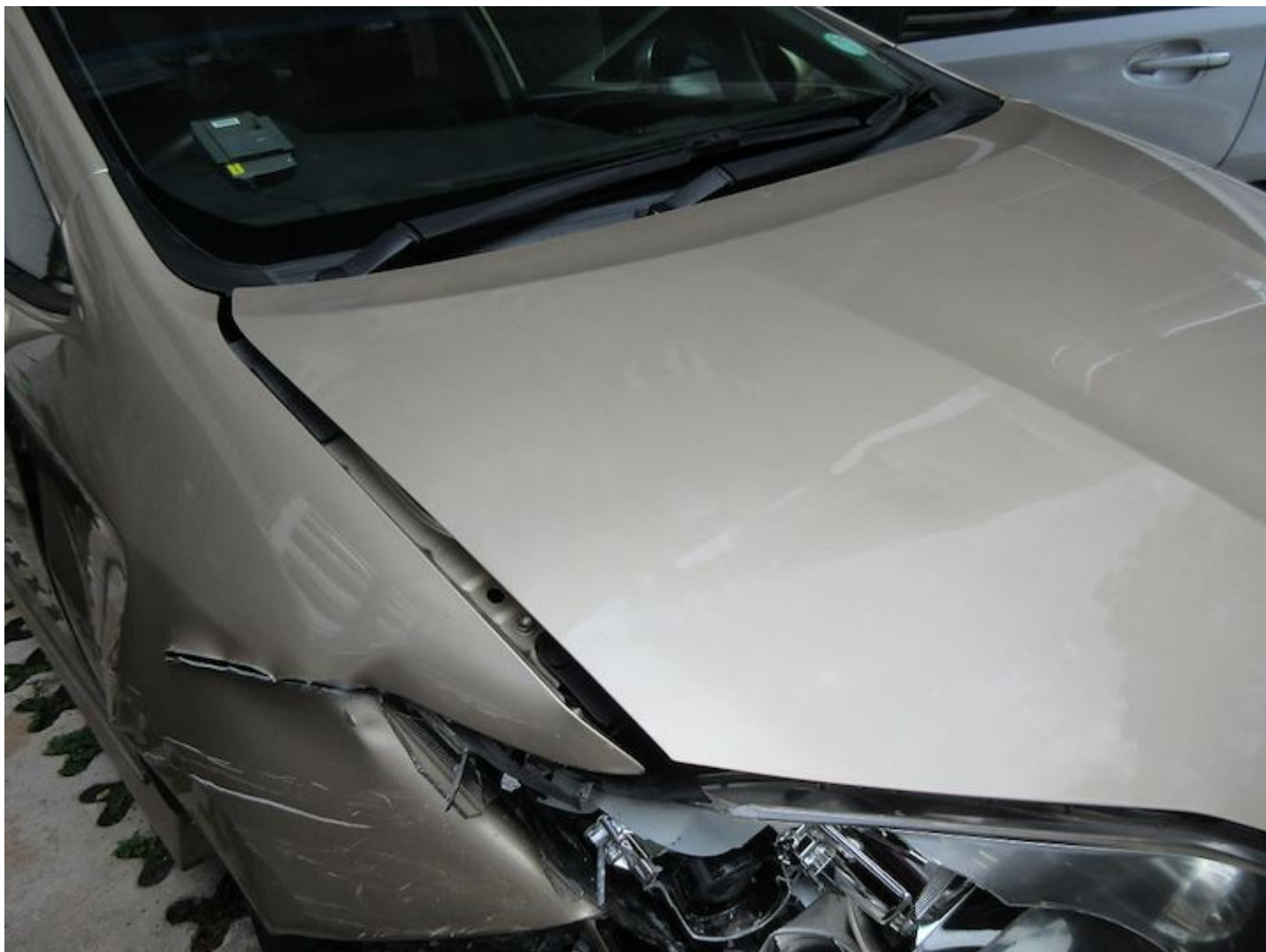
















redefining / insurance

AXA Insurance Pte Ltd  
 1800 690 4888 (Within Singa)  
 (65) 6889 4888 (International)  
 (65) 6889 4740  
 customer.care@axa.com.sg  
 www.axa.com.sg

date  
 31/03/2022

policy number  
 GA351195

account number  
 18267

## Certificate of Insurance

Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third Party Risks and Compensation) Rules, 1959 - Road Transport Act, 1987 - Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

### Policy details

Policyholder name	TAN JEE JAR ANDREW JAR	Certificate number	GA351195 / 1
Cover	Comprehensive	Chassis number	JTDGG20W90J004214
Plan name	Toyota Prestige Max	Engine number	22R1706877
NCD applicable	50%		
Vehicle registration number	SLC9325X		
Period of Insurance	from 30/05/2022 to 29/05/2023 (both dates inclusive)		
Finance loan company	Nil		

### Authorized Drivers

- (a) The Policyholder  
 (b) Any Named Driver as stated in the Policy  
 (c) Any person who is driving on the Policyholder's order or with their permission  
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

### Limitation as to use\*

- Use of the motor vehicle is connected to the Policyholder's business
- Use for the carriage of passengers (besides commercial hire or reward) in connection with the Policyholder's business
- Use for social, domestic, and personal purposes

The Policy does not cover:

- Use for commercial hire or reward, or for racing, pace-making, reliability trial, or speed testing
- Use while drawing a trailer, except for the towing of a disabled person's mechanically propelled vehicle

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS Windscreen Excess

Not Applicable

Young/Inexperienced driver excess

An additional excess of \$2500 (to be added to any excess imposed under the Policy) whilst the Insured MotorCar is being driven by any driver below 23 years old and/or has been issued a valid driving license to drive in Singapore for the relevant class of vehicle for less than one year

Young and/or Inexperienced driver shall mean any person who

- Is less than 23 years old, and/or
- Has been issued with a valid driving license to drive in Singapore for the relevant class of vehicle for less than 1 year

### Additional clauses & endorsements to your policy

Nil

We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

AXA Insurance Pte Ltd (199903512M)



## POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 2/12/22To: Owner of Vehicle Number: SLC 9322X

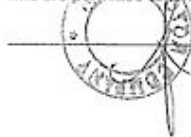
The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, Eileen, Zila, Mui Hong, Wei Jie. Please tick the applicable box if you had been advised on any of the following:

- ☒ 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 7 days. 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 to 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.



Name and signature of workshop personnel including company stamp

To Whom It May Concern,

Accident involving my vehicle no. SLC9325X on 1/12/22 (date) with  
STD 5267T (other vehicle no) along \_\_\_\_\_

I, Tan Tee Jear Andrew Jari Nric No. S1165379J

Owner of vehicle no. SLC9325X am aware of the accident of my vehicle on  
1/12/22 (Date) while car was driven by Tan Xing Liang  
 Nric No. S9431759B. I hereby, authorise him / her to make the report.

X



Name

Tan Tee Jear Andrew Jari

Date:

2/12/22

..

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



Name

Tan Tee Jear Andrew Jari

Date:

2/12/22