

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 13/06/2022 13:21 (SGT)
Date of Accident 11/06/2022 12:30 (SGT)
Exact Location of Accident Bishan Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKB3399P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHOW KING LOONG
NRIC No S2556511H
Email Address CHOW.MIKE@YAHOO.COM
Mobile Phone No (Phone) +65-96823399
Alternative Phone No +65-96823399

VEHICLE PARTICULARS

Manufacturer BMW
Model 218i
Variant 218I ACTIVE TOURER D/AB LED DSC ABS
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1499

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number P1636007
Cover Note Number 22/06/2021 - 21/06/2022

DRIVER

Name of Driver CHOW KING LOONG
NRIC No S2556511H

Date Of Birth	09/01/1963
Occupation	Indoor
Date Of Driving Pass	30/06/1981
Driving experience	41 YEARS
Gender	Male
Mobile Number	(Phone) +65-96823399
Alt. Phone Number	+65-96823399
Email Address	CHOW.MIKE@YAHOO.COM
Address	58 CARISBROOKE GROVE
Address complement	-
Postcode	558834
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	Collision - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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

PASSENGER 1

Name	CINDY GOH
Gender	Female

PASSENGER 2

Name	MAE CHOW
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH TRAFFIC POLICE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FY129K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	ASRAFF
NRIC No	S9347102D
Contact Number	(Phone) +65-82332414
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ASRAFF
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	ABRASION
Injured person in which vehicle?	FY129K
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

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.

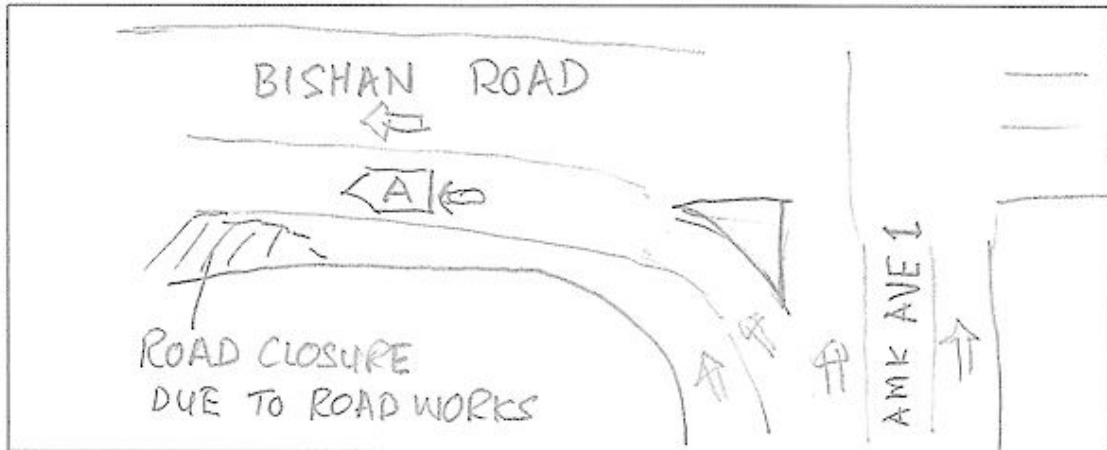
Policyholder's Signature
Date & Time:

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

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

COMPLETED 10 JUN 2022

Date of accident: 11/6/22 Time: 12:30 PM Location: Bishan Road
 My Vehicle A: SKB 3399P Vehicle B: FY 29 K Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to traffic police report T/20220611/7032

☐ 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: Riverien

& myself:

Email address:

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

DECLARATION

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

Andy
 Policyholder's Signature
 Date & Time:

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

Zila
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 COMPLETED 13 JUN 2022





















**SINGAPORE
POLICE FORCE**



T/20220611/7032

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220611/7032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/06/2022 21:54		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHOW KING LOONG			Address: 58 CARISBROOKE GROVE SINGAPORE 558834		
ID Type / ID No.: NRIC NO / S2556511H			Contact No.: Home/Office: Mobile: 96823399		
Nationality: SINGAPORE CITIZEN			Email: CHOW.MIKE@YAHOO.COM		
Sex: Male	Age: 59	Date of Birth: 09/01/1963	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/06/2022 12:30	Type of Location: Straight Road
Location: BISHAN ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Controlled by Others e.g. Workmen		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
FY129K	Motorcycle	HONDA		Black	Slightly Damaged	0
SKB3399P	Car	BMW	218I ACTIVE TOURER D/AB LED DSC ABS	White	Slightly Damaged	2



**SINGAPORE
POLICE FORCE**



T/20220611/7032

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220611/7032

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKB3399P	AXA INSURANCE SINGAPORE PTE LTD	P1636007	22/06/2021	21/06/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	ASRAFF		ID No.	S9347102D
Related Vehicle	FY129K (Motorcycle)		Contact No.	82332414
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	Slight
Driver				
Name	CHOW KING LOONG		ID No.	S2556511H
Related Vehicle	SKB3399P (Car)		Contact No.	96823399
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

I was driving along Ang Mo Kio Ave 1 and turned left to Bishan Road at the junction. While driving on the middle lane of Bishan Road about 60m from the junction, a car (SLX8413X) on my left was trying to filter to my lane as the left lane was closed due to some road works. As the car was very close to my car, to avoid collision, I slowed down my car to almost a halt. After a few seconds, I heard a bang on the rear of my car. A motorcycle (FY129K) has hit onto the left rear side of my car. The impact caused the rider to fall. He was conscious but appeared to be in pain. I called 911 for ambulance and traffic police for assistance.



SINGAPORE
POLICE FORCE



T/20220611/7032

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220611/7032

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
SITI NORHAFIDAH BINTE HANAFI
Contact No.: 65476202

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
11/06/2022 21:54

Classification Of Case:



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 13 JUN 2022

To: Owner of Vehicle Number: SIC333998

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 _____. 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 Claim Third Party @ Own Workshop.

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.

Eileen Zila Mui Hong Wei Jie Name and signature of workshop personnel including company stamp

COMPLETED 13 JUN 2022

13:40

4G

Done P1636007_CI_...



AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Co. No. L1636007
Tel: 1800 828 1233 Fax:
Website: www.axa.com.sg
SST Registration Number: 19930351201
Certificate Date: 20/05/2021



CERTIFICATE OF INSURANCE

*Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 187) *Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 *Road Transport Act, 1987 (Singapore) *Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO. : VPA/P1636007 Account No. : 11615
Coverage : Comprehensive
Sum Insured : Market Value At The Time Of Loss
Name of Policy Holder : CHOW KING LOONG
Vehicle Registration No. : SKB3399F
Period of Insurance : From 22/06/2021 To 21/06/2022 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

(a) The Policyholder;
The Policyholder may also drive a motor car not belonging to or not hired under a hire purchase agreement or otherwise to him or his employee or his partner
(b) Any other person who is driving on the Policyholder's order or with his permission
Provided that the person driving is prohibited in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so 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.

LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

Basic Own Damage Excess : SGD 600.00

An Additional Excess is applicable as follows:
\$5500.00 for Unnamed Authorized Driver A/or Declared Young & Inexperienced Driver.
\$55,000.00 for Undeclared Young and Inexperienced Driver.
(Please refer to your policy on the terms & conditions)

* Limitations imposed by Section 3 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 187) and Section 91 of the Road Transport Act, 1987 (Singapore), are not to be included under these headings.

We hereby certify that the policy to which this certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 187) and Part IV of the Road Transport Act, 1987 (Singapore).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by : SGOHEGHA on 20/05/2021

IMPORTANT

Policyholders are advised that at the time of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or misplaced a statutory declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 187).
The Premium Waiving Clause requires the premium to be paid in full within a specified period failing which there would be no liability under the policy, renewal certificate, certificate and endorsement etc.

CLAIMS PROCEDURE

A. At the Accident Site

1. Exchange particulars with all parties involved in the accident including name, NRIC/ID number, telephone number, address and insurance company.
2. Take note of the third party vehicle numbers. Please also take digital photographs (e.g. 360°) of all the third party vehicles involved in the accident and a view of the accident scene. There are to be included in the accident report to be filed later.

