

## 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 ability.
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 Report	22/09/2018 17:33
Date Of Accident	20/09/2018 11:00
Exact Location Of Accident	SOO CHOW DRIVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKN4860D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KENNETH SIAH YIEN KIAT
NRIC No	S7630999Z
Email Address	KENNETHSIAH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82821171
Alternative Phone No	OFFICE-82821171

### Vehicle Particulars

Manufacturer	NISSAN
Model	SILVIA-S15
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	GA233885/1
Cover Note Number	

### Driver

Name of Driver	KENNETH SIAH YIEN KIAT
NRIC No	S7630999Z
Date Of Birth	11/09/1976
Occupation	INDOOR
Date Of Driving Pass	17/05/1994
Driving Experience	24 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82821171
Fax Number	
Contact Number	OFFICE-82821171
Email Address	KENNETHSIAH@GMAIL.COM

Address	NO. 9 SHEPHERDS DRIVE SINGAPORE 149002
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE SKETCH PLAN AND STATEMENT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### Details of Witness 1

Name	
Phone Number	
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKS4410T
Vehicle Make/Model/Colour	TOYOTA ALTIS
Details Of Properties	LEFT FRONT PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

# Sketch Plan

Email : kennethsiah@gmail.com

☒ Owner  
☐ Driver

## ACCIDENT STATEMENT

Date of Accident 20/04/18  
Time 11:00 HRS

Location of Accident Soo Chon Drive

INSURED/ POLICY HOLDER (VEHICLE A)  
Vehicle Registration Number  
Name of Policyholder  
NRIC/ FIN/ Passport/ ROC (if Policyholder is company)  
Address  
Contact Number  
Occupation

SKN4860D  
Kenneth Siah Yim Kiat  
S 7630974 Z  
9, Shepherds Drive S149002  
Tel 8282 1171 Hp  
Indoor

VEHICLE PARTICULARS (VEHICLE A)  
Vehicle Make / Model  
Type of Vehicle  
Exact Purpose for which vehicle was being used at the time of accident  
Are you claiming under your own insurance policy?

Silver S15  
Saloon MPV CRV Van Lorry Bus M/cycle Others  
Private Use  
☒ Yes ☐ No  
☒ Private ☐ Commercial ☐ Motorcycle  
Remarks TP claims

INSURANCE COMPANY (VEHICLE A)  
Name of Insurance Company  
Type of Policy  
Fleet Policy  
Policy Number

AXA Insurance  
☒ Comprehensive ☐ TP Fire & Theft ☐ Third party  
☒ Yes ☐ No  
GAZ335551

## DRIVER

Name of Driver  
NRIC/ FIN/ Passport  
Date of Birth  
Occupation  
Driving Pass Date  
Gender  
Contact Number  
Address  
Email Address  
Was driver an employee of the Insured's Company?  
If No, relationship of Driver with the Insured  
Vehicle Number of Driver's Own Vehicle (if applicable)  
Insurance of Driver's Own Vehicle (if applicable)  
GENERAL INFORMATION OF THE ACCIDENT  
Type of Collision (E.g. Chain Collision/ Head-On, etc)  
Weather Conditions  
Road Surface  
Damage Area

As Above  
☒ Male ☐ Female  
Tel ☐ Hp  
☐ Yes ☒ No  
HM & Run  
☒ Clear ☐ Raining ☐ Others  
☐ Wet ☒ Dry ☐ Others

## OTHER INFORMATION

Was there any foreign vehicle(s) involved?  
Was anybody injured in the accident? (Including Witness)  
Was any other vehicle(s) or property damaged?  
Was there any camera video footage (in car)?  
DETAILS OF POLICE ACTION  
Was the accident reported to the Police?  
If Yes, please state which police station & Report No  
Was notice of intended Prosecution given?  
If Yes, against whom?

☒ No ☐ Yes  
☒ No ☐ Yes  
☒ No ☐ Yes  
☐ No ☒ Yes  
☒ No ☐ Yes  
☐ No ☐ Yes

## Sketch Plan #2

OWN VEHICLE REGISTRATION NUMBER

SKN 4860D

### DETAILS OF OTHER VEHICLES OR PROPERTY DAMAGED

Other Vehicle or Property 1 (VEHICLE B)

Vehicle Registration Number

SKS 4410T

Vehicle Make/ Model/ Colour

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

NRIC/ FIN/ Passport

Contact Number / Email Address

Address

Name of Insurance Company

Other Vehicle or Property 2

Vehicle Registration Number

Vehicle Make/ Model/ Colour

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

NRIC/ FIN/ Passport

Contact Number / Email Address

Address

Name of Insurance Company

### DETAILS OF WITNESS

Name

Phone / Email Address

Address

NRIC/ FIN/ Passport

### DETAILS OF INJURED PERSON 1

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐ Yes

☐ No

Was Injured conveyed to hospital by ambulance?

☐ Yes

☐ No

### DETAILS OF INJURED PERSON 2

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐ Yes

☐ No

Was Injured conveyed to Hospital by Ambulance?

☐ Yes

☐ No

### Declaration

I/We declare that the above particulars & information provided above are true in every aspect.

Signature of Policy Holder  
(Company Chop if applicable)

Date & Time

22/09/2018 @ 10:00 HRS

Signature of Driver / Date & Time  
(If Driver is not the Policy Holder)

Date & Time

### Sketch Plan #3

#### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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6. The 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 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:

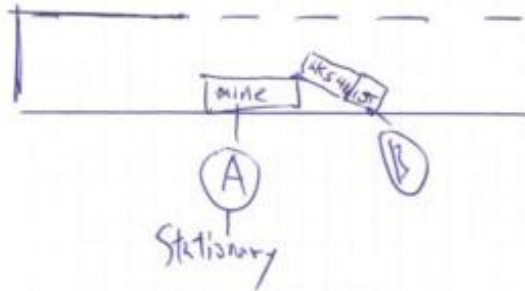
Reporting Centre Personnel's Signature  
Name: Ngai Kwai  
NRIC/FIN No.: 42743331 L

22 / 09 / 2018 @ 10:00 HRS

### Sketch Plan #4

### SKETCH PLAN

Soo chow Drive



Vehicle A - SKN 4860D  
Vehicle B - SKS 4410T

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I parked my car at Sao Chow Drive behind Thomson Plaza at 10am.

When I returned in the afternoon a note was found on my passenger window it said "a corolla altis hit my car while reversing" I checked my rear bumper driver side and ~~there~~ it was scratched.

Reviewing my car camera I saw ~~SKS~~ SKS 4410T reverse into the space behind me and in the process hitting my car.

## DECLARATION

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

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: Ngai Ka Kit  
NRIC/FIN No.: G27433811

22/09/2018 @ 10:00 HRS



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7630999Z

Name

KENNETH SIAH YIEN KIAT



Race

CHINESE

Sex

M

Date of birth

11-09-1976

Country of birth

SINGAPORE



4 4 4 4 1 5 1



NRIC No. S7630999Z



Date of issue

23-07-2009

Address

9 SHEPHERDS DRIVE  
SINGAPORE 149002

## Accident Sketch Plan



### YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
Class 2B	Motorcycles $\leq 200$ cc	25 Jun 1996
Class 2A	Motorcycles between 201 cc and 400 cc	28 Jul 1997
Class 2	Motorcycles $> 400$ cc	26 Aug 1998
Class 3	Motor cars with unladen weight $\leq 3000$ kg with $\leq 7$ passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500$ kg	17 May 1994

NP 428A



## Accident Sketch Plan



# Certificate of Insurance

account number  
**02960**

Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third Party Risks and Compensation) Rules, 1980 - Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia)

### Policy details

<b>Policyholder name</b>	<b>KENNETH SIAH YIEN KIAT</b>	<b>Certificate number</b>	<b>GA233885 / 1</b>
<b>Cover</b>	<b>Comprehensive</b>	<b>Chassis number</b>	<b>JN1GBAS15A0031575</b>
<b>Plan name</b>	<b>Peace</b>	<b>Engine number</b>	<b>SR20DET464162</b>
<b>NCD applicable</b>	<b>50%</b>		
<b>Vehicle registration number</b>	<b>SKN4860D</b>		
<b>Period of insurance</b>	<b>from 18/07/2018 to 17/07/2019 (both dates inclusive)</b>		
<b>Finance loan company</b>	<b>Nil</b>		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
(b) Any Named Driver as stated in the Policy:  
    **1. VALERIE YEW MEY LI**  
(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 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.

### Limitation 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, speed testing, 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.

\* 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**

An Additional Excess is applicable as follows:

- \$4500 for unnamed Authorised Driver
- \$4500 for declared Young and Inexperienced Driver
- \$45,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$42,500 if You have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

I/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**

Authorised signature

**LQ INSURANCE AGENCY PTE LTD**  
180B BENCOOLEN STREET  
#04-01 THE BENCOOLEN  
SINGAPORE 189648  
TEL: 6-334-0783 FAX: 6-334-0624  
Co. Reg. No: 198005500W

### Important note

Policyholders are warned that on the sale 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 destroyed 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 (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903512M)  
8 Shenton Way, #24-01, AXA Tower,  
Singapore 068811  
Customer Centre, #B1-01



1 of 3

# Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20180920/7022

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

1 of 3

Report No. T/20180920/7022

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/09/2018 20:35		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: KENNETH SIAH YIEN KIAT			Address: 9 SHEPHERDS DRIVE SINGAPORE 149002		
ID Type / ID No.: NRIC NO / S7630999Z			Contact No.: Home/Office: Mobile: 82821171		
Nationality: SINGAPORE CITIZEN			Email: kennethsiah@gmail.com		
Sex: Male	Age: 42	Date of Birth: 11/09/1976	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Dentist (general)			Driving Licence Information: Class:		Date of Expiry:

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/09/2018 11:00	Type of Location: Straight Road
Location:  SOO CHOW DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKN4860D	Car	NISSAN	s15	Gold	Slightly Damaged	0
SKS4410T	Car	TOYOTA	altis			0

## Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20180920/7022

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

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Report No. T/20180920/7022

### CONTINUATION OF REPORT

Vehicle Owner			
Name	KENNETH SIAH YIEN KIAT	ID No.	S7630999Z
Related Vehicle	NIL	Contact No.	82821171
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

#### Brief Details.

i parked my vehicle skn4860d at soo chow drive as indicated in the map.(this is the dead end road behind thomson plaza) dual carriage way. when i returned, i noticed a note at my passenger window.it said"someone in a toyota altis hit my car while reversing into a space behind me. i cheked my video camera and true enough there was video evidence of sks4410t hitting my car and the driver glancing at my bumper and walking away.this was noticed by an elderly lady who wrote the note informing me of the accident.i have videos available and also a picture of the note the lady wrote.they exceed 2mb

## Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20180920/7022

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

3 of 3

Report No. T/20180920/7022

### CONTINUATION OF REPORT

#### Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPB /  
TAN JEOK LENG  
Contact No.: 65476144

Authentication Stamp  
NP168

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

Date/Time:  
20/09/2018 20:35

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

