

## 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 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	29/08/2011 16:17
Date Of Accident	15/05/2011 10:40
Exact Location Of Accident	FORT CANNING ROAD

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA9716Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KOH PENG HUI
NRIC No	S8023665D

### Vehicle Particulars

Manufacturer	TOYOTA
Model	MARK X-2.5 (A)
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?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Private Car

### Insurance Company

Name of Insurance Company	AXA Insurance Singapore Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	VPAP1053145
Cover Note Number	

### Driver

Name of Driver	YEO GIM HWEE
NRIC No	S7622123E
Date Of Birth	30/07/1976
Occupation	Indoor
Date Of Driving Pass	21/08/1998
Driving Experience	12 Years And 8 Months
Gender	Male
Mobile Number	(Local) +65-96888248
Fax Number	
Contact Number	
Email Address	
Address	BLK 105 TOWNER ROAD #07-394
Postcode	321105
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Friend

Vehicle Registration Number of Driver's Own  
Vehicle (if applicable)

Insurance Company of Driver's Own Vehicle (if  
applicable)

#### General Information of the Accident

Type Of Accident	Unknown - REFER TO SKETCH AND POLICE REPORT
Weather Conditions	Clear
Road Surface	Dry

#### Other Information

Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes

#### Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

#### Circumstances of Accident

REFER TO SKETCH

Are accident photos available for attachment?	Yes
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#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB7537S
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

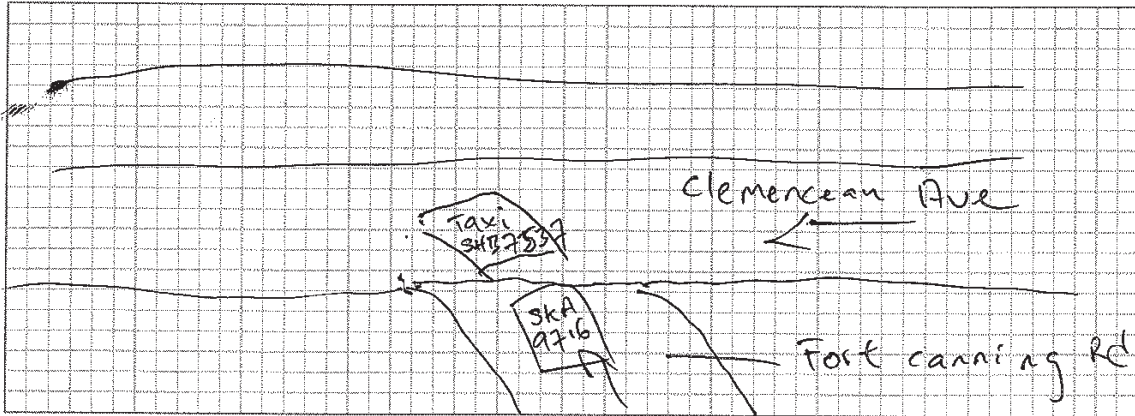
#### Details of Witness

Name	
Phone Number	
Email Address	

SKA 9716Z  
15/5/11

**SKETCH PLAN****IMPORTANT NOTICE**

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**Sketch Plan****Describe Circumstances of the Accident**

refer to Police report No. T/20110613/9073

**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

\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

## Sketch Plan #2 Pg.1

Police Station Of Origin:  
Kallang NPP  
105 Towner Road #01-400 SINGAPORE 321105  
Tel No: 1800-2996999



T/20110613/9073

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Report No. T/20110613/9073

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/06/2011 22:34			Vide Report No.:		Station Diary No.: 20
<b>Informant's Particulars</b>					
Name of Informant: YEO GIM HWEE			Address: APT BLK 105 TOWNER ROAD #07-394 SINGAPORE 321105		
ID Type / ID No.: NRIC NO / S7622123E			Contact No.: Home/Office: Mobile/Pager: 96888248		
Sex: Male	Age: 35	Date of Birth: 30/07/1976	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SALES PROMOTER			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/05/2011 10:40	Type of Location:
Location: Along Road 1 FORT CANNING ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>									
Vehicle No.	Type	Make	Color	Condition	No of Passenger	Insurance Company	Insurance No	Effective Date	Expiry Date
SKA9716 Z	Car	TOYOTA	BLACK	No Damage	0	AXA INSURANCE SINGAPORE PTE LTD	VPA/P10 53145	30/04/2011	29/04/2012

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Station Of Origin:

Kallang NPP

105 Towner Road #01-400 SINGAPORE 321105

Tel No: 1800-2996999



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Report No. T/20110613/9073

## CONTINUATION OF REPORT

Driver			
Name	YEO GIM HWEE	ID No.	S7622123E
Related Vehicle	NIL	Contact No.	96888248
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL

**Brief Details. This report shall be signed by the informant.**

I was at Fort Canning exiting to Clemenceau Ave. At that particular time there was a taxi ,SHB7537S, right in front of me. I then stopped my vehicle and waited for the taxi to move off. As the taxi moved forward then proceed on and I also checked my right side for oncoming vehicles. However when I looked forward and realised that the said taxi was in front of me. I did not managed to stop in time and collision occurred. I would like to state that I was still behind the give way line and the said taxi had already crossed the give way line during the collision. After the incident, we did negotiate and my car did have slight scratches however I realise that the taxi was not damaged. The said driver also ask for compensation and offered him \$50/- however infd by him that it was too little. The driver then requested a compensation of \$150/- to \$200/-, however I did not agree as it was unreasonable. As such we decided to proceed with our own insurance claim.

Police Station Of Origin:

Kallang NPP

105 Towner Road #01-400 SINGAPORE 321105

Tel No: 1800-2996999



T/20110613/9073

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Report No. T/20110613/9073

CONTINUATION OF REPORT

Sketch Plan

No Sketch Plan Drawn

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

A /

MOHAMMAD SYAFIE BIN KAMARUDIN

Signature Of Informant:

Signature Of Interpreter:

/

Date:

13/06/2011 22:34

Officer In Charge Of Case:

TP /

Contact No.:

Classification Of Case:

Authentication Stamp

SN



Signature:

Singapore Police Force



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

