

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 Report	30/09/2020 13:50
Date Of Accident	26/09/2020 23:30
Exact Location Of Accident	CROSS JUNCTION OF BRAS BASAH ROAD & QUEEN STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP6525H
Insured/Policyholder	
Name Of Registered Owner	FOODGNOSTIC PTE LTD
Co Reg No	201308360E
Email Address	SALES@FOODGNOSTIC.COM
Mobile Phone No	(LOCAL) +65-97541049
Alternative Phone No	OFFICE-62870709

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER-3.0 D FEB21ER4SDEB (CBU) (M)
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA543810/1
Cover Note Number	

Driver

Name of Driver	LIXON CHAO MIN FAN
NRIC No	S9646921G
Date Of Birth	15/12/1996
Occupation	OUTDOOR
Date Of Driving Pass	19/08/2015
Driving Experience	5 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98895351
Fax Number	
Contact Number	
Email Address	LIXONCHAU@GNMAIL.COM

Address	BLK. 749 PASIR RIS ST. 71 #11-66
Postcode	510749
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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)	2
Passenger 1	NAME: : GUOK JIA YING GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALJUNIED NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 13 JOO SENG ROAD , POSTCODE: 360013 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2809999 - FAX NO: 62815960
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20200928/2084

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	KEEP BY TRAFFIC POLICE OFFICER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMH5260L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GOH WANG KIM
NRIC/Passport Number	S1737229G

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

DETAILS OF INJURED PERSON 1

Name GUOK JIA YING

Approximate Age

Injuries Sustain

Injured person in which vehicle? YP6525H

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan

SKETCH PLAN

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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: 29/09/20

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



進友威汽車服務私人有限公司
CYS Automobile Services Pte Ltd
38 Woodlands Industrial Park East
Reporting Centre, Personnel's Signature
Name: Singapore 62700
Tel: 6279 2200 (3 Lines) Fax: 6279 2696

Hand-drawn sketch map of the intersection of Queen St and Bras Basah Rd. The map shows a street grid with Queen St running horizontally and Bras Basah Rd running vertically. A building is located at the intersection, with a small structure labeled 'A' to its right. A road sign is shown on the left side of Queen St. The map is drawn on a grid background.

Refer Police Report no : T/20200928/2084

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



A



**SINGAPORE
POLICE FORCE**



T/20200928/2084

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

1 of 4

Report No. T/20200928/2084

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/09/2020 17:12		Vide Report No.: T/20200927/2005		Station Diary No.: 16	
Informant's Particulars					
Name of Informant: LIXON CHAU MIN FAN			Address: APT BLK 655 YISHUN AVENUE 4 #04-389 SINGAPORE 760655		
ID Type / ID No.: NRIC NO / S9646921G			Contact No.: Home/Office: Mobile: 98895351		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 23	Date of Birth: 15/12/1996	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: DRIVER			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: 26/09/2020 23:30	Type of Location: X-Junction
Location: BRAS BASAH ROAD				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMH5260L	Car	TOYOTA	NOAH HYBRID 7- SEATER 1.8X CVT	White		0
YP6525H	Lorry	MITSUBISHI	CANTER FEB21CR3S DEB	White	Seriously Damaged	1



**SINGAPORE
POLICE FORCE**



T/20200928/2084

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Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

Report No. T/20200928/2084

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GOH WANG KIM	ID No.	S1737229G
Related Vehicle	SMH5260L (Car)	Contact No.	NIL
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
Passenger			
Name	GUOK JIA YING	ID No.	G2800027N
Related Vehicle	YP6525H (Lorry)	Contact No.	NIL
Hospital/Clinic	WHITECOAT MEDICAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	02	Degree of Injury	Slight
Driver			
Name	LIXON CHAU MIN FAN	ID No.	S9646921G
Related Vehicle	NIL	Contact No.	98895351
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	NIL	Degree of Injury	NIL

Brief Details.

On 26/09/2020 at about 2330hrs, I was driving my company's lorry bearing vehicle registration plate number (YP6525H) along lane 3 of Queen Street. I stopped at the X-Junction of Queen Street and Bras Basah Road for the traffic light. As the traffic light turned green, I proceeded straight and that was when there was a car bearing vehicle registration plate number (SMH5260L) had hit onto the left side of my vehicle. My vehicle then swerved towards the right side and hit onto a traffic lamp post and a "Bras Basah Bugis" directory. There was traffic police attended to us vide to T/20200927/2005. I followed the traffic police to their HQ at Ubi for Sec 67(1)(b) Cap. 276 under Traffic Police Investigation Officer Tang Siew Ping. I am lodging this report for insurance and for traffic police's follow up investigation.



**SINGAPORE
POLICE FORCE**



T/20200928/2084

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

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Report No. T/20200928/2084

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20200928/2084

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

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Report No. T/20200928/2084

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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: E / Sgt 2 TEO JUN AN
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / Sgt 3 MUHAMMAD FARHAN BIN SAIRI Contact No.: 65476224

Signature Of Informant:
Date/Time: 28/09/2020 17:12
Classification Of Case:

Authentication Stamp
NP168

INS CERT



redefining / insurance

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

date
 11/06/2020

policy number
 CV1 / GA543810

Certificate of Insurance

-Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Commercial Vehicles (Third-Party Risks and Compensation) Rules, 1960 -Road Transport Act, 1987 (Malaysia) -Commercial Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	FOODGNOSTIC PTE LTD	Certificate number	GA543810 / 1
Cover	Comprehensive	NCD	10%
Engine number	4P10C14668	Chassis number	FEB21CA20053
Vehicle Registration number	YP6525H		
Period of Insurance	from 13/07/2020 to 12/07/2021 (both dates inclusive)		
Sum Insured	Market Value at The Time of Loss		
Finance Loan Company	DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD		

Persons or classes of persons entitled to drive

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.

Limitations as to use*

- (a) Use in connection with the Policyholder's business.
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (c) Use for social, domestic and pleasure purposes.

The Policy does not cover

- (a) Use for the hire or reward or for racing, pace-making, reliability trial or speed testing.
- (b) Use whilst drawing a trailer except the towing of anyone disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Commercial 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

Section I	SGD800.00
Windscreen	SGD160.00

An additional excess is applicable as follows:

Additional Own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who:

- a) is 22 years old to 24 years old and/or
- b) is 66 years old to 70 years old and/or
- c) with driving experience of 1 year to less than 2 years on the relevant classes of driving license

Additional All Claims excess of \$2,000.00 is applicable for any named/unnamed drivers who:

- a) is 18 years old to 21 years old and/or
- b) is 71 years old and above and/or
- c) with driving experience of less than 1 year on the relevant classes of driving license

Additional clauses & endorsements to your policy

Nil

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

1 of 3



29 September 2020

Dear Sir/Mdm,

RE: LETTER OF AUTHORIZATION

VEHICLE NUMBER: YP6525Z

This is to authorize my staff Wong Cheng Fong (IC Number: S8370148Z) to make the AXA report and submit the claim on behalf of the company.

Please feel free to contact me at 97541049 shall your required further clarification.

Thank you.

Your Sincerely,



Crysna
Finance Manager
Foodgnostic Pte Ltd



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9646921G



Name
LIXON CHAU MIN FAN
赵敏帆

Race
CHINESE

Date of birth
15-12-1996

Sex
M

Country of birth
SINGAPORE

S9646921G

STRICTLY
FOR WORKSHOP USAGE
FOR ACCIDENT
REPORTING ONLY

4234

4679722



HRIC no. S9646921G



Date of issue
01-02-2011

Address
APT BLK 749 PASIR RIS STREET
#11-66
SINGAPORE 510749

STRICTLY
FOR WORKSHOP USAGE
FOR ACCIDENT
REPORTING ONLY

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9646921G**
Name: **LIXON CHAU MIN FAN**



STRICTLY
FOR WORKSHOP USAGE
FOR ACCIDENT
REPORTING ONLY

Birth Date: **15 Dec 1996**
Issue Date: **19 Aug 2015**

 002463336H



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

EFFECTIVE DATE

Class 3 Motor Cars $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of the driver; and other motor vehicles $\leq 2500\text{kg}$ 19 Aug 2015

STRICTLY
FOR WORKSHOP USAGE
FOR ACCIDENT
REPORTING ONLY

 Licence No: S9646921G

NP 428A



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 30.9.20

To: Owner of Vehicle Number: 7P 6522H

The following has been advised to you via your workshop, CYS AUTOMOBILE SERVICES PTE LTD through their staff, Lee Wei Sun.

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.
- (☐) 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 _____

Signed and acknowledged by: X

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

CYS Automobile Services Pte Ltd
38 Woodlands Industrial Park East 1
#07-17 Admiralty Industrial Park
Singapore 757700
Tel: 6219 2098 (3lines) Fax: 6219 2096

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

