

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 01/02/2021 13:40 (SGT)
Date of Accident 01/02/2021 07:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information SLE TOWARDS CTE(BEFORE WOOALNDS AVE 12)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMM6859C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ZHANG RONGKUN
NRIC No SXXXX525A
Email Address dannyzrk@gmail.com
Mobile Phone No (Phone) +65-93385887
Alternative Phone No +65-93385887

VEHICLE PARTICULARS

Manufacturer Honda
Model Vezel
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? No - Claiming third party
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage Comprehensive
Fleet Policy No
Policy Number -
Cover Note Number -

DRIVER

Name of Driver ZHANG RONGKUN
NRIC No SXXXX525A
Date Of Birth 14/08/1974
Occupation Indoor

Date Of Driving Pass	23/04/2009
Driving experience	11 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93385887
Alt. Phone Number	+65-93385887
Email Address	dannyzrk@gmail.com
Address	90B TELOK BLANGAH STREET 31 #24-231 SPORE 102090
Address complement	-
Postcode	-
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

FOREIGN VEHICLE 1

Vehicle Registration Number	AKX2900
Vehicle Category	Goods vehicle

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN/POLICE REPORT

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX5924U
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMX6366A
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	AKX2900
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

IMPORTANT NOTICE

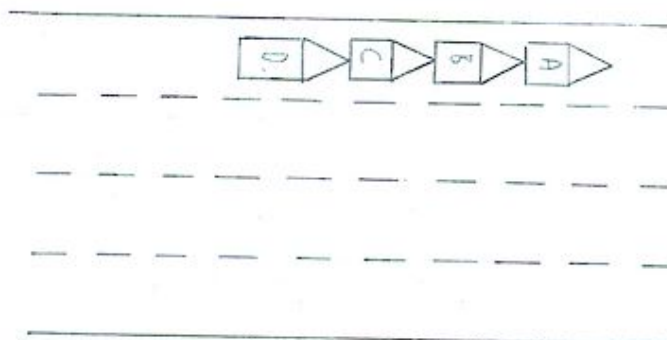
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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. 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 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.
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A) SMM 6859C
B) SKX 5924U
C) BMX 6366A
D) ARX 2900

Describe Circumstances of the Accident

Refer to the attached Police Report: T/20210201/2025.

Declaration

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





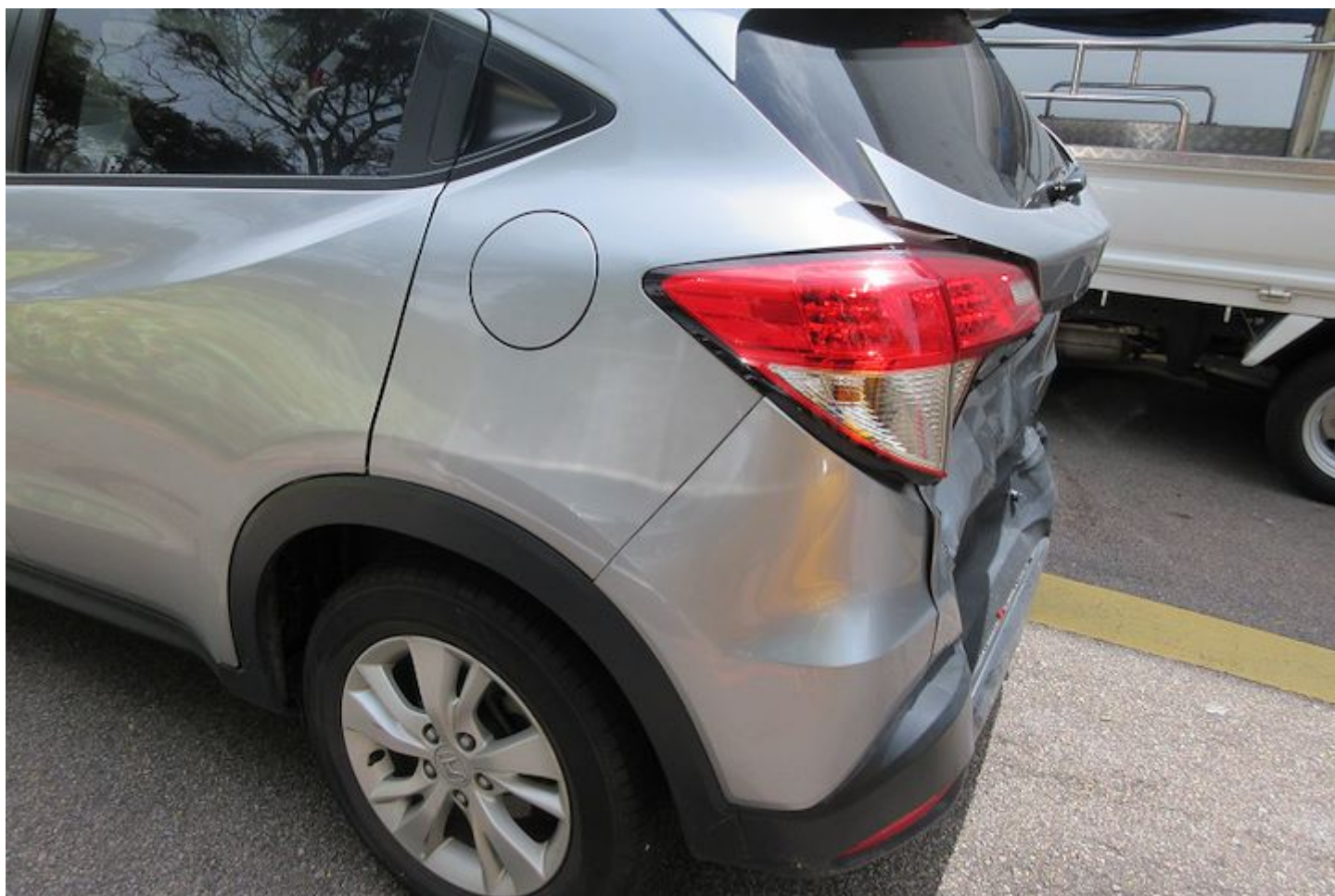








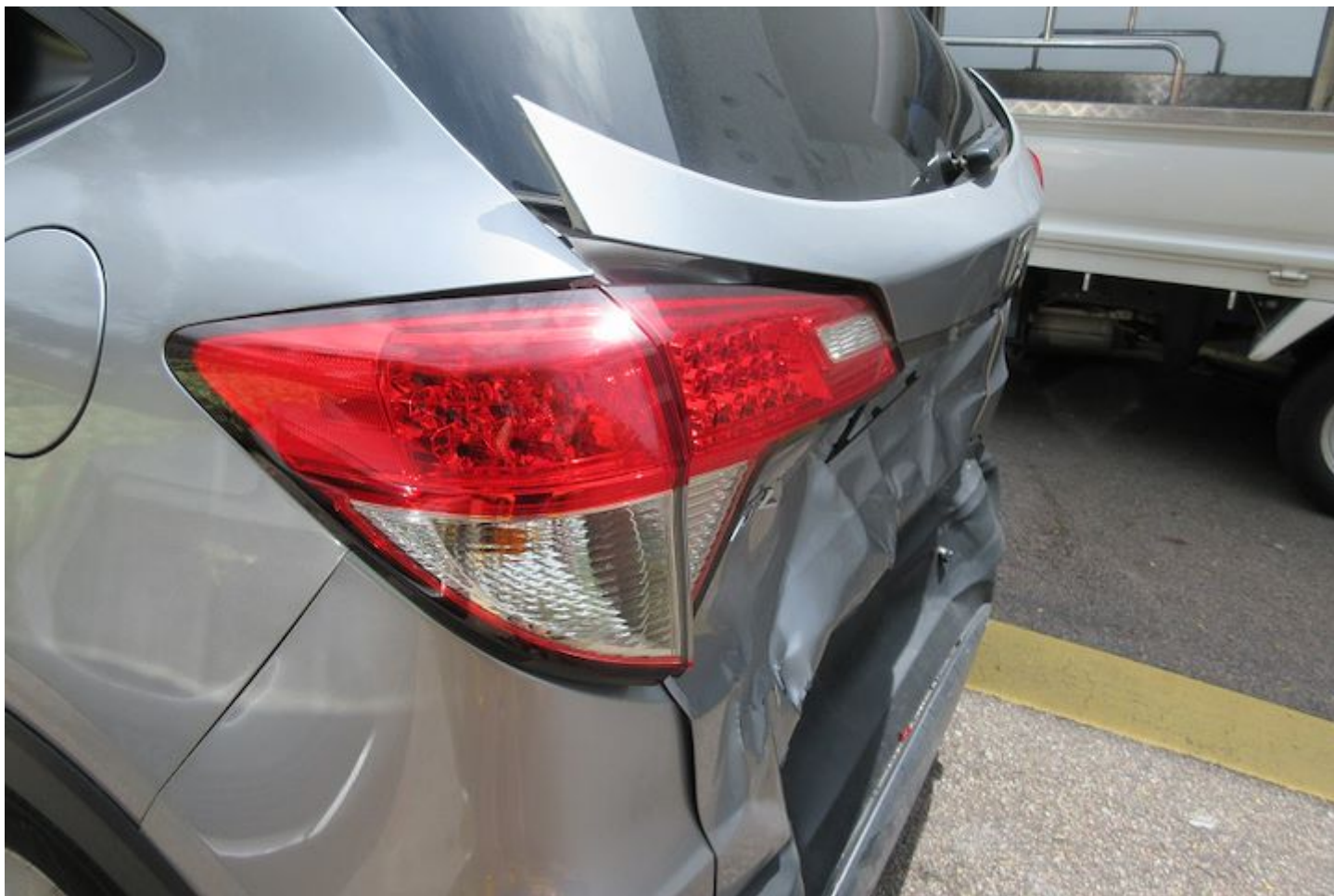




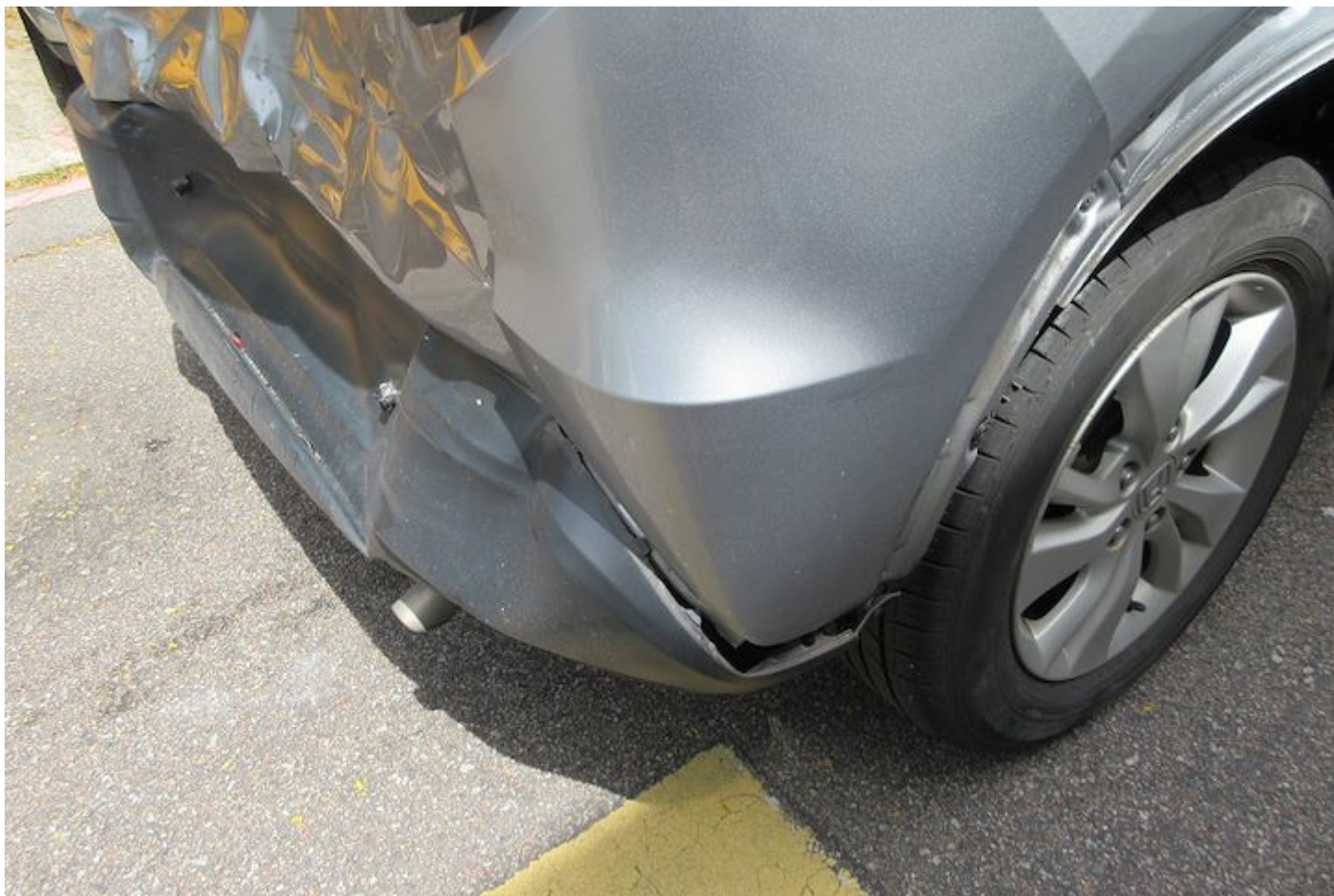
























SINGAPORE
POLICE FORCE



T/20210201/2025

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

1 of 4

Report No. T/20210201/2025

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/02/2021 10:44	Vide Report No.: L/20210201/0066	Station Diary No.: 24
--	-------------------------------------	--------------------------

Informant's Particulars

Name of Informant: ZHANG RONGKUN	Address: APT BLK 90B TELOK BLANGAH STREET 31 #24-231 SINGAPORE 102090
ID Type / ID No.: NRIC NO / S7481525A	Contact No.: Home/Office: Mobile: 93885887
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male Age: 46 Date of Birth: 14/08/1974	Type of Informant: Driver
Race: Chinese	Language: Institution / School Name:
Occupation: Company director	Driving Licence Information: Class: 3 Date of Expiry:

General information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 01/02/2021 07:50	Type of Location: EXIT 9 ALONG SLE TURNING LEFT TOWARDS WOODLANDS AVE 12
Location: SELETAR EXPRESSWAY				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
AKX2900	Lorry					2
SKX5924U	Car					0
SMM6859C	Car	HONDA	VEZEL 1.5X CVT	Silver	Seriously Damaged	0



SINGAPORE
POLICE FORCE



T/20210201/2025

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

2 of 4

Report No. T/20210201/2025

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMX6366A	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMM6859C	AXA INSURANCE SINGAPORE PTE LTD	GA482889	08/09/2020	09/07/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	AW CHIN PAH		ID No.	S7529125F
Related Vehicle	SKX5924U (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
Driver				
Name	ZHANG RONGKUN		ID No.	S7481525A
Related Vehicle	SMM6859C (Car)		Contact No.	93885887
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 the 1/2/2021 at around 0750hrs, I was driving along the SLE in my vehicle SMM6859C and queued up to take the left Exit 9 towards Woodlands Avenue 12. At the time there was a queue to take that exit so I lined up my vehicle behind the line of vehicles. After I came to a stop, I felt a collision from behind me. I exited the vehicle and saw that the lorry AKX2900 had collided into two other vehicles, SMX6366A and SKX5924U, and those vehicles collided into my vehicle. One of the drivers said that he had called for police and asked us to wait for their arrival.

After 10 minutes, an ambulance arrived and made a check on the other drivers injuries. The paramedics informed that the driver of SMX6366A will be conveyed to a hospital for a check up. The driver of

SINGAPORE
POLICE FORCE

T/20210201/2025

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

3 of 4

Report No. T/20210201/2025

CONTINUATION OF REPORT

SKX5924U had informed the paramedics that he felt pain in his chest but does not need to be sent for a hospital check. I informed the paramedics during their check that I was fine and did not need any medical attention. The lorry driver was not conveyed by ambulance, I am unsure if he had sustained any injuries. At around 0810hrs, police had arrived. They took down all our particulars and an officer had taken my micro SD card. Following that, the officers had advised me to lodge a police report regarding this accident.

I did not sustain any injuries. My vehicle sustained a dent in the rear.



SINGAPORE
POLICE FORCE



T/20210201/2025

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

4 of 4

Report No. T/20210201/2025

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: F / Sgt 2 TAN YAN ZHI DANIEL	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 01/02/2021 10:44
Officer In Charge Of Case: TP / GIT / Sgt 2 PHUA TIAK YEE Contact No.: 65472077	Classification Of Case:
Authentication Stamp NP168	EN164



SINGAPORE
POLICE FORCE



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: #L/20210201/0066

I, SS TC3406 ISKANDAR

(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP HQ

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 One micro SD card. (SANDISK 32GB, black)

2

3

4

5

6

7

8

9

10

from Zhang Fengkun i/c: S74E1525A

(Name, NRIC or Passport No. / Rank and No.)

of 90B, Telok Blangah St 31, #24-231

(Address / Police Station / NPC / NPP)

on 01.02.2021

(Date)

at

0910hrs

(Time)

Witnessed by / * Handed over by:

(* Delete if applicable)

Received by:

(Signature)

S74E1525A Zhang Fengkun

(Name, NRIC or Passport No. / Rank and No.)

(Signature)

SS TC3406 ISKANDAR

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: i/c: Stanfieldin
65476367

i/c & D/L returned



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

account number
 03809

Certificate of Insurance

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

Policy details

Policyholder name	ZHANG RONGKUN	Certificate number	GA482889 / 1
Cover	Comprehensive	Chassis number	RU11312736
Plan name	Flex	Engine number	L15B5562750
NCD applicable	20%		
Vehicle registration number	SMM6859C		
Period of Insurance	from 10/07/2020 to 09/07/2021 (both dates inclusive)		
Finance loan company	Maybank Singapore Limited		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) 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	Basic Own Damage Excess	SGD 500.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

- \$500 for unnamed *Authorised Driver*
- \$500 for declared *Young and Inexperienced Driver*
- \$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to \$2,500 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 signatory

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