

## 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 ..... 22/11/2021 13:51 (SGT)  
Date of Accident ..... 20/11/2021 12:30 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... ENTRANCE OF COMMONWEALTH TOWERS  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SFF2969P

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LIM KOON HOCK  
NRIC No ..... S2538901H  
Email Address ..... branchong@yahoo.com.sg  
Mobile Phone No ..... (Phone) +65-84848475  
Alternative Phone No ..... +65-84848475

#### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Wish  
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  
Transmission ..... Auto  
CC ..... 1800

#### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... GA313729  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... MUSTAFFA ARSHAD BIN RAZEMAN @ BRANDON CHONG  
NRIC No ..... S7212378F

|  |                              |
|--|------------------------------|
| Date Of Birth .....  | 12/04/1972                   |
| Occupation .....   | Indoor                       |
| Date Of Driving Pass .....   | 14/02/1994                   |
| Driving experience .....   | 27 YEARS AND 9 MONTHS        |
| Gender .....   | Male                         |
| Mobile Number .....  | (Phone) +65-96998999         |
| Alt. Phone Number .....  | -                            |
| Email Address .....  | branchong@yahoo.com.sg       |
| Address .....  | BLK 305 TAMPINS ST 32 #03-82 |
| Address complement .....   | -                            |
| Postcode .....   | 520305                       |
| Is the driver the policyholder? .....                              | No                           |
| If No, Relationship of the Driver with the Insured .....           | GODSON                       |
| 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 - Change/cross lane |
| 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? .....  | No  |
| Was any other vehicle 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  |

#### 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

REFER TO POLICE REPORT: T/20211122/7002.

#### ATTACHMENT(S)

|   |     |
|---|-----|
| Are accident photos available for attachment? ..... | Yes |
| Was there any video captured by Car Camera? .....   | No  |
| Was there any audio recorded? .....                 | No  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                                   |             |
|-----------------------------------|-------------|
| Vehicle Registration Number ..... | SFK7973S    |
| 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 ..... | VEHICLE B |
| No. Of Passenger (Including Driver) .....     | -         |

## INJURED PERSONS DETAILS

### INJURED 1


|   |   |
|---|---|
| Name of injured person .....                              | MUSTAFFA ARSHAD BIN RAZEMAN @ BRANDON CHONG |
| Gender .....  | Male  |
| Phone No .....  | -   |
| Address .....   | -   |
| Address Complement .....                                  | -   |
| Post Code .....   | -   |
| Approximate Age Years Old .....                           | -   |
| Injuries Sustained .....                                  | -   |
| Injured person in which vehicle? .....                    | SFF2969P                                    |
| Were seat belts worn? .....                               | Yes   |
| Was this injured conveyed to hospital by ambulance? ..... | No  |

# SKETCH PLAN

## IMPORTANT NOTICE

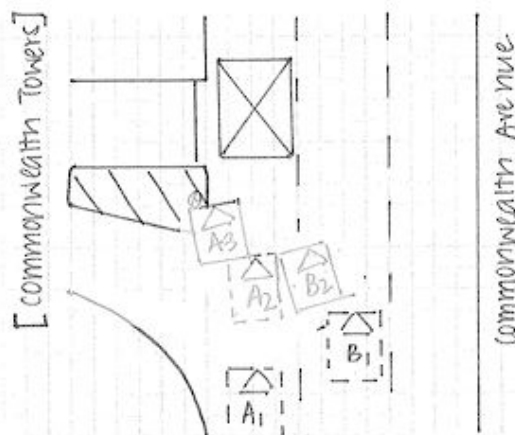
1. Please report correctly the details of the accident to speed up the claims process.
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  7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 3. 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 22/11/21  
 Sketch Plan

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

Witnessed by Reporting Centre  
 Personnel

vehicle A: SFF2969P  
 vehicle B: SPK7973S




Describe Circumstances of the Accident

- Refer to Police Report -

Declaration

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

  
 Policyholder's Signature / Date &  
 Time 9:50 am  
 22/11/21

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

Witnessed by Reporting Centre  
 Personnel

LETTER OF UNDERTAKING

We, Lim Koon Hock, the owner of vehicle no. SFF 2969 P

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within (fourteen) days of occurrence or discovery of damage.

Our Third Party claim is handle by my/our preferred workshop, Zoom Autoworks Pte Ltd

Signed and Acknowledge by:

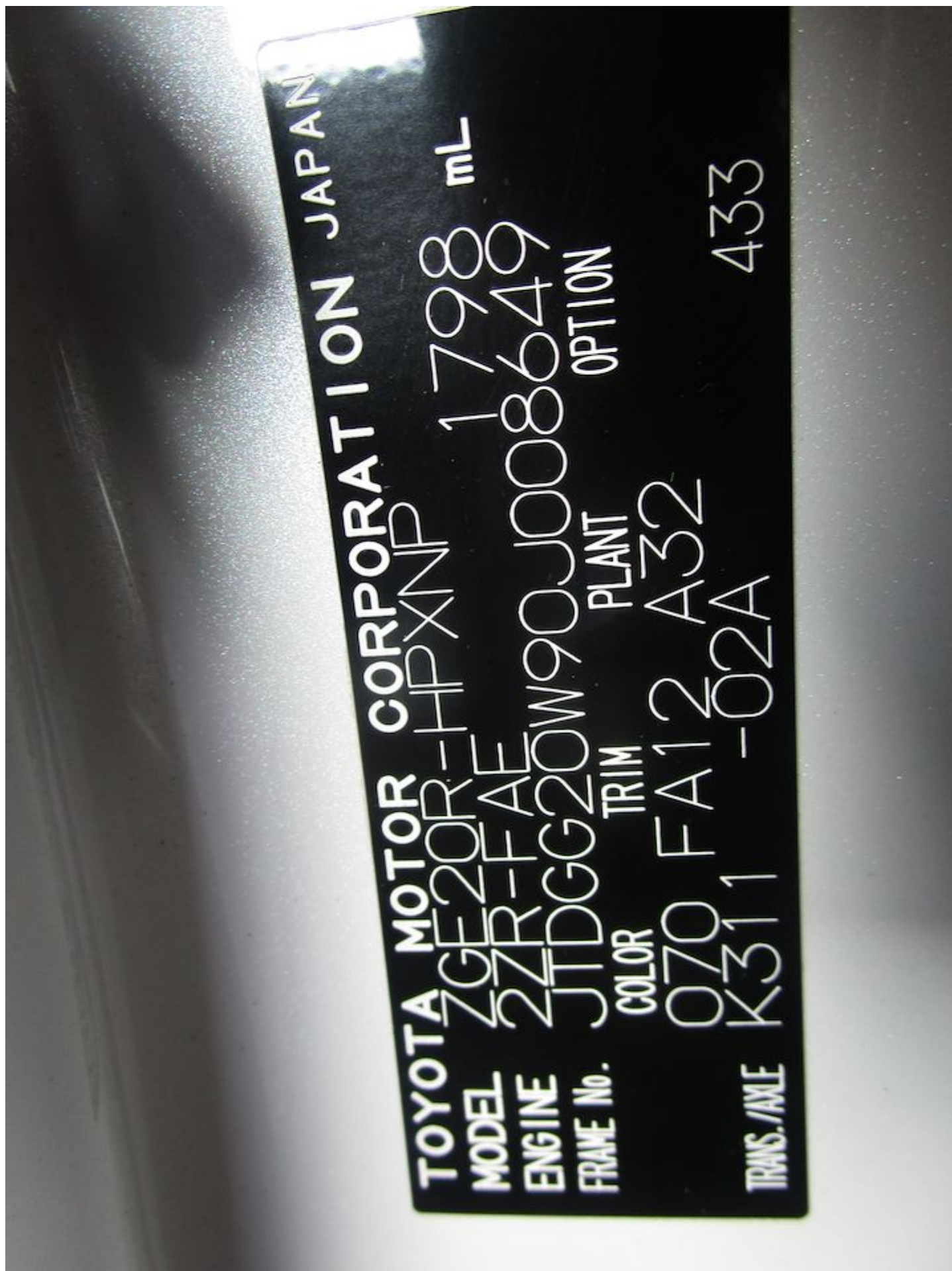


no. and signature of policyholder

Company Stamp

Date



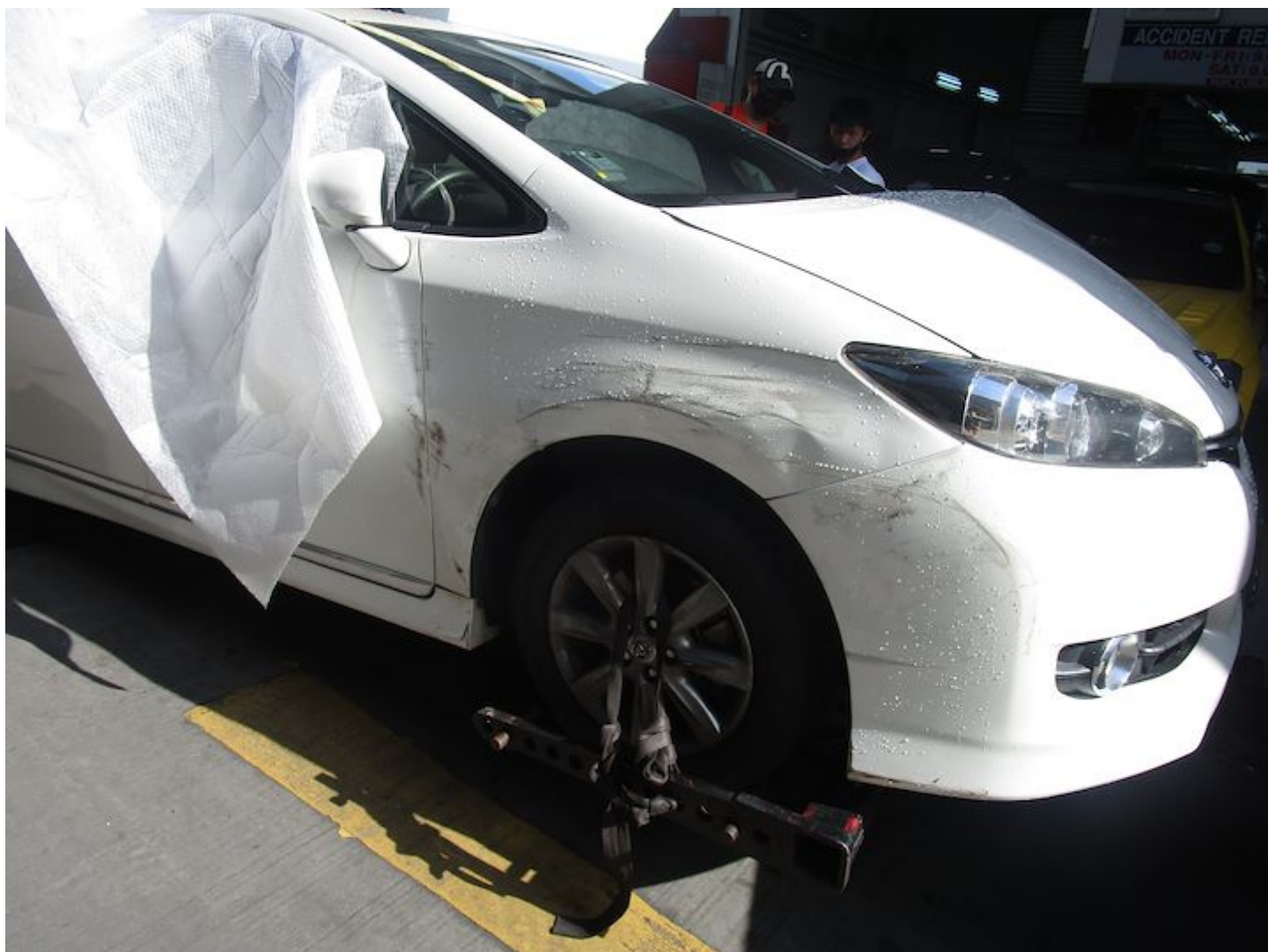


















**SINGAPORE  
POLICE FORCE**



T/20211122/7002

1 of 3

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

Report No. T/20211122/7002

**REPORT OF A TRAFFIC ACCIDENT**

|   |            |                                     |  |                    |                            |
|---|------------|-------------------------------------|--|--------------------|----------------------------|
| Date/Time Report Made:<br>22/11/2021 10:27          |            | Vide Report No.:<br>D/20211120/0068 |  | Station Diary No.: |                            |
| <b>Informant's Particulars</b>                      |            |                                     |  |                    |                            |
| Name of Informant:<br>MUSTAFA ARSHAD BIN<br>RAZEMAN |            |                                     | Address:<br>305 TAMPINES STREET 32 #03-82 SINGAPORE 520305 |                    |                            |
| ID Type / ID No.:<br>NRIC NO / S7212378F            |            |                                     | Contact No.:<br>Home/Office: Mobile: 96998999              |                    |                            |
| Nationality:<br>SINGAPORE CITIZEN                   |            |                                     | Email:<br>BRANCHONG@YAHOO.COM.SG                           |                    |                            |
| Sex:<br>Male  | Age:<br>49 | Date of Birth:<br>12/04/1972        | Type of Informant:<br>Driver                               |                    |                            |
| Race:<br>Punjabi                                    |            |                                     | Language:<br>English                                       |                    | Institution / School Name: |
| Occupation:<br>SELF EMPLOYED                        |            |                                     | Driving Licence Information:<br>Class:                     |                    | Date of Expiry:            |

**General Information of the Accident**

|  |                              |                                    |   |  |
|--|------------------------------|------------------------------------|---|--|
| Type of Accident:  | Injury<br>Attended by Police | Drink<br>Drive:<br>No              | Date/Time of<br>Accident:<br>20/11/2021 12:30 | Type of Location:<br>Straight Road     |
| Location:<br><br>COMMONWEALTH AVENUE                         |                              |                                    |   |  |
| Weather:<br>Clear  |                              | Road Surface:<br>Dry               |   | Road Speed Limit:                      |
| Traffic Flow:<br>One Way                                     |                              | Traffic Control:<br>Not Controlled |   | Traffic Volume:<br>Moderate            |
| Type of Collision:<br>Between Moving Vehicles - Head To Side |                              |                                    |   | Anyone conveyed by<br>ambulance:<br>No |

**Details of Vehicle Involved**

| Vehicle No. | Type | Make   | Model | Color | Conditio             | No of |
|-------------|------|--------|-------|-------|----------------------|-------|
| SFF2969P    | Car  | TOYOTA | WISH  | White | Seriously<br>Damaged | 0     |
| SFK7973S    | Car  | NISSAN |       | White | Slightly<br>Damaged  | 1     |





**SINGAPORE  
POLICE FORCE**



T/20211122/7002

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

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Report No. T/20211122/7002

**CONTINUATION OF REPORT**

| Details of Vehicle Insurance |                                 |              |           |             |
|------------------------------|---------------------------------|--------------|-----------|-------------|
| Vehicle No.                  | Insurance Company               | Insurance No | Effective | Expiry Date |
| SFF2969P                     | AXA INSURANCE SINGAPORE PTE LTD |              |           |             |

| Details of Person Involved        |                             |                                   |                                   |
|-----------------------------------|-----------------------------|-----------------------------------|-----------------------------------|
| Any Pedestrian Involved: No       |                             |                                   |                                   |
| No. of Pedestrians Injured: NIL   |                             | Use of Pedestrian Crossing: NA    |                                   |
| Driver                            |                             |                                   |                                   |
| Name                              | MUSTAFFA ARSHAD BIN RAZEMAN | ID No.                            | S7212378F                         |
| Related Vehicle                   | SFF2969P (Car)              | Contact No.                       | 96998999                          |
| Hospital/Clinic                   | NAM SENG CLINIC PTE. LTD.   | Class of Driving Licence & Expiry | Class: NIL<br>Date of Expiry: NIL |
| Date                              | 20/11/2021                  | Date                              | 20/11/2021                        |
| No. of Days granted Medical Leave | 05                          | Degree of                         | Serious                           |

Brief Details.

ON 20/11/2021 AT ABOUT 12:30HR, I WAS DRIVING MY VEHICLE - SFF2969P, ALONG COMMONWEALTH AVENUE HEADING TOWARDS LENG KEE ROAD. I WAS TRAVELLING ON THE EXTREME LEFT LANE GOING STRAIGHT WHEN VEHICLE NUMBER - SFK7973S, SUDDENLY FILTERED ONTO MY LANE AND HIT ONTO MY VEHICLE'S FRONT RIGHT PORTION. THE IMPACT SENT MY CAR ONTO THE LEFT KERB AND I COLLIDED ONTO THE LAMPPOST NUMBER 26. THE SAID VEHICLE HAD INTENDED TO TURN INTO COMMONWEALTH TOWERS WHEN HIS VEHICLE WAS ADJACENT TO THE KERB AND LAMPPOST.

SUBSEQUENTLY, THE TRAFFIC POLICE ATTENDED THE ACCIDENT SCENE AS THERE WAS GOVERNMENT PROPERTY DAMAGED AND I HAD ALSO SEEK MEDICAL ATTENTION AT NAM SENG CLINIC PTE LTD AND WAS GIVEN 5 DAYS MC.



**SINGAPORE  
POLICE FORCE**



T/20211122/7002

3 of 3

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

Report No. T/20211122/7002

**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 /  
NUR ADELINA BINTE MOHAMMAD FUAT  
Contact No.: 65476066

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

Date/Time:  
22/11/2021 10:27

Classification Of Case:

NP168



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  
 26/11/2020

policy number  
 GA313729

account number  
 19173

## 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           | LIM KOON KOCK  | Certificate number | GA313729 / 1      |
| Cover                       | Comprehensive  | Chassis number     | JTDGG20W90J008649 |
| Plan name                   | Toyota Prestige Max                                  | Engine number      | 2ZROA47501        |
| NCD applicable              | 50%  |                    |                   |
| Vehicle registration number | SFF2969P   |                    |                   |
| Period of Insurance         | from 23/01/2021 to 22/01/2022 (both dates inclusive) |                    |                   |
| Finance loan company        | Nil  |                    |                   |

### Authorized Drivers

- (a) The Policyholder  
 (b) Any Named Driver as stated in the Policy:  
 1. MUSTAFFA ARSHAD BIN RAZEMAN @ BRANDON CHONG  
 (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 of the motor vehicle is connected to the Policyholder's business
- Use for the carriage of passengers (besides commercial hire or reward) in connection with the Policyholder's business
- Use for social, domestic, and personal purposes

The Policy does not cover:

- Use for commercial hire or reward, or for racing, pace-making, reliability trial, or speed testing
- Use while drawing a trailer, except for the towing of a disabled person's mechanically propelled vehicle

\* 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

Young/inexperienced driver excess

An additional excess of \$2500 (to be added to any excess imposed under the Policy) whilst the Insured MotorCar is being driven by any driver aged below 23 years old and /or has been issued a valid driving license to drive in Singapore for the relevant class of vehicle for less than one year

Young and/ or Inexperienced driver shall mean any person who:

- Is less than 23 years old, and/or
- Has been issued with a valid driving license to drive in Singapore for the relevant class of vehicle for less than 1 year

### Additional clauses & endorsements to your policy

Nil

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

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

1 of 3