

# 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 ..... 06/12/2021 17:17 (SGT)  
Date of Accident ..... 03/12/2021 17:30 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... TPE EXIT TOWARDS LOYANG AVE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMQ6255Z

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... KINETIC REGENCY PTE LTD  
Company Reg No ..... 201632177M  
Email Address ..... support@kinetic-alliance.com  
Mobile Phone No ..... (Phone) +65-97849075  
Alternative Phone No ..... +65-97849075

### VEHICLE PARTICULARS

Manufacturer ..... Hyundai  
Model ..... Avante  
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 hire  
Transmission ..... Auto  
CC ..... 1600

### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMHCSNA00005422101  
Cover Note Number ..... 08/06/2021 - 07/06/2022

### DRIVER

Name of Driver ..... MOHAMED ABAS AZAM BIN MOHAMED AZAM  
NRIC No ..... S8604257F

Date Of Birth .....	05/02/1986
Occupation .....	Outdoor
Date Of Driving Pass .....	22/08/2005
Driving experience .....	16 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91099052
Alt. Phone Number .....	-
Email Address .....	abas.86@hotmail.com
Address .....	BLK 541 BEDOK NORTH ST 3 #05-1252
Address complement .....	-
Postcode .....	460541
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 .....	Side Swipe
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 .....	Bedok Division Headquarters
Police Station Phone No .....	(Phone) +65-18002440000
Alt. Police Station Phone No .....	(Fax) +65-64443009
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO STATEMENT

#### 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 .....	GBG8802P
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Dyna
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private hire

Name of Driver .....	LAW CHOY POH
NRIC No .....	S1342277Z
Contact Number .....	(Phone) +65-98385944
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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' 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/are 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 based outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

06/12/21

Sketch Plan

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

06/12/21

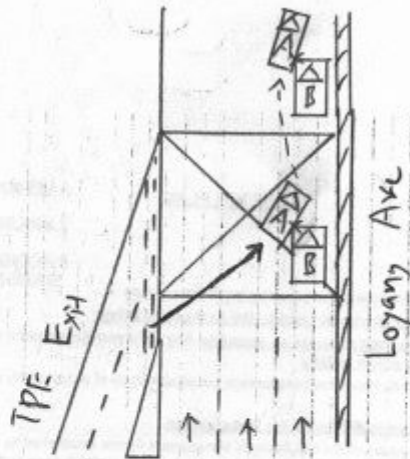
Witnessed by Reporting Centre Personnel

Don Yim (Amk)

06/12/21

PLEASE  
TURN  
OVER

Sketch Plan



TPE Exit Towards Loyang Ave  
 A=SMQ6255Z  
 B=GBG8802P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 03/12/2021 @ 7:30hrs, I was driving along TPE exit towards Loyang Avenue. I exit and filter to the extreme right of Loyang Avenue into the yellow box. Suddenly, on the halfway to filter to extreme right lane Vehicle B: GBG8802P (stationary inside the yellow box) came from the rear of Loyang Avenue (Extreme right lane) and Vehicle B: GBG8802P front left portion hit onto the right rear of my door. After the collision I drove forward and however Vehicle B: GBG8802P purposely hit onto my rear right side again. As Vehicle B: GBG8802P knows that was a collision from the first hit already. This caused Vehicle B: GBG8802P front left portion to collide onto the rear right portion of my vehicle A: SMQ6255Z and caused damage. We alighted and exchanged particulars and no one was injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

We declare the foregoing particulars are true in every respect.



Policyholder's Signature  
 Date & Time: 06/12/21

Driver's Signature  
 (if driver is not the policyholder)  
 Date & Time: 06/12/21

Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 Reporting Only

( ) Claim Own Policy ( ) Claim Third Party  
 ( ) Claim OD/TP at other workshop























**SINGAPORE  
POLICE FORCE**



G/20211205/7038

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**POLICE REPORT (NP299)**

Report No. G/20211205/7038

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 05/12/2021 18:54	Vide Report No.	Station Diary No.
Name Of Informant MOHAMED ABAS AZAM BIN MOHAMED AZAM	Address 541 BEDOK NORTH STREET 3 #05-1252 SINGAPORE 460541	
ID Type / ID No. NRIC NO / S8604257F	Contact No. Home/Office: Mobile: 91099052	
Nationality SINGAPORE CITIZEN	Email Address abas.86@hotmail.com	
Occupation Despatch worker	Sex Male	Age 35
Institution/School Name	Date of Birth 05/02/1986	Race Pakistani
Date/Time Of Incident 03/12/2021 17:30 - 03/12/2021 17:35	Location Of Incident 541 BEDOK NORTH STREET 3 #05-1252 SINGAPORE 460541	

**Brief details.**

ON 03/12/2021@17:30HRS, I WAS DRIVING ALONG TPE EXIT TOWARDS LOYANG AVE. I EXIT AND FILTER TO THE EXTREME RIGHT OF LOYANG AVE INTO THE YELLOW BOX. SUDDENLY, ON THE HALFWAY TO FILTER TO EXTREME RIGHT LANE VEHICLE B: GBG8802P (STATIONARY INSIDE THE YELLOW BOX) CAME FROM THE REAR OF LOYANG AVE (EXTREME RIGHT LANE) AND VEHICLE B: GBG8802P FRONT LEFT PORTION HIT ONTO THE RIGHT REAR OF MY DOOR. AFTER THE COLLISION I DROVE FORWARD AND HOWEVER VEHICLE B: GBG8802P PURPOSELY HIT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 05/12/2021 18:54
Officer In-Charge Of Case:	Classification Of Case:


**SINGAPORE  
POLICE FORCE**


G/20211205/7038

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211205/7038

ONTO MY REAR RIGHT SIDE AGAIN. AS VEHICLE B: GBG8802P KNOWS THAT WAS A COLLISION FROM THE FIRST HIT ALREADY. THIS CAUSED VEHICLE B: GBG8802P FRONT LEFT PORTION TO COLLIDE ONTO THE REAR RIGHT PORTION OF MY VEHICLE A: SMQ6255Z AND CAUSED DAMAGE. WE ALIGHTED AND EXCHANGED PARTICULARS AND NO ONE WAS INJURED. The purpose of this report is that the driver was reckless and hit my car twice, and the second hit was on intention to hit my car as he accelerate to hit my car despite knowing that there was a collision on the first hit. Thank you. This is a accident report

Subjects Involved			
Suspect			
Person Name	LAW CHOY POH		
ID Type	NRIC NO	ID No	S1342277Z
Gender	Male	Race	Chinese
Language	English	Mobile No	98385944
Victim			
Person Name	MOHAMED ABAS AZAM BIN MOHAMED AZAM		
ID Type	NRIC NO	ID No	S8604257F
Gender	Male	Age	35
Race	Pakistani	Language	English
Occupation	Despatch worker	Address	541 BEDOK NORTH STREET 3 #05-1252 SINGAPORE 460541
Mobile No	91099052	Is Informant A	Yes
		Victim?	

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 05/12/2021 18:54
Officer In-Charge Of Case:	Classification Of Case:

**SINGAPORE  
POLICE FORCE**

G/20211205/7038

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211205/7038

Person Name	MOHAMED ABAS AZAM BIN MOHAMED AZAM (Informant)
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Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 05/12/2021 18:54
Officer In-Charge Of Case:	Classification Of Case:







**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

#### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SC0921C60004-01 Vehicle Registration No: SMQ 6255Z  
 Name (as shown in NRIC): Kinetic Regency Pte Ltd Com Reg No: 201632177M  
 NRIC/FIN/Passport No: \_\_\_\_\_  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: 9 Tagore Lane #03-21 9@Tagore S787472 Singapore ( )  
 Contact (Tel): - Mobile No.: 97849075  
 Email Address: support@kinetic-alliance.com  
 Date of Accident: 03/12/2021 Time of Accident: 17:30 hrs  
 Place of Accident: 541 Bedok North Street 3 #05-1252 S460541  
 Insurance Company: China Taiping Insurance Pte Ltd

#### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Amendment Reporting Only change it to Third Party Claim



Policyholder / Driver's Signature

Date: 15/12/2021



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: Donny (AMK)

Date: 15/12/21