

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 23/03/2022 15:14 (SGT)
Date of Accident 22/03/2022 16:45 (SGT)
Exact Location of Accident Singapore
Additional Location Information MOULMEIN ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ810A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner KAN YUK MAN
NRIC No S6869042J
Email Address KYMSURGERY@GMAIL.COM
Mobile Phone No (Phone) +65-90251781
Alternative Phone No (Home) +65-90251781

VEHICLE PARTICULARS

Manufacturer Lexus
Model Es300h
Variant -
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? Yes
Vehicle Category Private car
Transmission Auto
CC 3000

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA526563
Cover Note Number -

DRIVER

Name of Driver KAN YUK MAN
NRIC No S6869042J

Date Of Birth	08/10/1968
Occupation	Indoor
Date Of Driving Pass	11/02/2011
Driving experience	11 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-90251781
Alt. Phone Number	(Home) +65-90251781
Email Address	KYMSURGERY@GMAIL.COM
Address	198 DEPOT ROAD #12-35
Address complement	-
Postcode	109693
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	Collision - Head to Rear
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?	Yes
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	Queenstown Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004719999
Alt. Police Station Phone No	(Fax) +65-64715299
Police Station Address	No. 3 Queensway #01-03 Singapore 149073
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH TP
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN6673B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	ANG BOON SENG
NRIC No	S1707406G
Contact Number	(Phone) +65-88285345
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	REAR PORTION
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

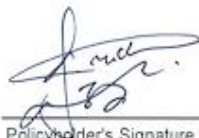
Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJN6673B
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

Describe Circumstances of the Accident

Refer to Police Report attached
T/20220823/2000

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

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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.
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.

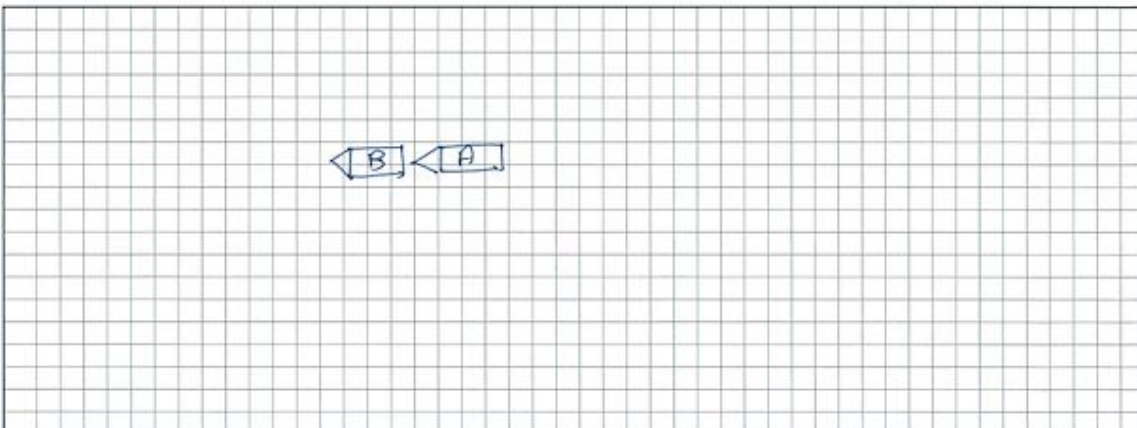


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan





































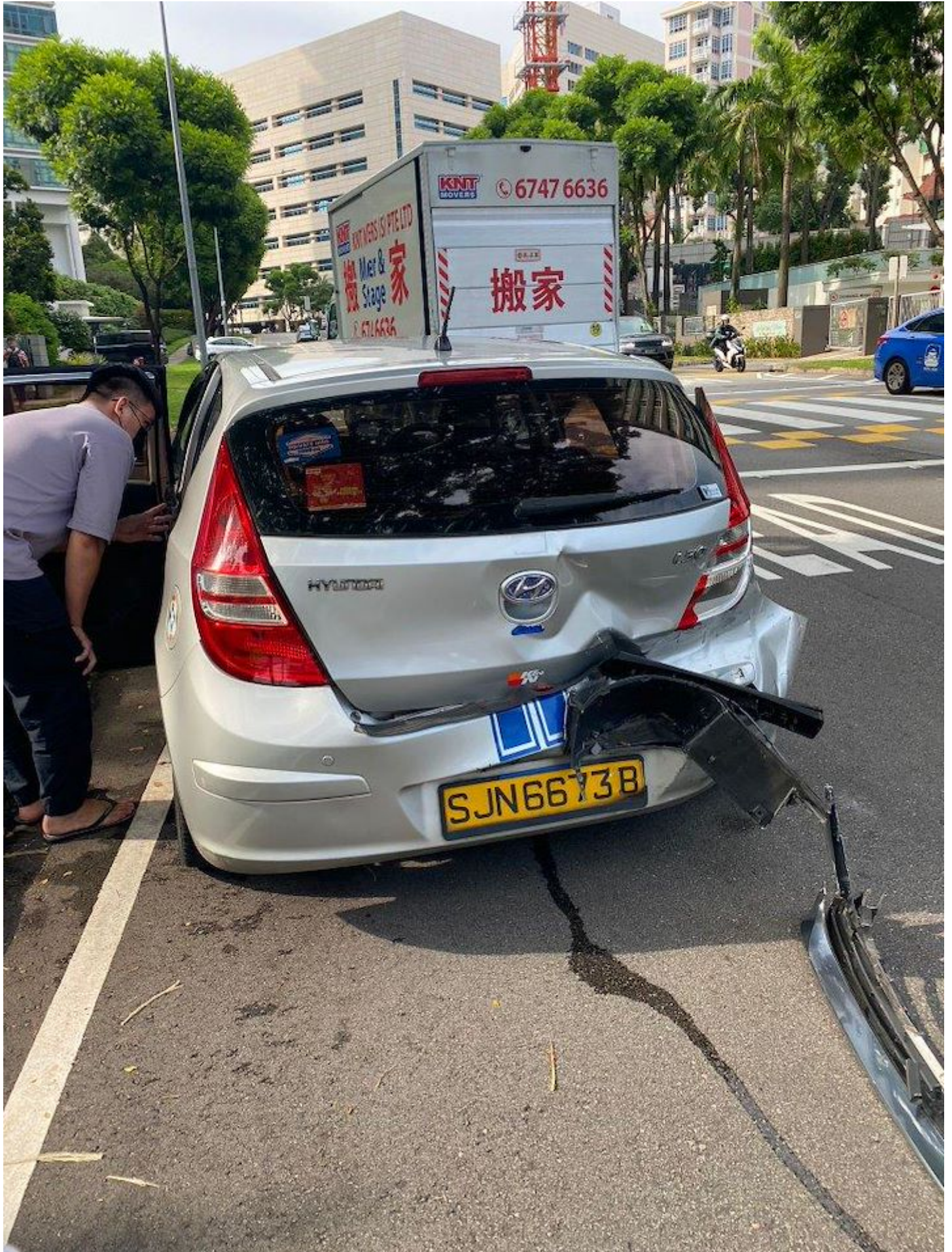
















**SINGAPORE
POLICE FORCE**



T/20220323/2000

1 of 4

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20220323/2000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/03/2022 00:41	Vide Report No.: E/20220322/0084	Station Diary No.: 9
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Informant's Particulars

Name of Informant: KAN YUK MAN		Address: 198 DEPOT ROAD #12-35 SINGAPORE 109693	
ID Type / ID No.: NRIC NO / S6869042J		Contact No.: Home/Office: Mobile: 90251781	
Nationality: BRITISH		Email: kymsurgery@gmail.com	
Sex: Male	Age: 53	Date of Birth: 08/10/1968	Type of Informant: Vehicle Owner
Race: Chinese		Language: English	Institution / School Name:
Occupation: DOCTOR		Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/03/2022 16:45	Type of Location: T-Junction
Location: MOULMEIN ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJN6673B	Car	HYUNDAI		Silver	Seriously Damaged	1
SLZ810A	Car	LEXUS		Black	Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20220323/2000

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Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20220323/2000

CONTINUATION OF REPORT

Driver			
Name	Ang Boon Seng	ID No.	S1707406G
Related Vehicle	SJN6673B (Car)	Contact No.	88285345
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
Vehicle Owner			
Name	KAN YUK MAN	ID No.	S6869042J
Related Vehicle	SLZ810A (Car)	Contact No.	90251781
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 22/03/2022, at about 4.45pm, I was driving my car SLZ810A along Moulmein Rd as I was heading Mount Elizabeth Novena Hospital. I was driving on the 1st lane from the right at that point of time. When I was approaching the junction of Moulmein Rd and Sinaran Dr, I wanted to apply my brakes to stop behind a silver car SJN6673B at the lane for turning right into Sinaran Dr. However, Instead of stepping on the brakes, I accidentally stepped on the accelerator. As such, my car surged forward and hit onto the silver car, causing the silver car to move forward and shifted away from its original position. My car then hit onto the railing and came to a stop. I subsequently alighted from my car and checked if anyone from the silver car was injured. I observed that a female passenger in the car was crying as she was too shocked due to the accident. I also approached the driver and he informed that he had a bump on his forehead but he do not need any immediate medical attention.

Shortly after, the traffic police and the ambulance arrived at the location. The ambulance subsequently conveyed the female passenger to Tan Tock Seng Hospital. The traffic police officer interviewed me for my version of the incident and he subsequently seized the memory card of my in-car camera. He also advised me to lodge a police report regarding this accident. My car was subsequently towed away as it was too seriously damaged to drive.

I wish to state that I have gotten my Singapore Driving Licence since 11/02/2011. I had an accident previously 3 years ago when someone hit onto the rear of my car. The accident was subsequently settled through insurance. I also wish to state that the last time I sent my car for servicing was about one month ago.



**SINGAPORE
POLICE FORCE**

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Tel No: 1800-4719999



T/20220323/2000

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Report No. T/20220323/2000

CONTINUATION OF REPORT



SINGAPORE
POLICE FORCE



T/20220323/2000

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20220323/2000

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: D / SR STAFF SGT TAN WEI JIAN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 23/03/2022 00:41
Officer In Charge Of Case: TP / GIT / SI KOH WEI JIE Contact No.: 97303412	Classification Of Case:

NP168



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: E/20220322/0084

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

of Traffic Police.
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One 64GB Sandisk microsd card
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____

from Kan Yuh Man, S6869042J
(Name, NRIC or Passport No. / Rank and No.)

of SLZ810A
(Address / Police Station / NPC / NPP)

on 22/03/2022 at 1740 hr
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

(Signature)
Kan Yuh Man, S6869042J
(Name, NRIC or Passport No. / Rank and No.)

Received by:

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

Other Remarks: Moulmen Rd
towards Thomson Rd X
Sivaran Dr, LLP 40

- ① Lodge police report (accident)
- ② Lodge insurance report.
- ③ Call investigation officer Koh Wei Jie @ 6547 6358 for make arrangement to collect second.



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
 18/01/2022

policy number
 GA526563

account number
 20585

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	KAN YUK MAN	Certificate number	GA526563 / 1
Cover	Comprehensive	Chassis number	JTHBW1GG502184774
Plan name	Lexus Prestige Max	Engine number	2AR1904934
NCD applicable	50%		
Vehicle registration number	SLZ810A		
Period of Insurance	from 28/02/2022 to 27/02/2023 (both dates inclusive)		
Finance loan company	Nil		

Authorized Drivers

- (a) The Policyholder
 (b) Any Named Driver as stated in the Policy;
 (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 trail, 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	Basic Own Damage Excess	SGD 700.00
	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

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

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

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