

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 Actual 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 24/11/2022 22:40 (SGT)
Reported by Both
Date of Accident 23/11/2022 19:20 (SGT)
Exact Location of Accident Singapore
Additional Location Information ALONG THOMSON ROAD TOWARDS NOVENA
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKM681K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner KANNAN KALIYAPERUMAL
NRIC No S7733186G
Email Address Drkannansg@yahoo.com.sg
Mobile Phone No (Phone) +65-96976657
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Porsche
Model 911
Variant GT3 RS (991-II) PDK E6 W/RC
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 4000

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Policy Number / Cover Note Number GA535097/1

DRIVER

Name of Driver KANNAN KALIYAPERUMAL
NRIC No S7733186G
Date Of Birth 20/11/1977
Occupation Indoor

| | |
|--|-------------------------|
| Date Of Driving Pass | 19/12/1997 |
| Driving experience | 24 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96976657 |
| Alt. Phone Number | - |
| Email Address | Drkannansg@yahoo.com.sg |
| Address | 102, THOMSON GREEN |
| Address complement | - |
| Postcode | 574967 |
| 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 | Hit and run / Vandalism / Damaged whilst parked |
| 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 |
| Translator's name | - |
| Translator's ID | - |
| Translator's phone number | - |
| Translator's email | - |
| Original language used in the statement | - |

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

PLEASE REFER TO POLICE REPORT NO T/20221124/7076 LODGE AT 10 UBI AVENUE 3 LORRY YN7723G WAS ON THE BUS LANE. MY CAR IN THE MIDDLE LANE. LORRY WAS SPEEDING ON THE BUS LANE AT 7.20PM. HE WAS NOT SUPPOSED TO BE ON THE BUS LANE. AS THE LORRY DRIVER SAW A BUS SLOWING DOWN IN FRONT OF HIM, HE SUDDENLY SERVED INTO MY LANE TO OVERTAKE THE BUS. HE HIT MY LEFT FRONT SIDE OF THE CAR & SPED IN FRONT OF ME, AND HE CUT BACK INTO THE BUS LANE AFTER OVERTAKING THE BUS TO FILTER LEFT INTO THE PIE. I CHASED HIM & HONKED AT HIM TO STOP BUT HE CONTIBUED SPEEDING AWAY. I TOOK A VIDEO FTHE PLATE & LORRY. HE ALSO TRIED TO UT ME OFF BY SUDDEN JAM BREAKING & CUTTING DANGEROUSLY INTO MY LANE AS I WAS CATCHING UP WITH HIM TO STOP HIS LORRY. THATS WHEN I REALISED THAT HE MAYBE DRUNK AS HE WAS DRIVING VERY AGGRESSIVELY & IRREGULARLY. I DECIDED NOTTO PURSUE HIM. I EXITED THE PIE AND MADE MY WAY TO THE TOA PAYOH POLICE POST. THE OFFICER DIRECTED ME TO MAKE AN ONLINE REPORT.I HAVE VIDEO & PICTURES.

ATTACHMENT(S)

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | Yes |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|---|--------------------|
| Vehicle Registration Number | YN7723G |
| Vehicle Manufacturer | Isuzu |
| Vehicle Model | NPR85UH5A |
| Vehicle Variant | - |
| Vehicle Colour | White |
| Vehicle Category | Commercial vehicle |
| Name of Driver | NO DETAIL |
| Contact Number | - |
| 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**

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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 Officer
Hashim Bin Kamari

 Witnessed by Reporting Centre
Personnel
Sketch Plan

REFER TO ATTACHED ACCIDENT DIAGRAM

Describe Circumstances of the Accident

AS PER ATTACHED POLICE REPORT LODGED ON LINE . VIDE REPORT NO T/20221124/7076

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

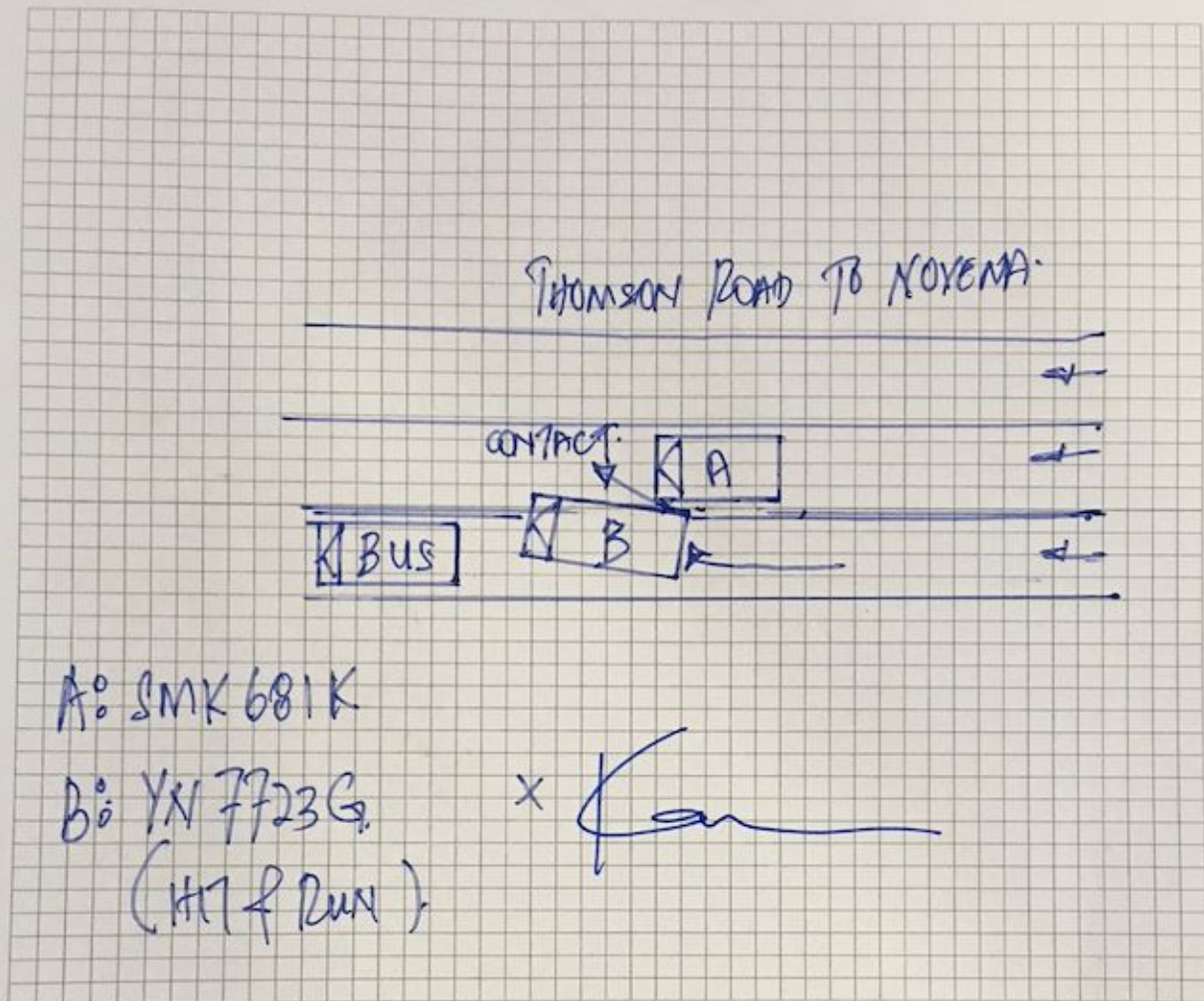
Driver's Signature (If driver is not the policyholder) / Date
& Time

Witnessed By Reporting Officer
Hashim Bin Kamari

Witnessed by Reporting Centre
Personnel

ACCIDENT DIAGRAM

Ver. 30042021



x *[Signature]*
 Policyholder's Signature
 Date & Time:

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

VERIFIED BY AJAX MARS (ARC)
 REPORTING OFFICER
 HASHIM BIN KAMARI

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











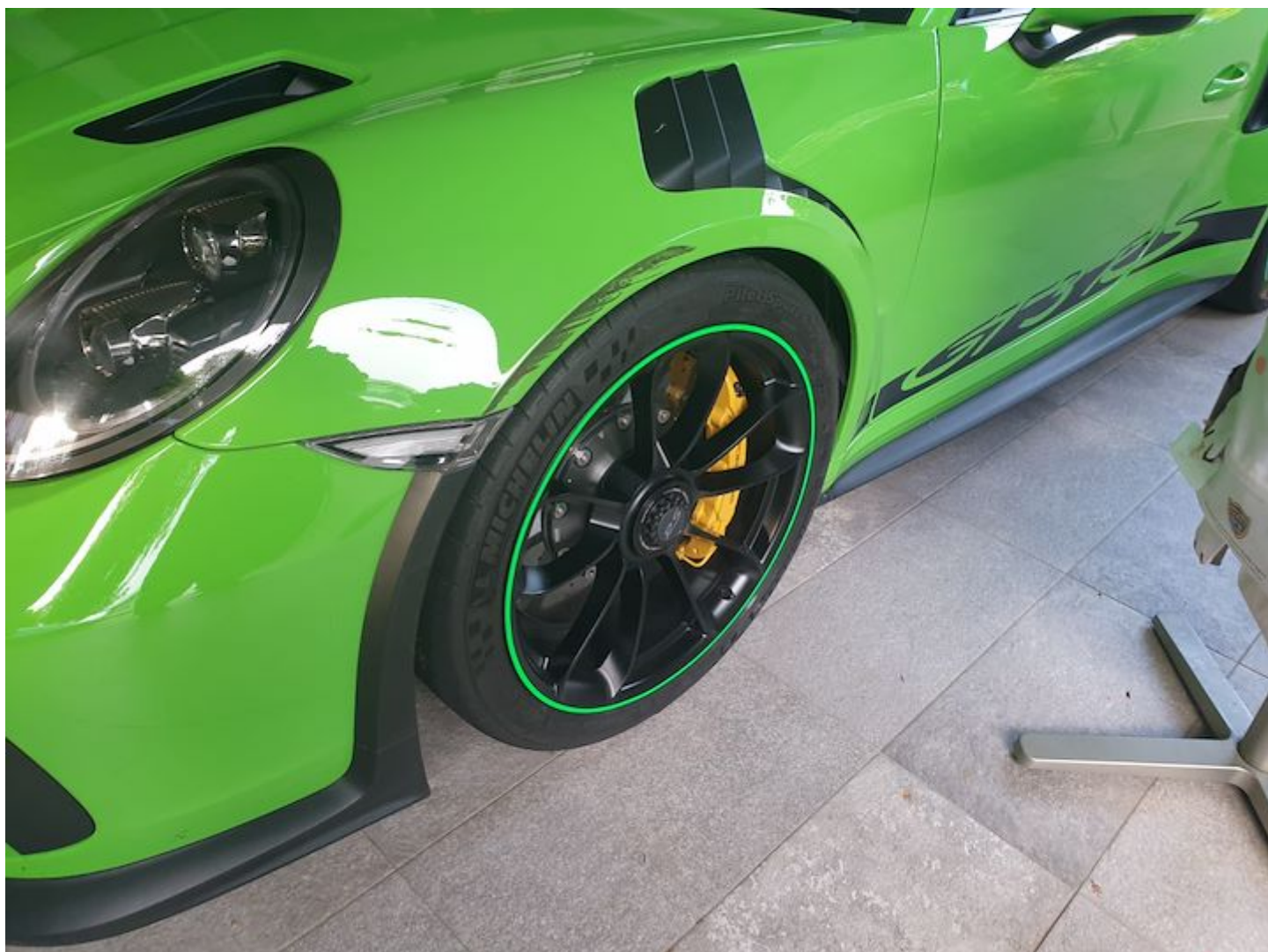


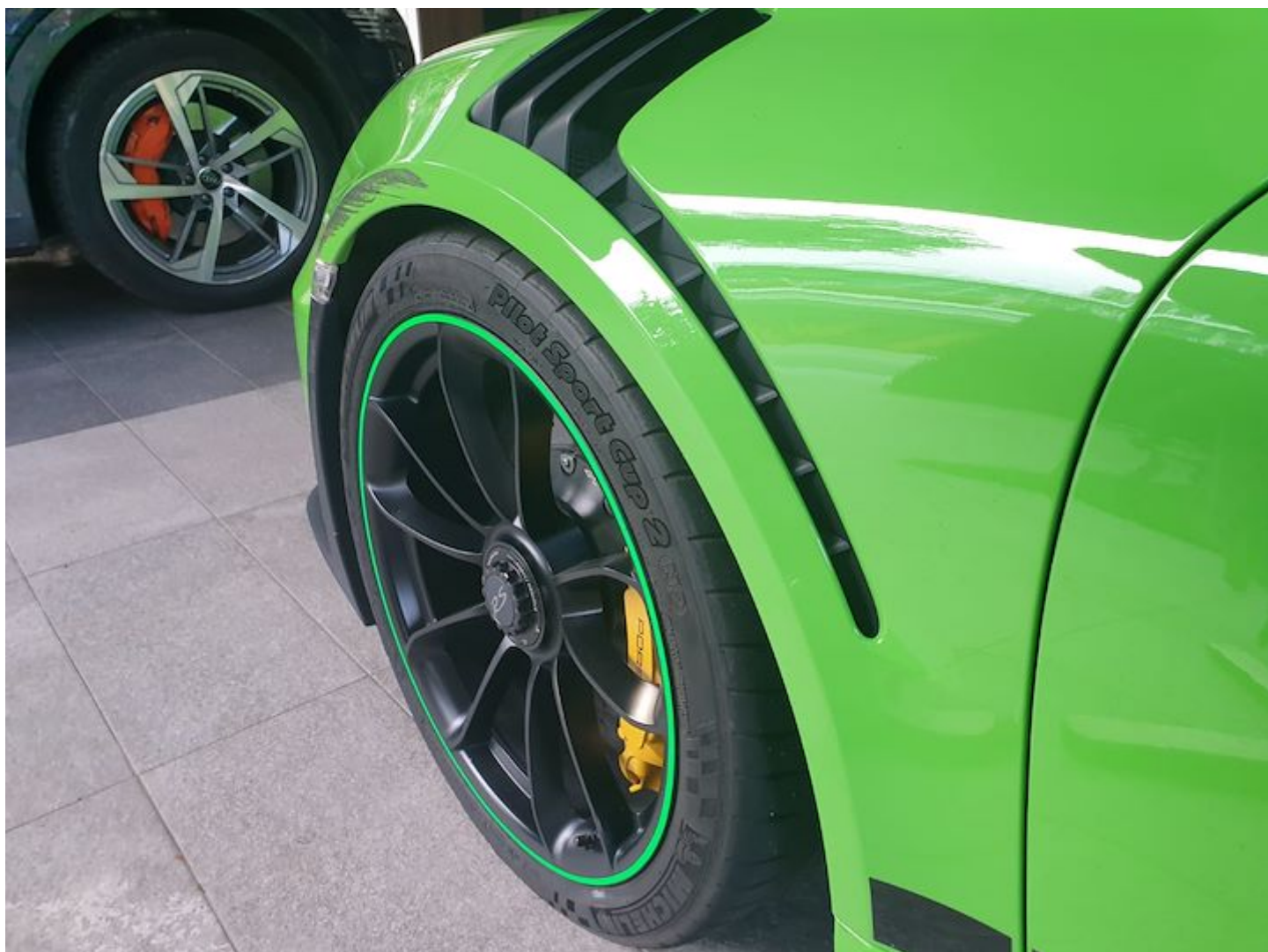




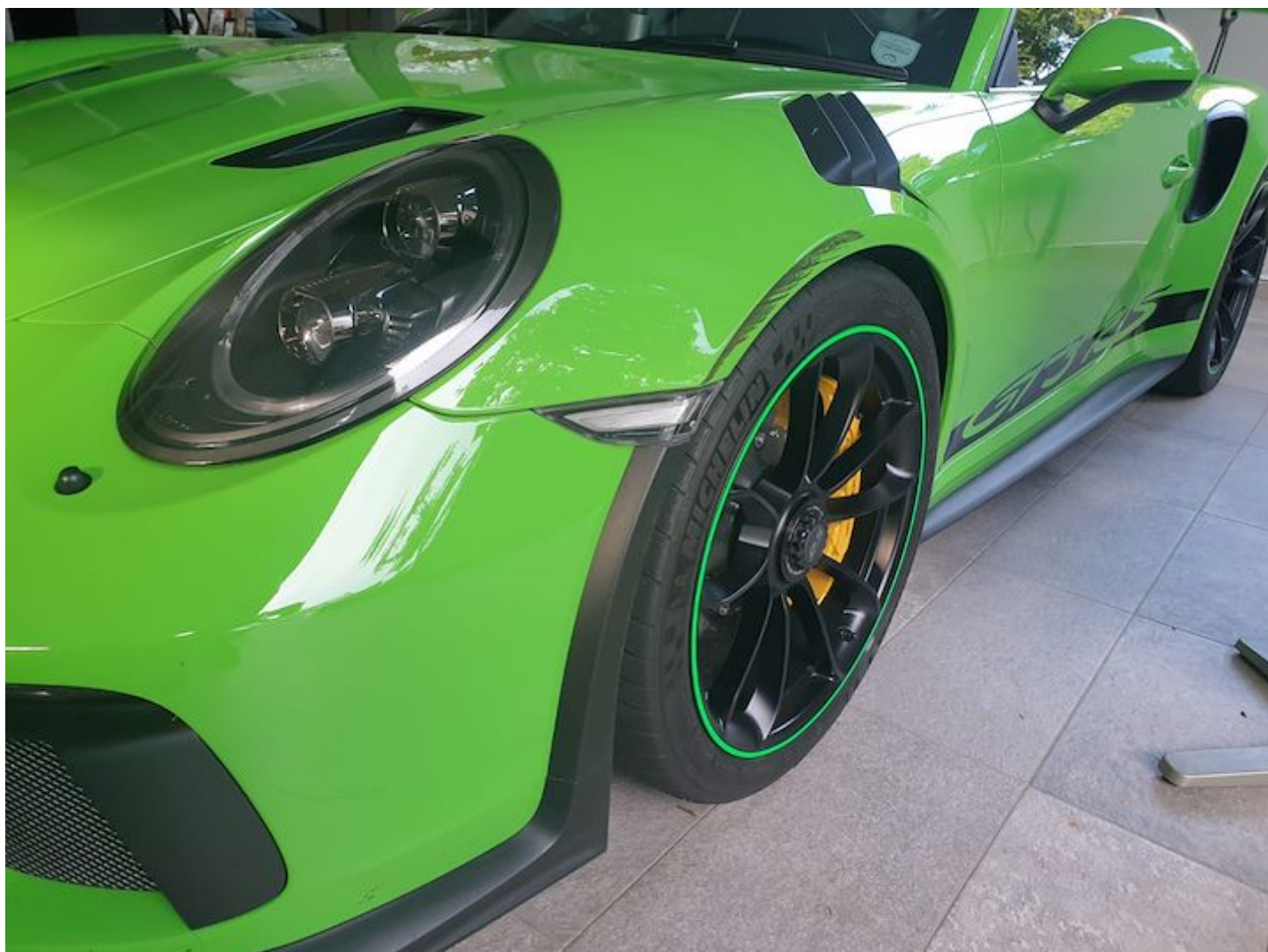








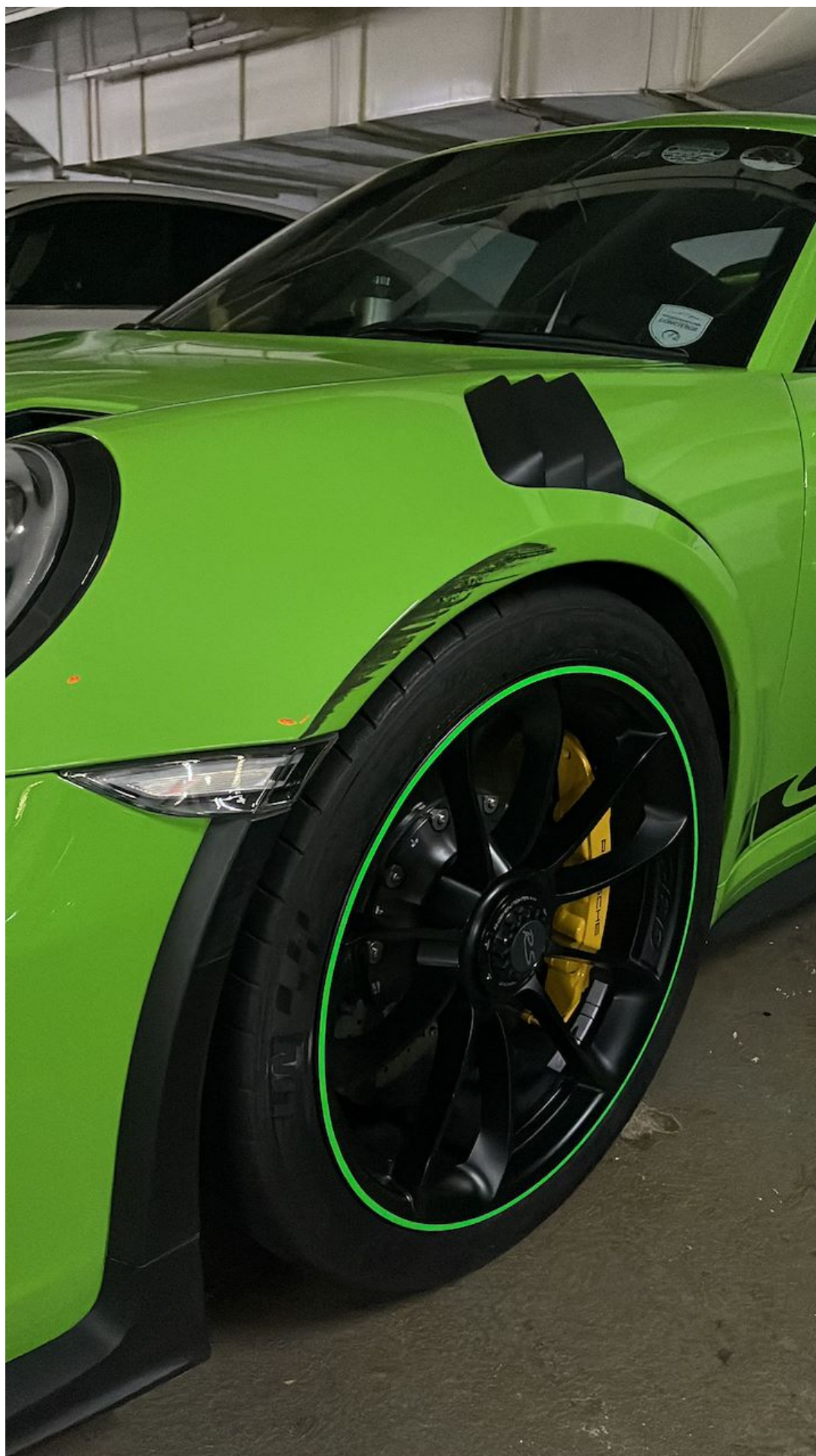
















**SINGAPORE
POLICE FORCE**



T/20221124/7076

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

1 of 3

Report No. T/20221124/7076

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|---|--------------------|----------------------------|
| Date/Time Report Made: 24/11/2022 00:42 | | Vide Report No.: | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: KANNAN KALIYAPERUMAL | | | Address: 102 THOMSON GREEN SINGAPORE 574967 | | |
| ID Type / ID No.: NRIC NO / S7733186G | | | Contact No.: Home/Office: Mobile: 96976657 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: DRKANNANSG@YAHOO.COM.SG | | |
| Sex: Male | Age: 45 | Date of Birth: 20/11/1977 | Type of Informant: Driver | | |
| Race: Indian | | | Language: English | | Institution / School Name: |
| Occupation: | | | Driving Licence Information: Class: Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---|-----------------------------|------------------------------------|---|--|
| Type of Accident: | Non-Injury Drink & Drive | Drink Drive: Yes | Date/Time of Accident: 23/11/2022 19:20 | Type of Location: Straight Road |
| Location: THOMSON ROAD | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: 50 Km/h | |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | Traffic Volume: Light | |
| Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Conditio | No of |
|-------------|------|---------|---------------------------------------|-------|----------|-------|
| SKM681K | Car | PORSCHE | 911 GT3 RS (991-II) PDK E6 W/RC | Green | | 0 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|-------------------|--------------|-----------|-------------|
|-------------|-------------------|--------------|-----------|-------------|



**SINGAPORE
POLICE FORCE**



T/20221124/7076

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

2 of 3

Report No. T/20221124/7076

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|------------------------------|---------------------------------|--------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SKM681K | AXA INSURANCE SINGAPORE PTE LTD | GA535097 | 26/02/2022 | 25/02/2023 |

| Details of Person Involved | | | |
|-----------------------------------|----------------------|--------------------------------|--|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | KANNAN KALIYAPERUMAL | | ID No. S7733186G |
| Related Vehicle | SKM681K (Car) | | Contact No. 96976657 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL |
| Date | NIL | | Date NIL |
| No. of Days granted Medical Leave | | NIL | Degree of NIL |

Brief Details.

Lorry YN7723G was on the bus lane. My car was in the middle lane. Lorry was speeding on the bus lane at 7.20pm. He was not supposed to be on the bus lane. As the lorry driver saw a bus slowing down in front of him, he suddenly served into my lane to overtake the bus. He hit my left front side of the car & sped in front of me. And he cut back into the bus lane after overtaking the bus to filter left into the PIE. I chased him & honked at him to stop but he continued speeding away. I took a video of the plate & lorry. He also tried to cut me off by sudden jam breaking & cutting dangerously into my lane as I was catching up with him to

Stop his lorry. That's when I realised that he maybe drunk as he was driving very aggressively & irregularly. I decided not to pursue him. I exited the PIE and made my way to the Toa Payoh Police Post. The officer directed me to make an online report. I have video & pictures.



**SINGAPORE
POLICE FORCE**



T/20221124/7076

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

3 of 3

Report No. T/20221124/7076

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 / TPB /
YEO KIA HUAT
Contact No.: 65476162

NP168

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

Date/Time:
24/11/2022 00:42

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: SA1D22BO0006 Vehicle Registration No: SKM681K
 Name (as shown in NRIC): KANNAN KALIYAPERUMAL NRIC/FIN/Passport No: S7733186G
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 96976657
 Email Address: Drkannansg@yahoo.com.sg
 Date of Accident: 23/11/2022 Time of Accident: 19:20
 Place of Accident: ALONG THOMSON ROAD TOWARDS NOVENA
 Insurance Company: AXA INSURANCE SINGAPORE 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:

1-AMEND EMAIL ADDRESS

 Policyholder / Driver's Signature
 Date:

SABITRA
 Reporting Centre Personnel's Signature
 Name: SABITRA
 NRIC/FIN No.:
 Date: 24/11/2022