

## 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 .....	03/04/2023 15:57 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	31/03/2023 16:15 (SGT)
Exact Location of Accident .....	Keppel Rd, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	GBL5866Z
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	AXG Enterprise
Company Reg No .....	53431060E
Email Address .....	panda_xiong_85@icloud.com
Mobile Phone No .....	(Phone) +65-96996973
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Hiace
Variant .....	Panel Van
Exact purpose for which vehicle was being used at time of accident .....	Employment
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Commercial vehicle
Transmission .....	Auto
CC .....	2800

#### INSURANCE COMPANY

Name of Insurance Company .....	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	SP2003087138

#### DRIVER

Name of Driver .....	Ng Yeow Teck
NRIC No .....	S8534453F
Date Of Birth .....	03/11/1985
Occupation .....	Outdoor

Date Of Driving Pass .....	06/01/2006
Driving experience .....	17 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96996973
Alt. Phone Number .....	-
Email Address .....	panda_xiong_85@icloud.com
Address .....	Blk 217 Petir Road #04-401 Singapore
Address complement .....	-
Postcode .....	670217
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Owner (Self-Employed)
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 - Major/Minor Rd
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
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 .....	Bukit Panjang Neighbourhood Police Centre
Police Station Address .....	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

Refer to Accident Police Report T/20230401/2093.

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SLP7351P
Vehicle Manufacturer .....	Mercedes
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car

Name of Driver .....	Diong Fu Han
NRIC No .....	-1
Contact Number .....	(Phone) +65-96696246
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	Ng Yeow Teck
Gender .....	Male
Phone No .....	(Phone) +65-96996973
Address .....	Blk 217 Petir Road #04-401 Singapore
Address Complement .....	-
Post Code .....	670217
Approximate Age Years Old .....	37
Injuries Sustained .....	Pain on Left Leg and Upper Shoulder. 4 days MC from 01/04/2023 to 04/04/2023.
Injured person in which vehicle? .....	GBL5866Z
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

## SKETCH PLAN

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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/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.

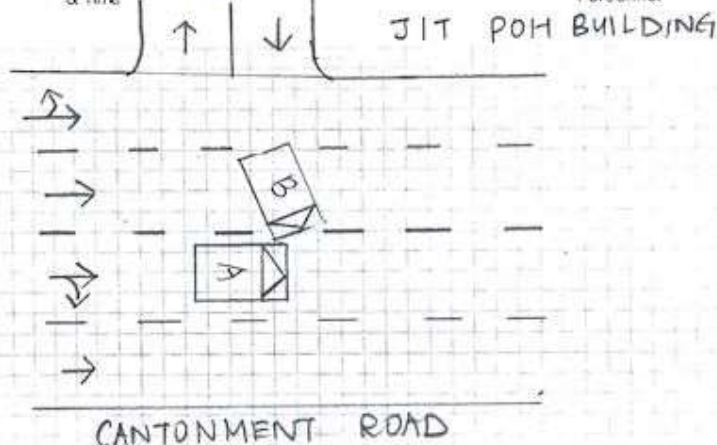

Policyholder's Signature / Date & Time

Sketch Plan

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


Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident


Please refer to police report attached.

Declaration

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date & Time

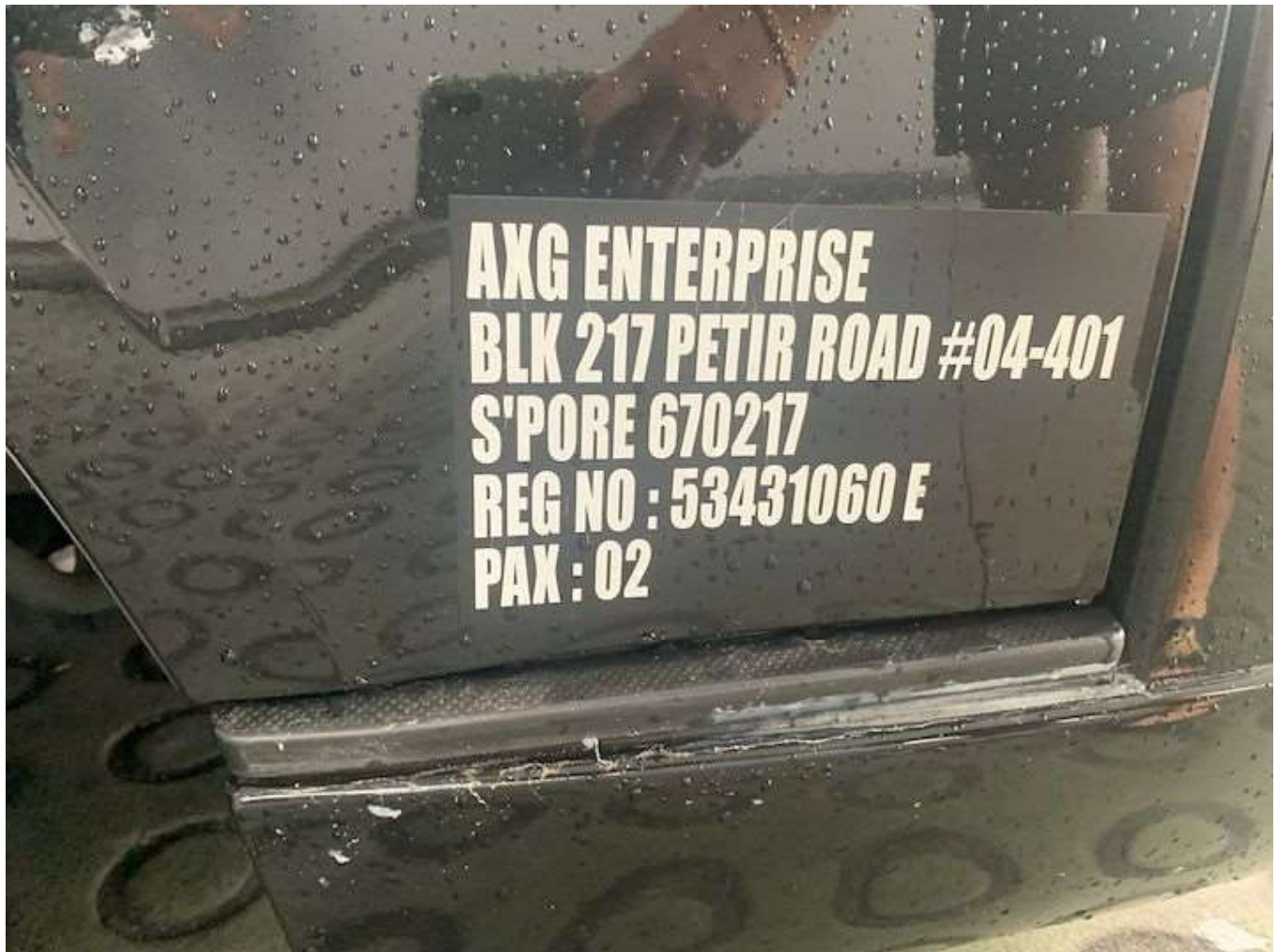


  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel





































**SINGAPORE  
POLICE FORCE**



T/20230401/2093

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

1 of 3

Report No. T/20230401/2093

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 01/04/2023 22:00		Vide Report No.:		Station Diary No.: 77
<b>Informant's Particulars</b>				
Name of Informant: NG YEOW TECK		Address: APT BLK 217 PETIR ROAD #04-401 SINGAPORE 670217		
ID Type / ID No.: NRIC NO / S8534453F		Contact No.: Home/Office: Mobile: 96996973		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 37	Date of Birth: 03/11/1985	Type of Informant: Driver	
Race: Chinese		Language:		
Occupation: SELF-EMPLOYED		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/03/2023 16:15	Type of Location:
Location:  KEPPEL ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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	Condition	No of Passenger
GBL5866Z	Van	TOYOTA	HI ACE DX 2.8 AUTO	Black	Slightly Damaged	0
SLP7351P	Car	MERCEDES BENZ			Slightly Damaged	1

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20230401/2093

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Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

Report No. T/20230401/2093

## CONTINUATION OF REPORT

Driver			
Name	NG YEOW TECK	ID No.	S8534453F
Related Vehicle	GBL5866Z (Van)	Contact No.	96996973
Hospital/Clinic	MOUNT ELIZABETH HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	01/04/2023	Date Discharge	01/04/2023
No. of Days granted Medical Leave	04	Degree of Injury	Slight
Driver			
Name	DIONG FU HAN	ID No.	NIL
Related Vehicle	SLP7351P (Car)	Contact No.	96696246
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

**Brief Details.**

On 31/03/2023 at about 4.15pm, I was driving my vehicle (GBL5866Z) along cantonment road towards Keppel Road. As the traffic light was in my favor, I proceeded forward and suddenly a vehicle bearing plate number (SLP7351P) came out from Jit Poh Building gantry (19 Keppel Road) and collided to my front left side of the vehicle.

I alighted my vehicle to make a check and discovered that my vehicle sustained damages such as scratches, paint marks, dents, and cracks on the front left side of my vehicle.

No injuries were reported at that point of time and left the scene after wards. No police or ambulance came to scene. No government property was damaged.

Subsequently on 01/04/2023, I felt pain on my left leg and upper shoulder due to the accident. I went to Mount Elizabeth Hospital and was given 4 days MC (01-04-2023 - 04/04/2023)





**SINGAPORE  
POLICE FORCE**



T/20230401/2093

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

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Report No. T/20230401/2093

## CONTINUATION OF REPORT

Signature of Officer Recording The Report:

J/  
SGT 1 MUHAMMAD YUSRI BIN  
YUSOFF

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

TP / AEIT /  
SR STAFF SGT FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65470000

Signature Of Informant:

Date/Time:

01/04/2023 22:00

Classification Of Case:

NP168

Allianz Insurance Singapore Pte. Ltd.

### CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number	: SP2003087138
Date of Issue	: 10 October 2022
Coverage	: COMPREHENSIVE- AUTHORISED WORKSHOP
Policyholder	: AXG ENTERPRISE
Finance Company	: NA
Period of Insurance	: 29 October 2022 To 28 October 2023 (both dates inclusive)
Registration Number	: GBL5866Z
Chassis Number of Vehicle	: GDH2011064067

#### Persons or Classes of Persons Entitled to Drive\*:

- (a) The Policyholder.
- (b) Any other person who is driving on the Policyholder's order or with his/her permission.
- \* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

#### Limitation as to Use\*:

- (a) Use in connection with the Policyholder's business.
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (c) Use for social, domestic and pleasure purposes
- \* Limitation rendered inoperative by Section 8 of 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.

#### Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
- (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

10 October 2022  
 Issue Date

  
 Hicham Raissi  
 Chief Executive Officer  
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000396 ALLINK INSURANCE AGENCY PTE. LTD.  
 Excess  
 Own Damage  
 Windscreen

S\$	600.00
S\$	100.00