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 witholding 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 First Submission 11/11/2024 12:37 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 30/10/2024 12:55 (SGT) **Exact Location of Accident** Singapore Additional Location Information MOUNTBATTEN RD

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **FBT1214P**

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner CHIA CHEE KEONG

NRIC No S0926154J

Email Address RICKYCHIA51@GMAIL.COM Mobile Phone No (Phone) +65-91551066

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Yamaha

Model NMAX 155 ABS CONNECTED

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party

Vehicle Category Motorcycle

Transmission Manual CC

155 Vehicle Fuel Petrol

First Regisration Date 17/11/2021 Chassis no MH3SG5680MK091936

Effective Date/Time of Ownership 17/11/2021 12:11 (SGT)

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited

Policy Number / Cover Note Number 5124633277-02

DRIVER

accident



Name of Driver NRIC No

Date Of Birth Occupation **Driving Pass Date**

Driving License Pass Class Driving License Validity

Driving experience

Gender

Mobile Number

Alt. Phone Number

Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance? 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?

Police Station Name Police Station Phone No Alt. Police Station Phone No.

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED POLICE REPORT

ATTACHMENT(S)

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

Yes No

CHIA CHEE KEONG

S0926154J 15/06/1951 Outdoor 25/02/1974

2B Valid

50 YEARS AND 8 MONTHS

(Phone) +65-91551066

RICKYCHIA51@GMAIL.COM

BLK 113 LORONG 1 TOA PAYOH 03-460 SINGAPORE 310113

Yes

No

Collision - Head to Rear

Clear Dry

No

2 Yes

Yes Yes

1

No

Toa Payoh Neighbourhood Police Centre

(Phone) +65-18002519999 (Fax) +65-63548749

93 Toa Payoh Central Toa Payoh Community Building #01-02

Singapore 319194

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC1135C Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Taxi Name of Driver **Contact Number** Address Address complement Postcode **Insurance Company Name** Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1





Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

1 of 3 Report No. T/20241101/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/11/2024 11:47			Vide Report No.: G/20241030/0084	Station Diary No. 57
Informan	t's Particu	lars	101101285116251	n - sh salayayaranin
	Informant: EE KEONO		Address: 113 LORONG 1 TOA PA	YOH #03-460 SINGAPORE 310113
ID Type / NRIC NO	ID No.:) / S092615	4J	Contact No.: Home/Office:	Mobile: 91551066
Nationali SINGAP	ty: ORE CITIZ	EN	Email:	
Sex: Male	Age: 73	Date of Birth: 15/06/1951	Type of Informant: Rider	
Race: Chinese			Language: English	
Occupat DELIVE	lion: RY RIDER		Driving Licence Informat Class: 2B,2A,2,3	ion: Date of Expiry:

General Infor	mation of the Accident	2000年6月1日 N	British Company	
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/10/2024 12:55	Type of Location: Straight Road
Location:				
MOUNTBAT	TEN ROAD			
Lamp Post N	umber: 23	David Students		
Weather:		Road Surface:		
Traffic Flow: One Way		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Light
Type of Colli	lsion: oving Vehicles - Head To R			Anyone conveyed by ambulance: Yes

Details of Ve	hicle involved	A STATE OF THE STA	3 (200), The 1		era Larous	THE US WALLS
	Type: Y		Model 73	Colon	Conditio	No of Passenger
	Motorcycle				Slightly Damaged	0
SHC1135C	Motor car				,	0

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



T/20241101/2022

Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 CONTINUATION OF REPORT Tel No: 1800-2519999

Report No. T/20241101/2022

Name	CHIA CHEE KEONG		ID No.		S0926154J
Related Vehicle	FBT1214P (Motorcycle)		Conta	ct No.	91551066
Hospital/Clinic	RAFFLES HOSPITAL		Class Drivin Licens Expir	g ce &	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	30/10/2024	Date Disc	harge	31/10	0/2024
No. of Days gran	nted Medical Leave 08	Degree of	f	Sligh	t

Brief Details.

On 30/10/2024 at about 1250hrs, I was riding my motorcycle (FBT1214P) along Mountbatten Road towards Sims Avenue. At that time, I was riding along lane 4 of the 4-lane road. White riding, I noticed a lorry at lane 3 which is ahead of me start to encroach into my lane and as such, I slowed down to make way for it.

While I was slowing down, that is when I felt an impact coming from the rear and due to the impact, I lose control of my motorcycle and fell on my left side. I realized that a blue taxi SHC1135C, had hit me from the rear. I felt giddy and unable to stand up after the collision. I felt some pain around my neck, arm and leg area. There are some passersby who helped to call for the police and they also assisted to take photo of the accident scene.

I was conveyed to Raffles Hospital due to my injuries. I stayed there for one night and discharge on 31/10/2024. I was given 8 days of medical leave.

I then received a message from Traffic Police IO Nurhayati that my accident is currently under investigation.





Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194 CONTINUATION OF REPORT
Tel No: 1800-2519999

3 of 3 Report No. T/20241101/2022

Signature of Officer Recording The
E /
SGT 3 MUHAMMAD NUR
ISKANDAR BIN MUHD NUR
GHAZALI LIM
Signature Of Interpreter:
Not applicable

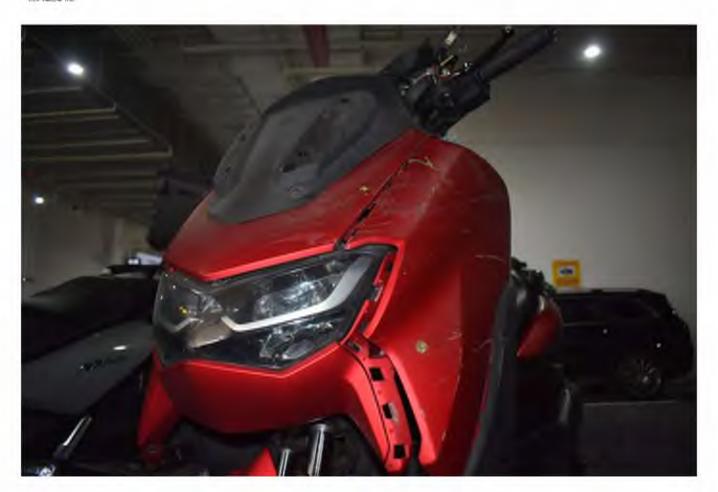
Officer In Charge Of Case:
TP / GIT /
INSP (1) KOH WEI JIE
Contact No.: 65476358

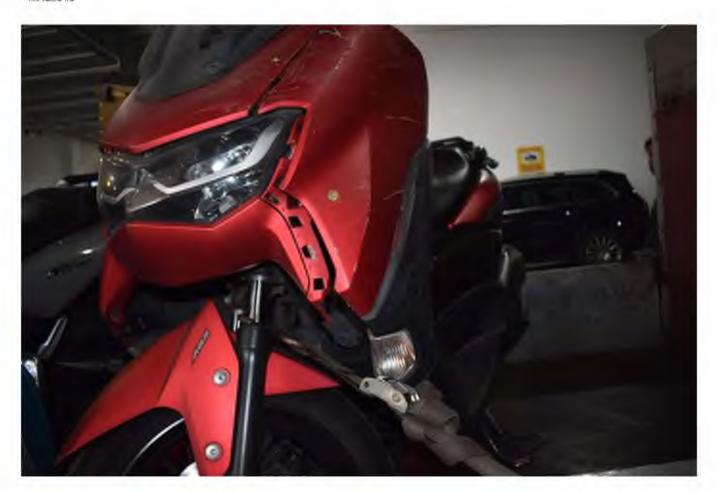
Signature Of Informant:

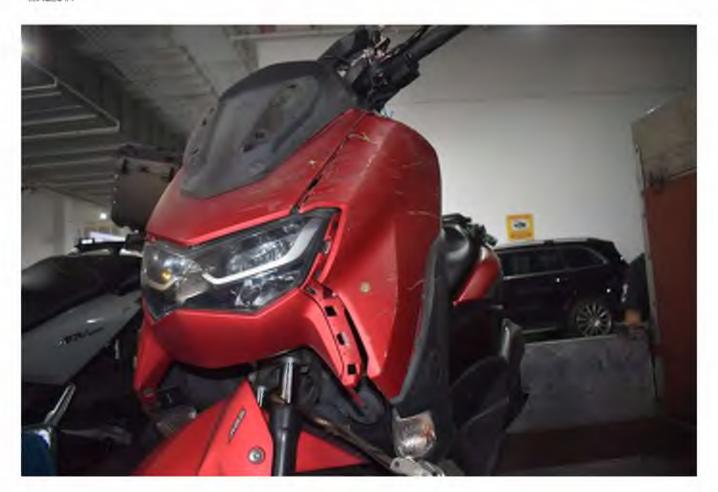
Date/Time:
01/11/2024 11:47

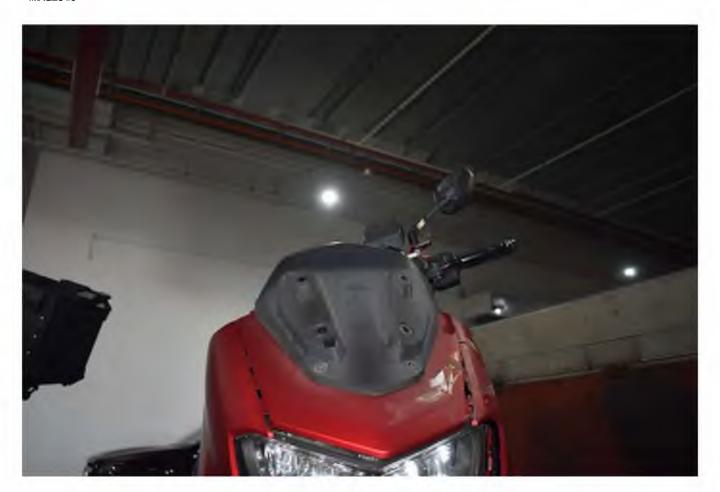
Classification Of Case:
TP / GIT /
INSP (1) KOH WEI JIE
Contact No.: 65476358



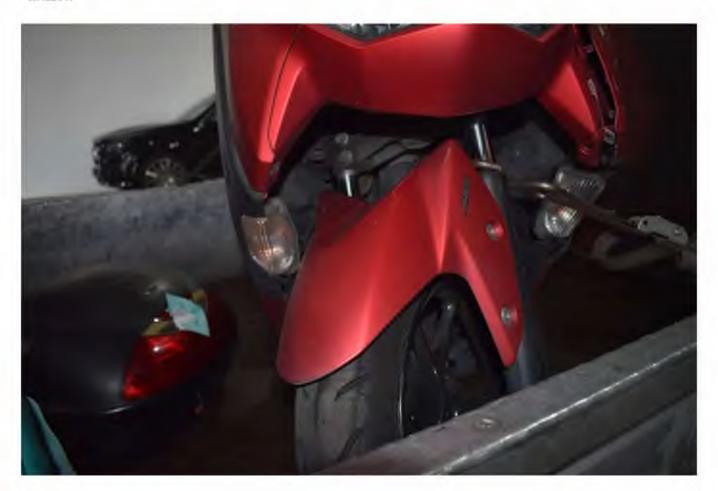




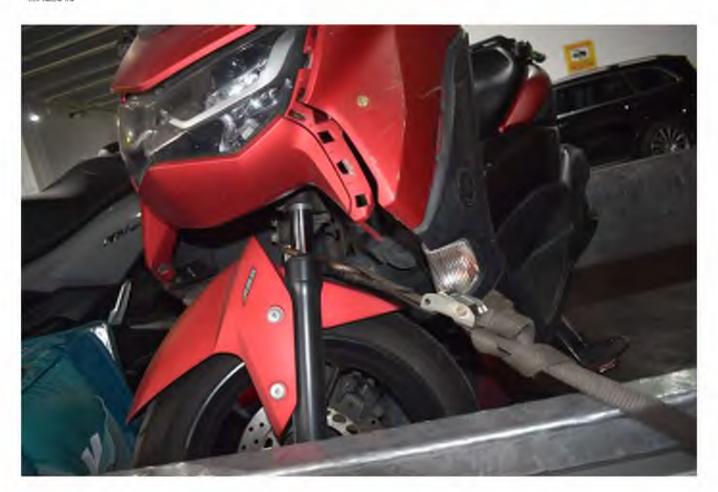


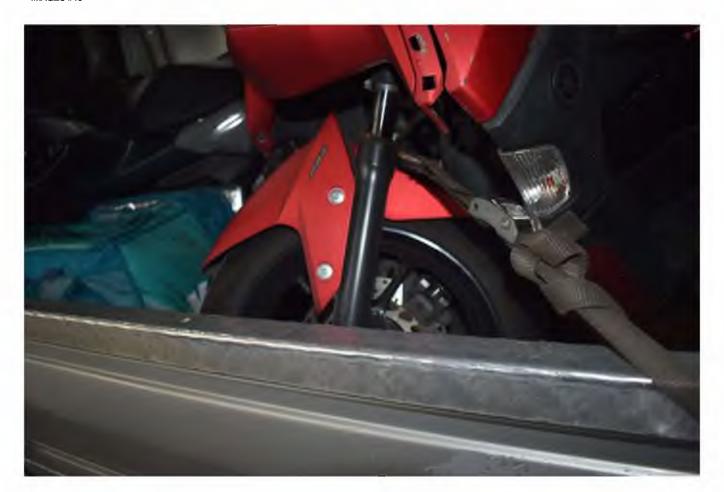












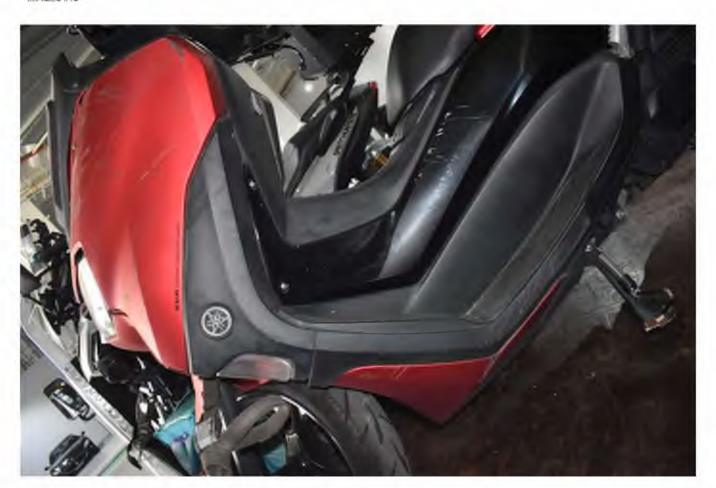


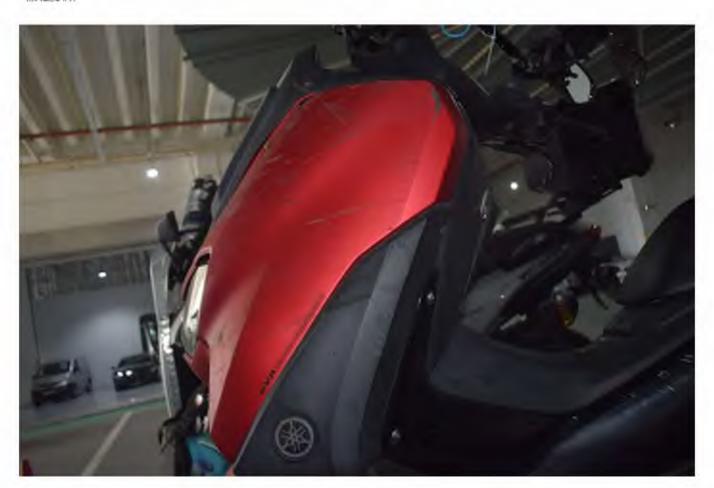










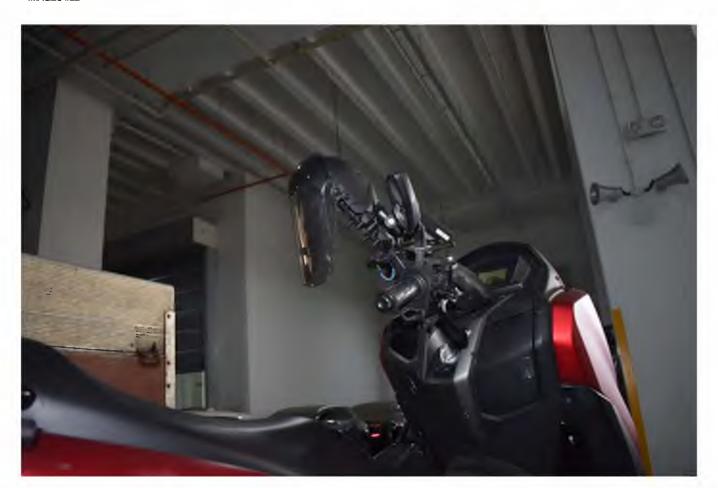


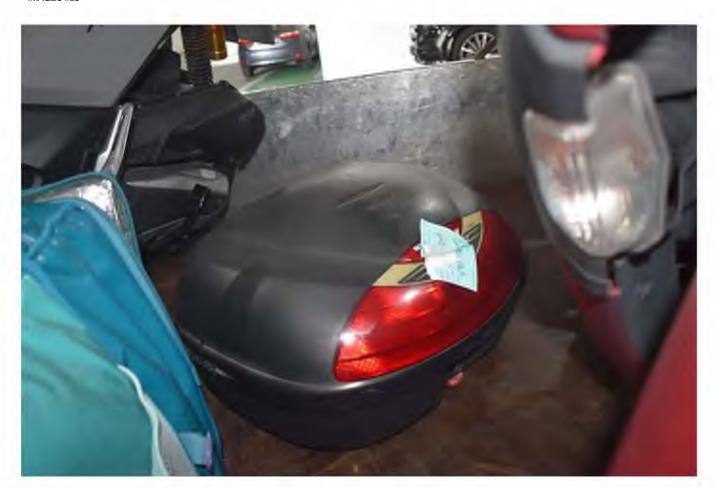




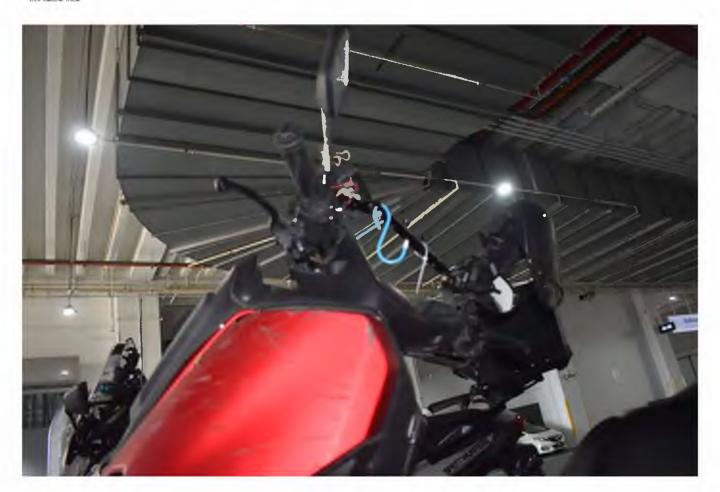
















Police Station Of Origin; Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

1 01 3 Report No. T/20241101/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/11/2024 11:47			Vide Report No.: G/20241030/0084	Station Diary No. 57
Informan	t's Particu	lars		n = 3h 38538 (\$55)
	Informant: EE KEON	3	Address: 113 LORONG 1 TOA PA	YOH #03-460 SINGAPORE 310113
ID Type / NRIC NO	ID No.: > / S092615	54J	Contact No.: Home/Office:	Mobile: 91551066
Nationali SINGAP	ty: ORE CITIZ	EN	Email:	
Sex: Male	Age: 73	Date of Birth: 15/06/1951	Type of Informant: Rider	
Race: Chinese			Language: English	
Occupat DELIVE	tion: RY RIDER		Driving Licence Informati Class: 28,2A,2,3	on: Date of Expiry:
			Į.	

eneral Infor	mation of the Accident.	State of the state	. 3 构裁46	
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/10/2024 12:55	Type of Location Straight Road
Location: MOUNTBAT	TEN ROAD			
Lamp Post N	lumber: 23	In tout		
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control: Traffic Light - Wor	king	Traffic Volume: Light
One Way				

Vehicle No:	hicle involve	Make :	Model	Color	Conditio	No of Passenge
FBT1214P	Motorcycle				Slightly Damaged	0
SHC1135C	Motor car					0

Details of Person Involved	以 为 的情况的描述。1000年代第二十二年代,1000年
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing; NA



T/20241101/2022

Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 CONTINUATION OF REPORT Tel No: 1800-2519999

Report No. T/20241101/2022

Name	CHIA CHEE KEONG		ID No.		S0926154J
Related Vehicle	FBT1214P (Motorcycle)	11.22	Conta	ct No.	91551066
Hospital/Clinic	RAFFLES HOSPITAL		Class Drivin Licend Expiry	g ce &	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	30/10/2024	Date Disc	harge	31/10	0/2024
No. of Days gran	nted Medical Leave 08	Degree of		Sligh	t

Brief Details.

On 30/10/2024 at about 1250hrs, I was riding my motorcycle (FBT1214P) along Mountbatten Road towards Sims Avenue. At that time, I was riding along lane 4 of the 4-lane road. White riding, I noticed a lorry at lane 3 which is ahead of me start to encroach into my lane and as such, I slowed down to make way for it.

While I was slowing down, that is when I felt an impact coming from the rear and due to the impact, I lose control of my motorcycle and fell on my left side. I realized that a blue taxi SHC1135C, had hit me from the rear. I felt giddy and unable to stand up after the collision. I felt some pain around my neck, arm and leg area. There are some passersby who helped to call for the police and they also assisted to take photo of the accident scene.

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I then received a message from Traffic Police IO Nurhayati that my accident is currently under investigation.





Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194 CONTINUATION OF REPORT
Tel No: 1800-2519999

3 of 3 Report No. T/20241101/2022

Signature of Officer Recording The
E /
SGT 3 MUHAMMAD NUR
ISKANDAR BIN MUHD NUR
GHAZALI LIM
Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
INSP (1) KOH WEI JIE
Contact No.: 65476358

Signature Of Informant:

Date/Time:
01/11/2024 11:47

Classification Of Case:
TP / GIT /
INSP (1) KOH WEI JIE
Contact No.: 65476358



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 [MALAYSIA]

Certificate Number : 5124633277-02

Cover : Third Party, Fire & Theft

: FBT1214P

1. Index mark and Registration Number of Vehicle Chassis Number

2. Name of Policyholder

: MH3SG5680MK091936

: CHIA CHEE KEONG

3. Effective Date of Insurance

: 17 Nov 2023

Expiry Date of Insurance

: 16 Nov 2024

5. Persons or Classes of Persons entitled to drivell

(a) Named Driver(s) Only.

------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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

(b) Use for food/parcel/other delivery services.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-titing.

(c) Use for the carriage of goods (other than samples) in clinnection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)

: N/A

EXCESS (SECTION 2)

: N/A

EXCESS (THEFT OUTSIDE SINGAPORE)

: PLEASE REFER OVERLEAF

INSURE WITH COE

: YES

NAMED DRIVER (1)

: CHIA CHEE KEONG

NAMED DRIVER (2)

HIRE PURCHASE COMPANY

: N/A

: WING FUAT PTE LTD

SUM INSURED

MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: COMMERCIAL AGENCY PTE, LTD. (00000614425)

Date of Issue

: 16 Oct 2023 09:55 hrs

For INCOME INSURANCE LIMITED

Chief Executive

Hospital

MEDICAL CERTIFICATE

	26154J A CHEE KEONG		•	4 - A - State against and a gardinate and a gardinate and a second and
NAME CHIA	CHEEKEONG			
	1011221120110			
ADMISSION DATE 30 O	ct 2024			
DISCHARGE DATE 31 O	ct 2024			
VISIT NO 2024	814758			

This is to certify that the above mentioned has been given:

HOSPITALIZATION / POST HOSPITALIZATION LEAVE For 8 days From 30 Oct 2024 to 86 Nov 2024

PRINCIPAL DOCTOR
PREPARED BY
DEPARTMENT
ADDRESS

YANG CHING YU (RD) (02858D) Koh Jia Ming (M66119H) WARD 9C, Raffles Hospilal

585 North Bridge Road Raffles Hospital 188770

Printed: 31 Oct 2024, 11715484

This cell floate is not valid for absence from court or other pudicint proceedings unless specifically stated.

This certificate is electronically generated. No signature is recoired.



Download RafflesConnect to:

- . Teleconsult with our GP Doctor
- . Request eQueue before coming to GP clinic
- . Book an appointment for GP phone consult.

 Note features . .

More leature



Medicine Delivery Service Scan QR Code to request online.



MEDICAL CERTIFICATE

MC No Issue Date: 06 Nov 2024 (13:35) NRIC S0926154J : CHIA CHEE KEONG ADMISSION DATE 05 Nov 2024 DISCHARGE DATE 06 Nov 2024 2024814980

This is to certify that the above mentioned has been given:

HOSPITALIZATION / POST HOSPITALIZATION LEAVE For 32 days From 05 Nov 2024 to 06 Dec 2024

PRINCIPAL DOCTOR DAVID WONG (RD) (03983G) PREPARED BY DEPARTMENT

. Koh Jia Ming (M66119H) WARD 13, Raffles Hospital

ADDRESS . 585 North Bridge Road Raffles Hospital 188770

This certificate is not valid for absence from court or other judicial proceedings unless specifically stated. "This certificate is electronically generated, No signature is required.



Download RafflesConnect to:

- . Request eQueue before coming to GP ctime
- Book an appointment for GP phone consult





Medicine Delivery Service: Scan QR Code to request online.