

## 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 First Submission .....	16/12/2024 17:18 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	15/12/2024 13:55 (SGT)
Exact Location of Accident .....	Jeleebu Rd, Singapore
Additional Location Information .....	SLIP ROAD, ENTERING MAIN ROAD OF JELEBU RD (NEAR L/P: 11S1)
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	FBR6231S
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LIM POH TEONG
NRIC No .....	701F
Email Address .....	
Mobile Phone No .....	
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Yamaha
Model .....	AEROX GDR155A CVT ABS
Variant .....	-
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 .....	Motorcycle
Transmission .....	Auto
CC .....	155
Vehicle Fuel .....	Petrol
First Registration Date .....	01/09/2020
Chassis no .....	MH3SG4640LJ070352
Effective Date/Time of Ownership .....	03/09/2020 07:09 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5148062038

#### DRIVER

Name of Driver .....	LIM POH TEONG
NRIC No .....	
Date Of Birth .....	
Occupation .....	Outdoor
Driving Pass Date .....	04/07/2018
Driving License Pass Class .....	2A
Driving License Validity .....	Valid
Driving experience .....	6 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	
Alt. Phone Number .....	-
Email Address .....	
Address .....	
Address complement .....	
Postcode .....	-
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? .....	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

REFER ATTACHED POLICE REPORT: T/20241216/7042 DATED 15/12/2024.

#### 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 .....	SMB1390C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Bus
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) .....	-

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:

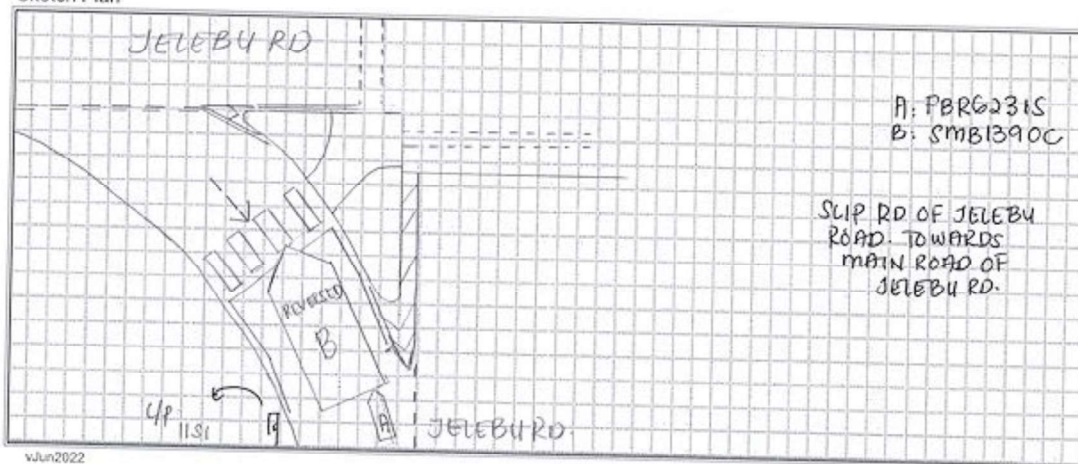
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 16/12/2024  
Policyholder's Signature / Date & Time

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

 16/12/24, 11:00pm  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

**Sketch Plan**



vJun2022

1

Describe Circumstance of the Accident

REFER TO POLICE REPORT:  
T/2024 1216/7042  
DATED 16/12/24.

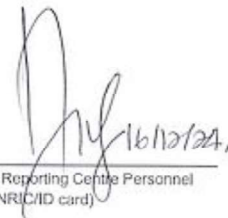
Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

 16/12/24,

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)



















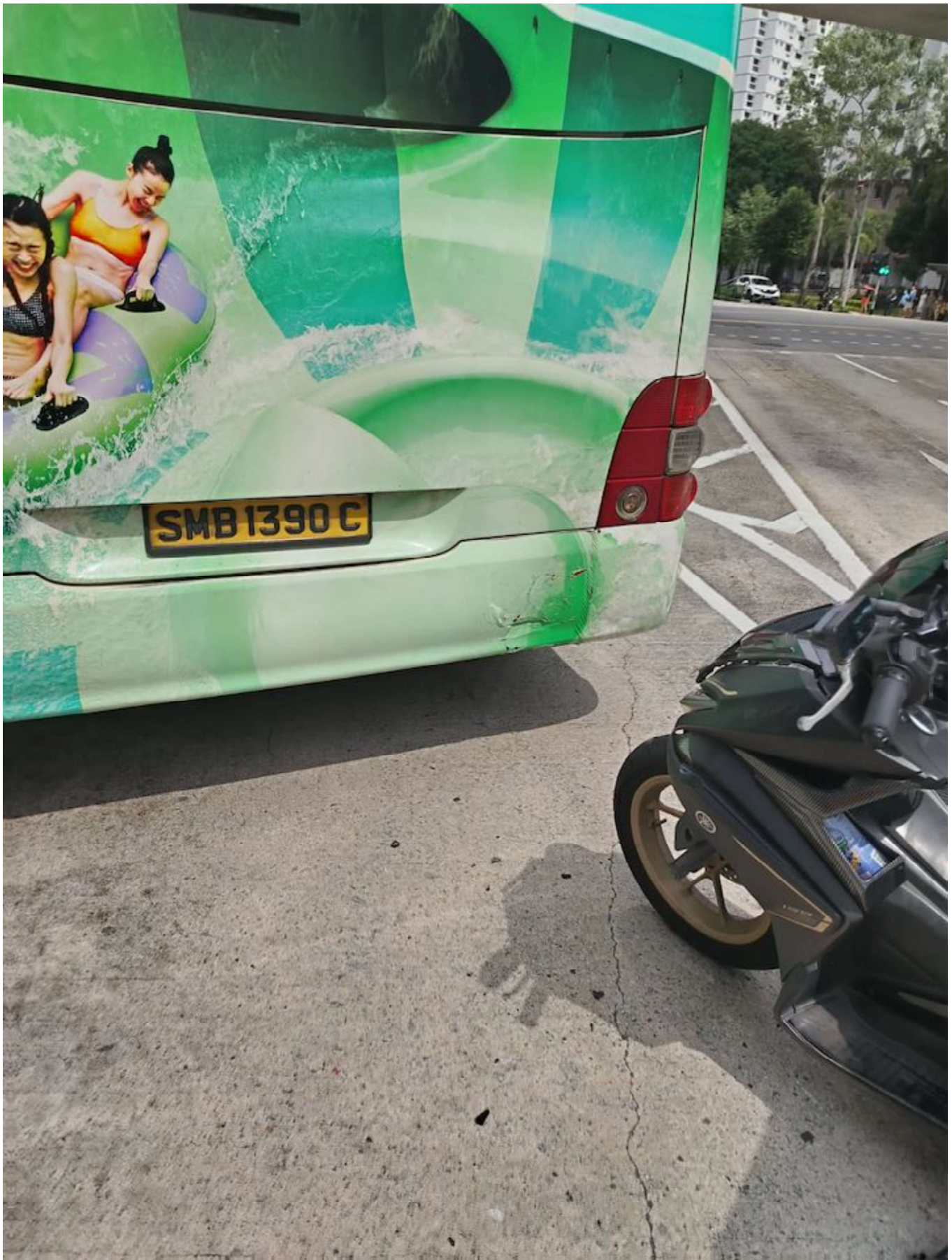
















**SINGAPORE  
POLICE FORCE**



T/20241216/7042

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

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Report No. T/20241216/7042

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/12/2024 12:38			Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>						
Name of Informant: Lim Poh Teong			Address:			
ID Type / ID No.: NRIC NC			Contact No.: Home/Office:		Mobile:	
Nationality:			Email:			
Sex: Male	Age:	Date of Birth:	Type of Informant: Rider			
Race:			Language: English			
Occupation: Motorcycle delivery man			Driving Licence Information: Class:		Date of Expiry:	

### General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive:	No	Date/Time of Accident:	15/12/2024 13:55	Type of Location:	X-Junction
Location:  JELEBU ROAD							
Weather: Sunny		Road Surface: Dry					
Traffic Flow:		Traffic Control: Pedestrian Crossing				Traffic Volume: No Traffic	
Type of Collision: Front Vehicle Reverse						Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBR6231S	Motorcycle	YAMAHA	AEROX GDR155A CVT ABS	Black		0
SMB1390C	Bus (Passenger)					0

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBR6231S	NTUC Income Insurance Co-Operative Limited	5148062038	02/09/2024	01/09/2025



**SINGAPORE  
POLICE FORCE**



T/20241216/7042

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

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Report No. T/20241216/7042

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	LIM POH TEONG	ID No.	
Related Vehicle	FBR6231S (Motorcycle)	Contact No.	
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 (MC)	NIL	Degree of Injury	NIL

**Brief Details.**

On 15 December 2024 about 1.52pm, i was riding on my motorcycle with registration number of FBR 6231S at Jelebu Road next to Hillion Residences.

When I am at the slip road entering main road of Jelebu road near lamp post 11S1 and stop behind the bus with registration number of SMB 1390C. Suddenly the bus reverse light was light up and reverse so i honk to alert the driver, but the bus already hit on my motorcycle and my motorcycle's mud guard stuck to his bumper. For my own safety I immediately exited my motorcycle without any injuries.

There isn't any injured person at the time of scene. Photos of the damage have been taken from both parties for insurance claim.



**SINGAPORE  
POLICE FORCE**

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



T/20241216/7042

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Report No. T/20241216/7042

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65476404

NP168

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

Date/Time:  
16/12/2024 12:38

Classification Of Case: