

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 ability.
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 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 Report	12/01/2018 11:09
Date Of Accident	13/09/2017 12:00
Exact Location Of Accident	JUNC OF BISHAN ST 21 & JALAN PEMIMPIN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	AY65U
Insured/Policyholder	
Name Of Registered Owner	SEAH KAH LIP
NRIC No	S7201022A
Email Address	PEANUT4600K@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96804372
Alternative Phone No	OTHERS-96804372

Vehicle Particulars

Manufacturer	PIAGGIO
Model	GILERA
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5052862544-05
Cover Note Number	

Driver

Name of Driver	SEAH KAH LIP
NRIC No	S7201022A
Date Of Birth	10/01/1972
Occupation	INDOOR
Date Of Driving Pass	20/07/1999
Driving Experience	18 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96804372
Fax Number	
Contact Number	OTHERS-96804372
Email Address	PEANUT4600K@GMAIL.COM

Address	266A BALESTIER ROAD
Postcode	329717
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20170919/7008

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLQ8720X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAVANYA CHIVOKULA
NRIC/Passport Number	S8063641E
Contact Number	9855827D
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	SEAH KAH LIP
Approximate Age	
Injuries Sustain	SERIOUS
Injured person in which vehicle?	AY65U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

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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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

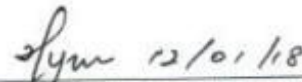


Policyholder's Signature

Date & Time:

11/1/18

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



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

JALAN PEMIMPIN

BISHAN ST 21

A - AY65U

B - SLQ8720X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the police report: T/20180919/7008

DECLARATION

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

[Signature]

Policyholder's Signature

Date & Time:

11/1/18

Sketch Plan #2

Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature] 12/01/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20170919/7008

2 of 3

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

Report No. T/20170919/7008

CONTINUATION OF REPORT

Rider			
Name	SEAH KAH LIP	ID No.	S7201022A
Related Vehicle	AY65U (Motorcycle)	Contact No.	96804372
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	13/09/2017	Date Discharge	13/09/2017
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious

Brief Details.

I was riding along Bishan st 21 from Marymount road towards Bishan st 11. The weather was sunny and the road was dry. Traffic condition was very light and there were hardly any cars along Bishan St 21. As I approach the junction of Bishan st 21 and Jln Pemimpin, I can see from a distance that there are cars turning right into Jln Pemimpin from Bishan st 21 in the opposite direction. As the traffic light is green in my favour, I proceed to cross the junction. It was at this time that the vehicle SLQ8720X driven by Ms Lavanya Chivokula suddenly move forward. Due to the short reaction time as I was already in the yellow box junction, I could not brake in time n collided into her passenger side. Ms Chivokula was apologetic and claim that she did not see me coming. An ambulance was called by a member of the public and I was send to the hospital with a broken wrist.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20170919/7008

1 of 3

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

Report No. T/20170919/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/09/2017 15:35	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: SEAH KAH LIP			Address: 266A BALESTIER ROAD SINGAPORE 329717		
ID Type / ID No.: NRIC NO / S7201022A			Contact No.: Home/Office: Mobile: 96804372		
Nationality: SINGAPORE CITIZEN			Email: peanut4600k@gmail.com		
Sex: Male	Age: 45	Date of Birth: 10/01/1972	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/09/2017 12:00	Type of Location: Straight Road
Location: JALAN PEMIMPIN Junction of Bishan St21and Jln Pemimpin				
Weather: Sunny		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
AY65U	Motorcycle	PIAGGIO	GILERA FUCCO 500 I.E.	Yellow		0

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20170919/7008

2 of 3

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

Report No. T/20170919/7008

CONTINUATION OF REPORT

Rider			
Name	SEAH KAH LIP	ID No.	S7201022A
Related Vehicle	AY65U (Motorcycle)	Contact No.	96804372
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	13/09/2017	Date Discharge	13/09/2017
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious

Brief Details.

I was riding along Bishan st 21 from Marymount road towards Bishan st 11. The weather was sunny and the road was dry. Traffic condition was very light and there were hardly any cars along Bishan St 21. As I approach the junction of Bishan st 21 and Jln Pemimpin, I can see from a distance that there are cars turning right into Jln Pemimpin from Bishan st 21 in the opposite direction. As the traffic light is green in my favour, I proceed to cross the junction. It was at this time that the vehicle SLQ8720X driven by Ms Lavanya Chivokula suddenly move forward. Due to the short reaction time as I was already in the yellow box junction, I could not brake in time and collided into her passenger side. Ms Chivokula was apologetic and claim that she did not see me coming. An ambulance was called by a member of the public and I was send to the hospital with a broken wrist.

Police Report



**SINGAPORE
POLICE FORCE**



T/20170919/7008

3 of 3

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

Report No. T/20170919/7008

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

Authentication Stamp
NP168

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

Date/Time:
19/09/2017 15:35

Classification Of Case:

Police Report



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 6259
www.police.gov.sg

Our Ref : TP/IP/48917/2017
Date : 22 September, 2017

SEAH KAH LIP
266A BALESTIER ROAD
SINGAPORE 329717

Dear Sir/Madam

ACCIDENT INVOLVING AY65U AND SLQ8720X ON 13.09.2017 AT 1206 HRS, ALONG BISHAN STREET 21 JUNCTION JALAN PEMIMPIN

I refer to the above accident.

2. Please be informed that we have completed our investigations which shows that the driver of SLQ8720X has committed an offence of Driving without reasonable consideration for other persons using the road under Section 65(b) Road Traffic Act, Chapter 276. Action has been initiated against the driver for the said offence.

3. If you have any queries, please contact the Investigation Officer, Muhammad Rizwan at telephone number 6547 6185.

Yours faithfully

SITI AFIAH
FOR HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE