

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 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	24/01/2018 09:08
Date Of Accident	20/01/2018 10:30
Exact Location Of Accident	COMMONWEALTH AVE TWDS CLEMENTI RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG6291B
Insured/Policyholder	
Name Of Registered Owner	FAH CHENG HUAT
NRIC No	S1747506A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90237805
Alternative Phone No	OTHERS-90237805

Vehicle Particulars

Manufacturer	YAMAHA
Model	-
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/17-370497-CA
Cover Note Number	

Driver

Name of Driver	FAH CHENG HUAT
NRIC No	S1747506A
Date Of Birth	15/09/1966
Occupation	INDOOR
Date Of Driving Pass	26/05/1994
Driving Experience	23 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90237805
Fax Number	
Contact Number	OTHERS-90237805
Email Address	NOEMAIL

Address	BLK 190A RIVERVALE DRIVE #10-980
Postcode	541190
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	COLLISION - CHANGE/CROSS LANE
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?	NO
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	SENGKANG NPC
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: F/20180123/2020

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	SBS5177S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLC8043R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	FAH CHENG HUAT
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FBG6291B
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan


SKETCH PLAN

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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:



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

 24/01/18

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

Sketch Plan #2

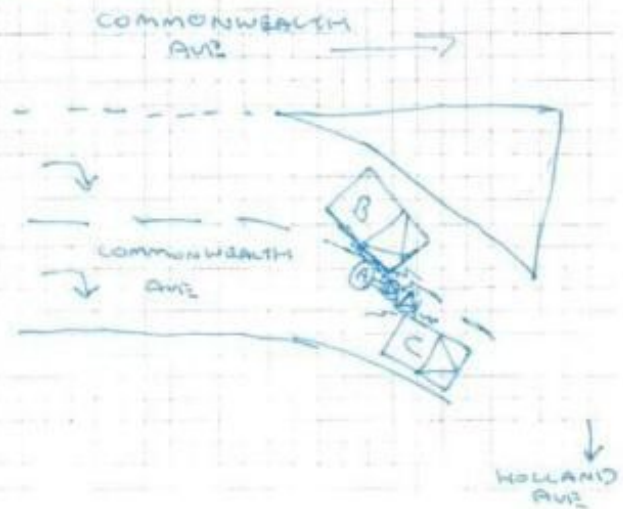
SKETCH PLAN

COMMONWEALTH ARE TOWARDS CURRENTLY GOOD DIRECTION

VEHICLE A - FBG 62918

VEHICLE B - SBS 51775

VEHICLE C - SLC 8043R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

I/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: _____

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

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



F/20180123/2020

1 of 2

POLICE REPORT (NP299)

Report No. F/20180123/2020

Police Station Of Origin
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Date/Time Report Made 23/01/2018 03:09	Vide Report No.	Station Diary No. 23
Name Of Informant FAH CHENG HUAT	Address APT BLK 190A RIVERVALE DRIVE #10-980 SINGAPORE 541190	
ID Type / ID No. NRIC NO / S1747506A	Contact No. Home/Office	Mobile 90237805
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Chef	Sex Male	Age 51
Institution/School Name	Date of Birth 15/09/1966	Race Chinese
Date/Time Of Incident 20/01/2018 00:00	Location Of Incident Along commonwealth avenue SINGAPORE	

Brief details.

On 20/01/2018, I was riding my motorbike vehicle registration number FBG6291B along commonwealth avenue heading towards clementi road direction on the right lane on a 2 lane 1 way traffic.

While travelling straight, suddenly a bus vehicle registration number SBS5177S on the left lane swerved into my lane and hit onto the handle of my motorbike and caused me to lose control which causes me to hit onto the left rear portion of a car vehicle registration number SLC8043R.

Signature Of Officer Recording The Report:

F / Sgt 2 TEO JIA HAO, KENNETH

Signature Of Informant:

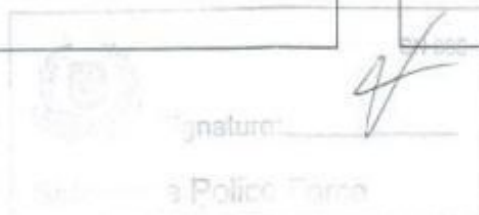
Signature Of Interpreter:
Not applicable

Date/Time:
23/01/2018 03:09

Officer In-Charge Of Case:
F / Sengkang N.P.C /
Sgt 2 NUR AMIRA BINTE ROZIMAN
Contact No.: 63438999

Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**

F/20180123/2020

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180123/2020

Hence, I am here to lodge this police report for insurance claiming purpose.

Signature Of Officer Recording The Report:

F / Sgt 2 TEO JIA HAO, KENNETH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

F / Sengkang N.P.C /
Sgt 2 NUR AMIRA BINTE ROZIMAN
Contact No.: 63438999

Authentication Stamp

Signature Of Informant:

Date/Time:
23/01/2018 03:09

Classification Of Case:



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**



F/20180123/2020

1 of 2

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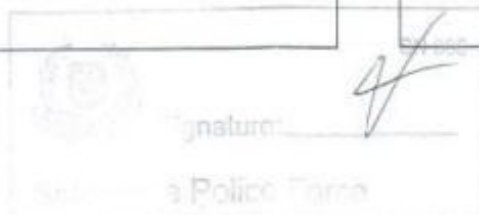
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Signature Of Interpreter: Not applicable	Date/Time: 23/01/2018 03:09
Officer In-Charge Of Case: F / Sengkang N.P.C / Sgt 2 NUR AMIRA BINTE ROZIMAN Contact No.: 63438999	Classification Of Case:

Authentication Stamp



Police Report



SINGAPORE
POLICE FORCE



F/20180123/2020

2 of 2

POLICE REPORT (NP299)

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Report No. F/20180123/2020

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F / Sgt 2 TEO JIA HAO, KENNETH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

F / Sengkang N.P.C /
Sgt 2 NUR AMIRA BINTE ROZIMAN
Contact No.: 63438999

Signature Of Informant:

Date/Time:
23/01/2018 03:09

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