

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	01/02/2018 10:15
Date Of Accident	28/01/2018 09:20
Exact Location Of Accident	PIE TOWARDS TUAS BEFORE KPE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBD4201R
Insured/Policyholder	
Name Of Registered Owner	CHAN YUEN KIAT MALCOLM
NRIC No	S9131796F
Email Address	MYGAMESONLINE1991@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98274854
Alternative Phone No	OTHERS-98274854

Vehicle Particulars

Manufacturer	YAMAHA
Model	FZ150I-150CC
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY TO WORK
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNMC2017-00000640
Cover Note Number	

Driver

Name of Driver	CHAN YUEN KIAT MALCOLM
NRIC No	S9131796F
Date Of Birth	11/09/1991
Occupation	OUTDOOR
Date Of Driving Pass	05/09/2013
Driving Experience	4 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98274854
Fax Number	
Contact Number	OTHERS-98274854
EEmail Address	MYGAMESONLINE1991@GMAIL.COM

Address	BLK 87 COMMONWEALTH CLOSE #08-37
Postcode	140087
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 - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	2
Passenger 1	NAME: : VICTOR TAN YUDA GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180128/2084

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	SLR7965H
Vehicle Make/Model/Colour	HONDA VEZEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEI KINK CHONG
NRIC/Passport Number	S7873158C
Contact Number	97976385
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 2

DETAILS OF INJURED PERSON 1

Name CHAN YUEN KIAT MALCOLM

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? FBD4201R

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

Accident Sketch Plan

SKETCH PLAN


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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.

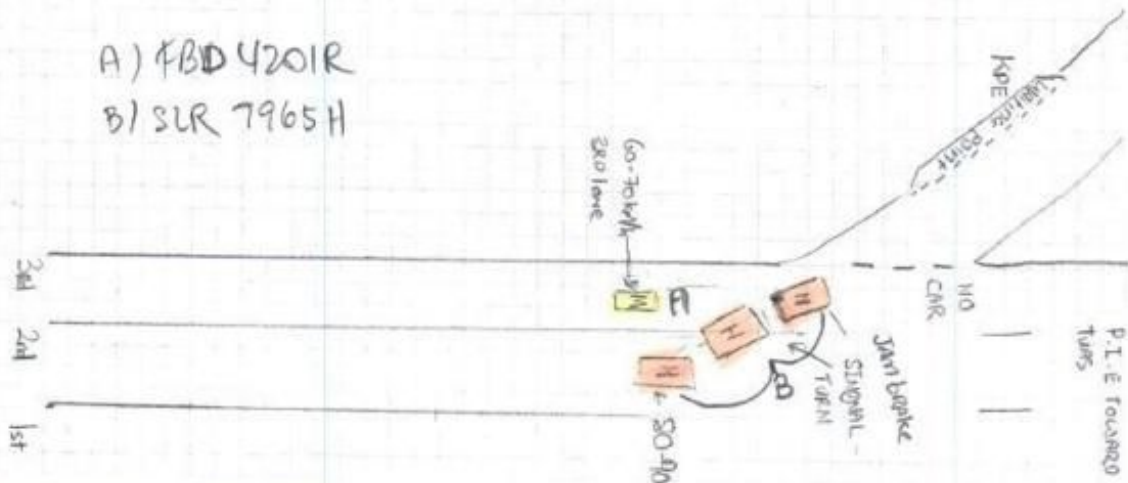

Policyholder's Signature
Date & Time: 31/1/2018 1455pm

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


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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

When I was riding on the 3rd lane, Me and my Pillion notice a Red colour Honda was driving past us and Suddenly he Signal and cut into my lane as soon I notice, I had maintain my speed And did not overtake out of the sudden the Car Jammed on the brake. I tried to Avoid but Knocked on the rear of the car. After the Impact I swerve to the side kurb and manage to stop my motorcycle. The driver claim that He did not want to knock me to the side and thats when he decided to brake, I replied him There was no obstruction AHEAD of you Could overtake and accelerate. If you choose to brake halfway when you enter the lane, did you do your blind spot & MIRROR check before you change lane? Police Report T/20180128/7084

DECLARATION

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

31/01/2018 1455pm
Policyholder's Signature
Date & Time:

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

01/02/2018
Reporting Centre Personnel's Signature
Name: ROPKI KATIBAB
NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180128/2084

1 of 4

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No. T/20180128/2084

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/01/2018 17:27	Vide Report No.:	Station Diary No.: 63
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Informant's Particulars			
Name of Informant: CHAN YUEN KIAT MALCOLM		Address: APT BLK 87 COMMONWEALTH CLOSE #08-37 SINGAPORE 140087	
ID Type / ID No.: NRIC NO / S9131796F		Contact No.: Home/Office: Mobile: 98274854	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 26	Date of Birth: 11/09/1991	Type of Informant: Rider
Race: Chinese		Language:	Institution / School Name:
Occupation: Enforcement officer		Driving Licence Information: Class: 2B Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 28/01/2018 09:20	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE towards Tuas before KPE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBD4201R	Motorcycle	YAMAHA	FZ150I	White	Slightly Damaged	1
SLR7965H	Car	HONDA	Honda Vezel	Red	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBD4201R	FWD Singapore Pte. Ltd	PNMC2017-00000640	24/08/2017	23/08/2018

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180128/2084

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

2 of 4

Report No. T/20180128/2084

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Pillion			
Name	Victor Tan Yuda	ID No.	S9311027G
Related Vehicle	FBD4201R (Motorcycle)	Contact No.	96414514
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
Rider			
Name	CHAN YUEN KIAT MALCOLM	ID No.	S9131796F
Related Vehicle	FBD4201R (Motorcycle)	Contact No.	98274854
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	28/01/2018	Date Discharge	28/01/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	Chei Kink Chong	ID No.	S7873158C
Related Vehicle	SLR7965H (Car)	Contact No.	97976385
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	Slight

Brief Details.

On 28/01/2018 at about 0920hrs, I was riding my vehicle bearing registration number FBD 4201 R at the speed of 60 to 70 km/h along PIE towards Tuas. I was riding on the third lane. There is a vehicle bearing registration number SLR 7965 H on the second lane. As I was riding, I noticed the said vehicle turn into my lane while still signaling at the same time however the driver jammed braked. I did not managed to break in time and my motorcycle collided into his rear vehicle. There is no vehicle in front of my motorcycle when he switch lane. I was then conveyed to Tan Tock Seng Hospital however my pillion was not injured.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180128/2084

Police Station Of Origin:
Geylang N.P.C.
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

3 of 4

Report No. T/20180128/2084

CONTINUATION OF REPORT

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180128/2084

Police Station Of Origin:
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132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

4 of 4

Report No. T/20180128/2084

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Staff Sgt MUHAMMAD FAZWAN BIN ADNAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
28/01/2018 17:27

Officer In Charge Of Case:
TP / GIT /
Staff Sgt YAN MINGSHENG DANIEL
Contact No.: 65476252

Classification Of Case:

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

