

## 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	12/02/2018 16:47
Date Of Accident	11/02/2018 18:45
Exact Location Of Accident	PIE SLIP RD INTO JLN ANAK BUKIT(FROM PIE EXIT 26A)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH7994U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NG TIAN RONG
NRIC No	S9417645Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92210971
Alternative Phone No	OFFICE-92210971

### Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R15 MANUAL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5097870182
Cover Note Number	-

### Driver

Name of Driver	NG TIAN RONG
NRIC No	S9417645Z
Date Of Birth	13/05/1994
Occupation	INDOOR
Date Of Driving Pass	03/01/2018
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92210971
Fax Number	
Contact Number	OFFICE-92210971
Email Address	NOEMAIL

Address	BLK 708 HOUGANG AVE 2 #02-77
Postcode	530708
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	
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	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 60 HOUGANG AVE 9 , <b>POSTCODE:</b> 538775 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4890999 - <b>FAX NO:</b> 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	SKU1176D
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	NG TIAN RONG
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	FBH7994U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident 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:

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

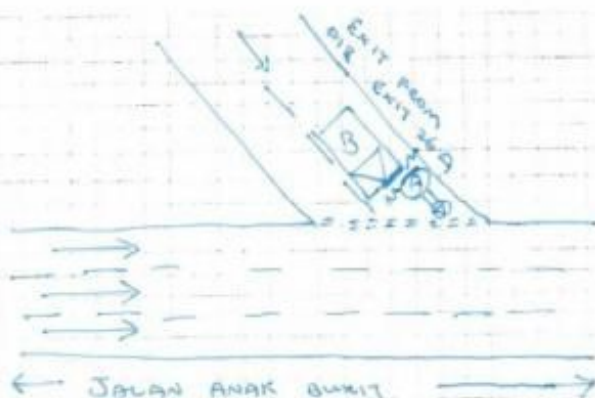
  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Accident Sketch Plan

### SKETCH PLAN

VEHICLE A - F04 7094 M

VEHICLE B - SKU 1176D



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT

REPORT NUMBER  
: T/20180212/2061

HONGKONG NPC

ACCIDENT INVOLVING

- VEHICLE A (FBI 79944)
- VEHICLE B (SKU 1176 D)

## 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.: \_\_\_\_\_



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180212/2061

1 of 4

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

Report No. T/20180212/2061

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/02/2018 12:02	Vide Report No.:	Station Diary No.: 81
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### Informant's Particulars

Name of Informant: NG TIAN RONG			Address: APT BLK 708 HOUGANG AVENUE 2 #02-77 SINGAPORE 530708	
ID Type / ID No.: NRIC NO / S9417645Z			Contact No.: Home/Office:	Mobile: 92210971
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 23	Date of Birth: 13/05/1994	Type of Informant: Rider	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Regular (Procom)			Driving Licence Information: Class: 2B,3 Date of Expiry:	

### General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/02/2018 18:45	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY  EXIT 26A just before Jalan Anak Bukit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH7994U	Motorcycle	YAMAHA	YZF-R15 MANUAL	Red	Seriously Damaged	0
SKU1176D	Car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Grey	Slightly Damaged	1

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180212/2061

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Police Station Of Origin:

Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

Report No. T/20180212/2061

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH7994U	NTUC Income Insurance Co-Operative Limited	5097870182	03/02/2018	02/02/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	NG TIAN RONG	ID No.	S9417645Z
Related Vehicle	FBH7994U (Motorcycle)	Contact No.	92210971
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	11/02/2018	Date Discharge	11/02/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight
<b>Witness</b>			
Name	Azmi	ID No.	NIL
Related Vehicle	NIL	Contact No.	85002846
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
<b>Driver</b>			
Name	TAN SAI YOON	ID No.	S0091110J
Related Vehicle	NIL	Contact No.	98267622
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

## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180212/2061

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Tel No: 1800-4890999

Report No. T/20180212/2061

### CONTINUATION OF REPORT

#### **Brief Details.**

On the 11/02/2018 at about 1845 hrs, I was riding along PIE towards Tuas Exit 26A just before Jalan Anak Bukit. I stopped at the left turn towards the main road and about 2 seconds later I was hit at the back by another vehicle, I propelled forward and landed on my right side with my motorcycle. The driver came out and apologized to me and there was a lorry who stopped and assisted me with my Bike and I exchanged particulars with the driver of said vehicle and took photos of the said accident. I refused their intention of calling for the ambulance then I called for a tow truck to retrieve my bike and then I made my way to the hospital. I have no CCTV installed on my helmet or my bike. that is all.



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180212/2061

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Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

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Report No. T/20180212/2061

## 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: F / Sgt 1 KANG YONG LER, JAMESON 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 12/02/2018 12:02
Officer In Charge Of Case: TP / AEIT / Sgt 2 YEO KIA HUAT Contact No.: 65476325	Classification Of Case:
Authentication Stamp NP168/  Singapore Police Force	

Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





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