

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	20/03/2018 09:20
Date Of Accident	11/03/2018 14:45
Exact Location Of Accident	ALONG NICOLL HIGHWAY TOWARDS ESPLANADE DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG5780M
Insured/Policyholder	
Name Of Registered Owner	LIEW BENG SENG (LIAO BINGCHENG)
NRIC No	S8239389G
Email Address	SEANBSLIEW@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96975270
Alternative Phone No	OTHERS-96975270

Vehicle Particulars

Manufacturer	DUCATI
Model	HYPERMOTARD 1100S-1.1 (M)
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5088252005-01
Cover Note Number	

Driver

Name of Driver	LIEW BENG SENG (LIAO BINGCHENG)
NRIC No	S8239389G
Date Of Birth	06/12/1982
Occupation	INDOOR
Date Of Driving Pass	16/02/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96975270
Fax Number	
Contact Number	OTHERS-96975270
Email Address	SEANBSLIEW@GMAIL.COM

Address	38 DOVER RISE #15-05
Postcode	138684
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	2
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	AIRPORT POLICE DIVISION
Police Station Address	ROAD: 35 AIRPORT BOULEVARD , POSTCODE: 819645 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65460000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180311/2109

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	SLF7031R
Vehicle Make/Model/Colour	HONDA VEZEL
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	LIEW BENG SENG (LIAO BINGCHENG)
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBG5780M
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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)**

(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.

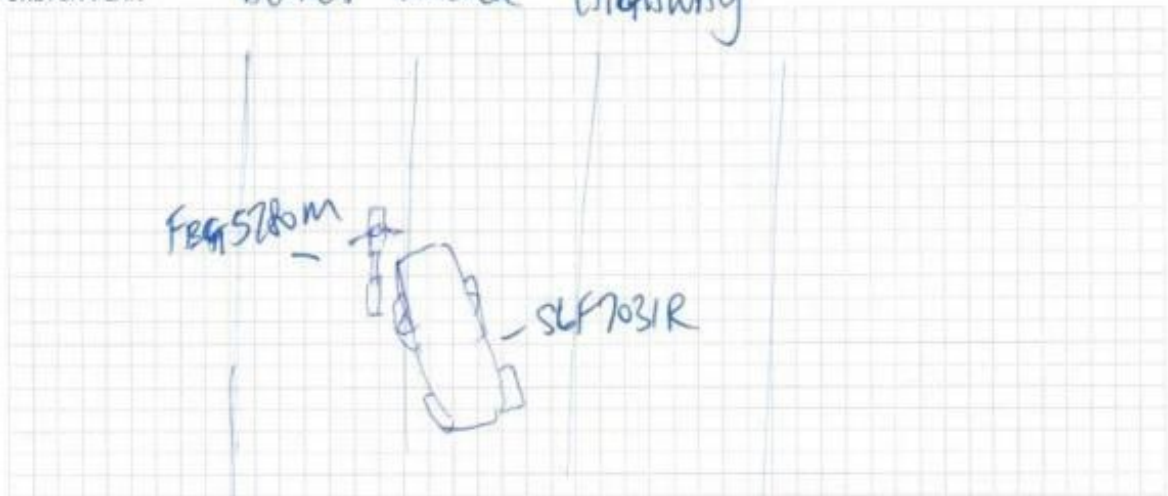
Driver's Signature
(If driver is not the policyholder)
Date & Time: 19 MAR 2018 17:26

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

Sketch Plan #2

SKETCH PLAN

Along Aurore Highway



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten note across the section:

pls refer to Police Report
7/2018 034/2109

DECLARATION

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

Policyholder's Signature
Date & Time:

Signature: [Signature]

Driver's Signature
(If driver is not the policyholder)
Date & Time: 5:00 PM 19/04/2018

Signature: [Signature]

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

Signature: [Signature]
Date: 19/04/2018

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180311/2109

1 of 3

Police Station Of Origin:
Airport Police, Airport Police Post
35 Airport Boulevard SINGAPORE 819645
Tel No: 1800-5460000

Report No: T/20180311/2109

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/03/2018 22:39	Vide Report No.: A/20180311/0131	Station Diary No.: 44
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Informant's Particulars

Informant's Particulars			Address:	
Name of Informant: LIEW BENG SENG			38 DOVER RISE #15-05 SINGAPORE 138684	
ID Type / ID No.: NRIC NO / S8239389G			Contact No.: Home/Office:	Mobile: 96975270
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 35	Date of Birth: 06/12/1982	Type of Informant: Rider	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Product designer			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/03/2018 14:45	Type of Location: Bridge
Location: Along Road 1 NICOLL HIGHWAY Along Nicoll Highway towards Esplanade Drive Lamp Post Number: 67F				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 90 Km/h		
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG5780M	Motorcycle	DUCATI	HYPERMOT ARD 1100S	Red	Seriously Damaged	1
SLF7031R	Car				Slightly Damaged	4

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBG5780M	NTUC Income Insurance Co-Operative Limited	5088252005-01	07/03/2018	06/03/2019

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180311/2109

Police Station Of Origin:
Airport Police, Airport Police Post
35 Airport Boulevard SINGAPORE 819645
Tel No: 1800-5460000

2 of 3

Report No. T/20180311/2109

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	LIEW BENG SENG	ID No.	S8239389G
Related Vehicle	FBG5780M (Motorcycle)	Contact No.	96975270
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	11/03/2018	Date Discharge	11/03/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On the above mentioned date, time and location, I was travelling at a speed of 30 km/hr at 3rd lane of the road and the white in colour Honda Vezel was travelling behind me at the 2nd lane. As the lane that I was travelling was merging to the main highway, the Honda Vezel came from the rear and side swipe onto me. During that point of time, I felt my right thigh was touching at the left side of the car and it hit onto my handle bar in which caused me to lose control and fell down from my bike.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20180311/2109

Police Station Of Origin:
Airport Police, Airport Police Post
35 Airport Boulevard SINGAPORE 819645
Tel No: 1800-5460000

3 of 3

Report No. T/20180311/2109

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:
APD /
Sgt 2 HO JIAN HUI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
11/03/2018 22:39

Officer In Charge Of Case:
TP / AEIT /
SSI 2 YEO GEAK ENG CECILIA
Contact No.: 65476404

Classification Of Case:

Authentication Stamp
NP168

SINGAPORE
POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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