

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	21/03/2018 14:18
Date Of Accident	20/03/2018 21:05
Exact Location Of Accident	TECH WHYE AVE OPEN CARPARK OUTSIDE MACDONALD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBD2961T
Insured/Policyholder	
Name Of Registered Owner	AU KAH FATT
NRIC No	S9221679I
Email Address	YODAKF@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98006647
Alternative Phone No	OTHERS-98006647

Vehicle Particulars

Manufacturer	DUCATI
Model	MONSTER 400-398CC (M)
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
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	5098091667
Cover Note Number	

Driver

Name of Driver	AU KAH FATT
NRIC No	S9221679I
Date Of Birth	20/06/1992
Occupation	INDOOR
Date Of Driving Pass	01/02/2017
Driving Experience	1 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98006647
Fax Number	
Contact Number	OTHERS-98006647
Email Address	YODAKF@GMAIL.COM

Address	BLK 663 CHOA CHU KANG CRESCENT #17-263
Postcode	680663
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
Was any body injured in the Accident?	NO
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 116 TECK WHYE LANE , POSTCODE: 680116 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7629999 - FAX NO: 67636615
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180320/2196

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	GBA6496J
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	FBE2361U
Vehicle Make/Model/Colour	YAMAHA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	TAY JIA JUN ROYCE
NRIC/Passport Number	
Contact Number	90401133
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	FBB2690K
Vehicle Make/Model/Colour	YAMAHA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MUHAMMAD HANIF BIN MOHAMMAD
NRIC/Passport Number	
Contact Number	96159911
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



- A) FBD2961T
- B) GBA6496J
- C) FBE23614
- D) FBB2690K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls refer to Police Report

7/2018 320/296

DECLARATION

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

Policyholder's Signature

Date & Time: 21/3/18

Driver's Signature

(If driver is not the policyholder)

Date & Time: 21/3/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

an 23/01/2018
Resli WATARS



**SINGAPORE
POLICE FORCE**



T/20180320/2196

Police Station Of Origin
Choa Chu Kang NPP
116 Teck Whye Lane #01-740 SINGAPORE
680116
Tel No 1800-7629999

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Report No. T/20180320/2196

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 20/03/2018 22:51	Vide Report No.	Station Diary No. 110
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Informant's Particulars

Name of Informant AU KAH FATT		Address APT BLK 663 CHOA CHU KANG CRESCENT #17-253 SINGAPORE 680663	
ID Type / ID No. NRIC NO / S92216791		Contact No. Home/Office Mobile: 98006647	
Nationality SINGAPORE CITIZEN		Email	
Sex Male	Age 25	Date of Birth 20/06/1992	Type of Informant Vehicle Owner
Race Chinese		Language English	Institution / School Name
Occupation Property officer		Driving Licence Information: Class 2B 2A Date of Expiry	

General Information of the Accident

Type of Accident Non-Injury Hit and Run	Drnk Drive No	Date/Time of Accident 20/03/2018 21:15	Type of Location Straight Road
Location Along Road 1 TECK WHYE AVENUE			
At Open Carpark outside Teck Whye Avenue MacDonald			
Weather Clear	Road Surface Dry	Road Speed Limit	
Traffic Flow Two Way	Traffic Control Not Controlled	Traffic Volume No Traffic	
Type of Collision Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
FBB2596K	Motorcycle	YAMAHA	T135	White	Whole Damaged	0
FBD2961T	Motorcycle	DUCATI	400 MONSTER	Red	Whole Damaged	0
FBE2361U	Motorcycle	YAMAHA	YZF-R15	Yellow	Whole Damaged	0
GBA6496J	Lorry	TOYOTA	DYNA 150 MANUAL	Silver	Whole Damaged	0

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



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Report No: 1/20180320/2196

Police Station Of Origin
Choa Chu Kang NPP
116 Teck Whye Lane #01-740 SINGAPORE
680116
Tel No: 1800-7629999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	Muhammad Hanif Bin Mohammad Salim	ID No	S9229080E
Related Vehicle	FBB2690K (Motorcycle)	Contact No	96159911
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
Vehicle Owner			
Name	AU KAH FATT	ID No	S9221679I
Related Vehicle	FBD2961T (Motorcycle)	Contact No	98006647
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B 2A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Vehicle Owner			
Name	Tay Jia Jun, Royce	ID No	NIL
Related Vehicle	FBE2361U (Motorcycle)	Contact No	90401133
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



**SINGAPORE
POLICE FORCE**



T/20180320/2196

Police Station Of Origin:
Choa Chu Kang NPP
116 Teck Whye Lane #01-740 SINGAPORE
680116
Tel No: 1800-7629999

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Report No. T/20180320/2196

CONTINUATION OF REPORT

Driver			
Name	Nil	ID No.	NIL
Related Vehicle	GBA6496J (Lorry)	Contact No.	Nil
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

Brief Details.

On 20/03/2018 at about 2105hrs, I parked my vehicle V1(FBD2961T) at the open carpark outside MacDonald. Everything was intact and nothing amiss, I then go into MacDonald.

On the same day at about 2115hrs informed by motorcycle owner of V2(FBB2690K), that my vehicle V1 was involved in a hit and run accident.

I went to my vehicle V1 and discovered my vehicle suffered from scratches and dents on the tank. My vehicle's right side mirror was broken into 2

pieces. I suspect that my engine compartment might also be damaged as there is sign of oil leakage.

Vehicle owner of V2 also informed that a passerby namely Hassan of HP 86618950 witnessed a Lorry (GBA6496J) collided onto V3(FBE2361U) then onto my vehicle V1 (FBD2961T) and onto V2 (FBB2690K) causing all V1- V3 to fall onto the ground suffering from some scratches and damages. Subsequently Hassan out of good will, assisted to carry up V1-V3.

Later, all of us then proceed to the nearest police station to lodge a police report for police investigation.

Sketch Plan #6



SINGAPORE
POLICE FORCE



T/20180320/2196

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Report No: T/20180320/2196

Police Station Of Origin
Choa Chu Kang NPP
116 Teck Whye Lane #01-740 SINGAPORE
680116
Tel No: 1800-7629999

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 do not have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report
J/
Sgt 2 SIAU JING YANG

Signature Of Interpreter

Signature Of Interpreter
Not applicable

Date/Time
2018/03/20 16:22:30

Officer In Charge Of Case
TP / HRT
SI ABDUL KAREEM BIN ABDUL HAKIM
Contact No: 95475079

Class/Case Officer Name

Authentication of Stamp
None

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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