

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	29/03/2018 17:50
Date Of Accident	27/03/2018 20:30
Exact Location Of Accident	TECK WHYE LANE TWDS CHOA CHU KANG CENTRAL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH5528X
Insured/Policyholder	
Name Of Registered Owner	LEE, KAH SENG
NRIC No	S8412418D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81265441
Alternative Phone No	OFFICE-91071630

Vehicle Particulars

Manufacturer	HONDA
Model	WW150
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MC/00232489/02
Cover Note Number	

Driver

Name of Driver	LEE JUN CHENG
NRIC No	S8412418D
Date Of Birth	28/04/1984
Occupation	OUTDOOR
Date Of Driving Pass	18/08/2010
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81265441
Fax Number	
Contact Number	OTHERS-91071630
EEmail Address	NOEMAIL

Address	BLK 102 GANGSA ROAD #05-25
Postcode	670102
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	WET

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	BUKIT PANJANG
Police Station Address	ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20180328/2162

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	SLJ3426R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHENG TIM SOON
NRIC/Passport Number	S0030309G
Contact Number	93863939
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	LEE JUN CHENG
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FBH5528X
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan #3



SINGAPORE
POLICE FORCE



T/20180328/2162

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Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No. T/20180328/2162

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	LEE JUN CHENG	ID No.	S8412418D
Related Vehicle	FBH5528X (Motorcycle)	Contact No.	81265441
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	28/03/2018	Date Discharge	28/03/2018
No. of Days granted Medical Leave	08	Degree of Injury	Slight
Driver			
Name	CHENG TIM SOON	ID No.	S0030309G
Related Vehicle	SLJ3426R (Car)	Contact No.	93863939
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 27th Mar 2018 at around 2015hrs, I was travelling along Teck Whye Lane towards Choa Chu Kang Central on my motorcycle, FBH5528X. I was travelling alone on the left lane.

While I was passing through an uncontrolled T-junction, just beside the temple, a white car (SLJ3426R) did not stop at the stop line and quickly moved out of the junction. I honk at him however it was too late. I tried to jam brake and my motorcycle skidded as I wanted to avoid the vehicle that moved out from the junction.

I fell to my left side and rolled for about 2 meters. The vehicle went off after making a right turn and stopped at the opposite side of the road.

Traffic Police and Ambulance were at scene. I was conveyed to Ng Teng Fong Hospital in conscious state.

I suffered abrasions on left and right hand and elbow, abrasions on left knee, fracture on hip bone and wrist bone and also strain on back of neck. I was given 8 days of hospitalization leave from Ng Teng Fong Hospital.

My motorcycle could not start at the point and some passer by assisted to push my motorbike at the nearest carpark.

Sketch Plan #4



SINGAPORE
POLICE FORCE



T/20180328/2162

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Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

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Report No. T/20180328/2162

CONTINUATION OF REPORT

I do not have any camera attached to my motorcycle and I am not sure if there is any CCTV at the vicinity. There were witnesses which the Traffic Police had already took their particulars down.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
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T/20180328/2162

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1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

1 of 4
Report No. T/20180328/2162

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/03/2018 17:18	Vide Report No.:	Station Diary No.: 84
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Informant's Particulars			
Name of Informant: LEE JUN CHENG		Address: APT BLK 102 GANGSA ROAD #05-25 SINGAPORE 670102	
ID Type / ID No.: NRIC NO / S8412418D		Contact No.: Home/Office: Mobile: 81265441	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 33	Date of Birth: 28/04/1984	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: OIL AND GAS SERVICE TECHNICIAN		Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 27/03/2018 20:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 TECK WHYE LANE CHOA CHU KANG CENTRAL NEAR TO THE TECK WHYE TEMPLE				
Weather: Clear		Road Surface: Wet	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: SELF SKIDDED			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH5528X	Motorcycle	HONDA	WW150	White	Seriously Damaged	0
SLJ3426R	Car	MAZDA	3	White	No Damage	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH5528X	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00232489/02	09/03/2015	21/07/2018

Police Report



**SINGAPORE
POLICE FORCE**



T/20180328/2162

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No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
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Related Vehicle	FBH5528X (Motorcycle)	Contact No.	81265441
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	28/03/2018	Date Discharge	28/03/2018
No. of Days granted Medical Leave	08	Degree of Injury	Slight
Driver			
Name	CHENG TIM SOON	ID No.	S0030309G
Related Vehicle	SLJ3426R (Car)	Contact No.	93863939
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

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T/20180328/2162

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Report No. T/20180328/2162

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Report No. T/20180328/2162

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: J / Staff Sgt NURSYAMIRA BINTE MAZLAN <i>AK</i>	Signature Of Informant: <i>AK</i>
Signature Of Interpreter: Not applicable	Date/Time: 28/03/2018 17:18
Officer In Charge Of Case: TP / GIT / SI THABAGESH JEYATHESH Contact No.: 65476232	Classification Of Case: SP113
Authentication Stamp NP168	