

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	15/05/2018 12:29
Date Of Accident	12/05/2018 21:25
Exact Location Of Accident	HOUGANG AVE 7 THE FLORIDA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBC2761J
Insured/Policyholder	
Name Of Registered Owner	TELSON WONG WEI JIE
NRIC No	S9535538B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93533593
Alternative Phone No	OTHERS-93533593

Vehicle Particulars

Manufacturer	HONDA
Model	CB400
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/18-377037-CA (TP)
Cover Note Number	

Driver

Name of Driver	TELSON WONG WEI JIE
NRIC No	S9535538B
Date Of Birth	11/09/1995
Occupation	INDOOR
Date Of Driving Pass	14/08/2017
Driving Experience	0 YEAR AND 8 MONTH
Gender	MALE
Mobile Number	+65-93533593
Fax Number	
Contact Number	OTHERS-93533593
Email Address	NOEMAIL

Address	BLK 203E COMPASSVALE ROAD #16-81
Postcode	545203
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 - OPENING DOOR OF VEHICLE
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	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT NO. T/20180513/7006 ATTACHED. (ATTENDED BY CHRISTINA)

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	SLM5045C
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	TELSON WONG WEI JIE
Approximate Age	

Injuries Sustain	REFER TO POLICE REPORT
Injured person in which vehicle?	FBC2761J
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan Pg. 1

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)**

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.

Tolson
Policyholder's Signature

Date & Time:

15 May 2018

1240pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20180513/7006

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20180513/7006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/05/2018 18:16	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: TELSON WONG WEI JIE		Address: APT BLK 203E COMPASSVALE ROAD #16-81 SINGAPORE 545203	
ID Type / ID No.: NRIC NO / S9535538B		Contact No.: Home/Office: Mobile: 93533593	
Nationality: SINGAPORE CITIZEN		Email: catherinetan_ct@yahoo.com	
Sex: Male	Age: 22	Date of Birth: 11/09/1995	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: 2A Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/05/2018 21:25	Type of Location: Straight Road
Location: HOUGANG AVENUE 7 entrance to 78 Hougang Avenue 7, The Florida				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Driver/passenger's vehicle door opened into path of other traffic			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBC2761J	Motorcycle	HONDA	CB400	Black	Seriously Damaged	0
SCM5045C	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBC2761J	MSIG INSURANCE (SINGAPORE) PTE. LTD.	72052430	07/12/2017	06/12/2018



**SINGAPORE
POLICE FORCE**



T/20180513/7006

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180513/7006

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	TELSON WONG WEI JIE	ID No.	S9535538B
Related Vehicle	FBC2761J (Motorcycle)	Contact No.	93533593
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2A Date of Expiry: NIL
Date Treatment	12/05/2018	Date Discharge	13/05/2018
No. of Days granted Medical Leave	03	Degree of Injury	Serious

Brief Details.

On or around 9.20 pm on 12 May 2018, I was riding on my way to 72A Hougang Avenue 7, The Florida. While on my way to my destination, I passed by 78 Hougang Avenue 7. From far, I noticed that there was a vehicle number SCM 5045C stopped by on the hump at the road. I continued my riding to overtake the vehicle very slowly as it was a hump on the road. While I was travelling beside the said vehicle, out of sudden, the passenger on the right opened the right door. I tried to avoid the vehicle but I was unable to do so due to the sudden opening of the vehicle door. Hence, I collided into the door and both my motorcycle and myself skidded on the right about a metre away. I lied flat on the roadside and was in great pain. Slowly I crawled to off the engine of my motorcycle. A helpful passer by assisted by calling the ambulance. I was conveyed to the Accident & Emergency Department at Tan Tock Seng Hospital thereafter.



**SINGAPORE
POLICE FORCE**



T/20180513/7006

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20180513/7006

CONTINUATION OF REPORT

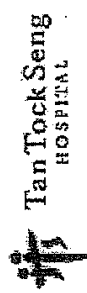
Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / TP1B / TAN CHIN YONG Contact No.: 65476178

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 13/05/2018 18:16
Classification Of Case:

Authentication Stamp
NP168



Tan Tock Seng Hospital
11 Jalan Tan Tock Seng, Singapore 308433
TEL: (65) 6256 6011

MEDICAL CERTIFICATE	ORIGINAL	TTSH18109548
NAME: TELSON WONG WEI JIE		NRIC: S953538B

Type of Medical Leave granted : **OUTPATIENT SICK LEAVE**

The above named is unfit for duty for a period of **3** day(s) from **12-May-2018** to **14-May-2018** inclusive

The certificate is not valid for absence from court attendance.

The above named attended for Examination/Treatment from **12-May-2018 22:35** to **13-May-2018 01:02**

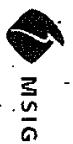
13-May-2018
Date

BINUYA BEMA GLORIA (11300Z)
Issued by

Emergency Department
Location

[Signature]
Signature

[Stamp]
A member of National Healthcare Group
Adding years of healthy life



CA 499629
MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412230)
 4 Shenton Way, #21-01, SGX Centre2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 www.msig.com.sg

CERTIFICATE OF INSURANCE

The Motor Vehicle (Third Party Risks and Compensation) Act (CAP 189) and the Road Traffic Act (Chapter 399) of Singapore
 The Motor Vehicle (Third Party Risks and Compensation) Act (CAP 189) and the Road Traffic Act (Chapter 399) of Singapore
 Or any Amendment, Act or Act passed in substitution thereof.

CERTIFICATE NO : MSB/VMT/18-37037-CA A0074-001/10085

SEA INSURED : TPL
 EXCESS : NIL

1. Index mark and Registration Number of Vehicle **PBC2761J** **399 c.c.**
2. Name of Policyholder **TELSON WONG WEI JIE**
3. Effective date of the Commencement of Insurance for the purposes of the Act **120/PK 07/12/2017**
4. Date of Expiry of Insurance **06/12/2018**
5. Persons or Classes of Persons entitled to drive **a. The Policyholder.**

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

7. The Policy does not cover

1. for hire or reward.
2. Use for racing, pace-making, reliability trial or speed-testing.
3. Use for the carriage of goods (other than samples) in connection with any trade or business.
4. Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Ref: CN: 72032430

COMMERCIAL AGENCY PTE. LTD.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: FBC 2761J
Name (as shown in NRIC) : Telson Wong Wei Tie NRIC/FIN/Passport No : S953538B
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 93533593
Email Address : _____
Date of Accident : 12/5/18 Time of Accident : 21:25
Place of Accident : Hway Ave 7 the Florida
Insurance Company: MSIG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Third party vehicle number should be
SLM 5045C

Telson
Policyholder / Driver's Signature
Date: 18 MAY 2018

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

