

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	28/05/2018 17:50
Date Of Accident	27/05/2018 14:30
Exact Location Of Accident	JUNC OF STEVENS ROAD AND DRAYCOTT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG2664K
Insured/Policyholder	
Name Of Registered Owner	HO GUAT LOK
NRIC No	S2592730C
Email Address	HOGUATLOK@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97552325
Alternative Phone No	OTHERS-97552325

Vehicle Particulars

Manufacturer	SYM
Model	GTS200
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	REPORTING ONLY
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	5054288108-06
Cover Note Number	

Driver

Name of Driver	HO GUAT LOK
NRIC No	S2592730C
Date Of Birth	25/02/1955
Occupation	INDOOR
Date Of Driving Pass	02/12/1978
Driving Experience	39 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97552325
Fax Number	
Contact Number	OTHERS-97552325
Email Address	HOGUATLOK@YAHOO.COM.SG

Address	BLK 705 WOODLANDS DRIVE 40 #04-24
Postcode	730705
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	
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	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : J/20180527/2110

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	SJM5750Z
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 HO GUAT LOK

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? FBG2664K

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

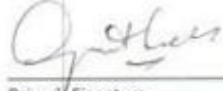
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

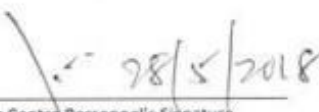
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


Policyholder's Signature

Date & Time:

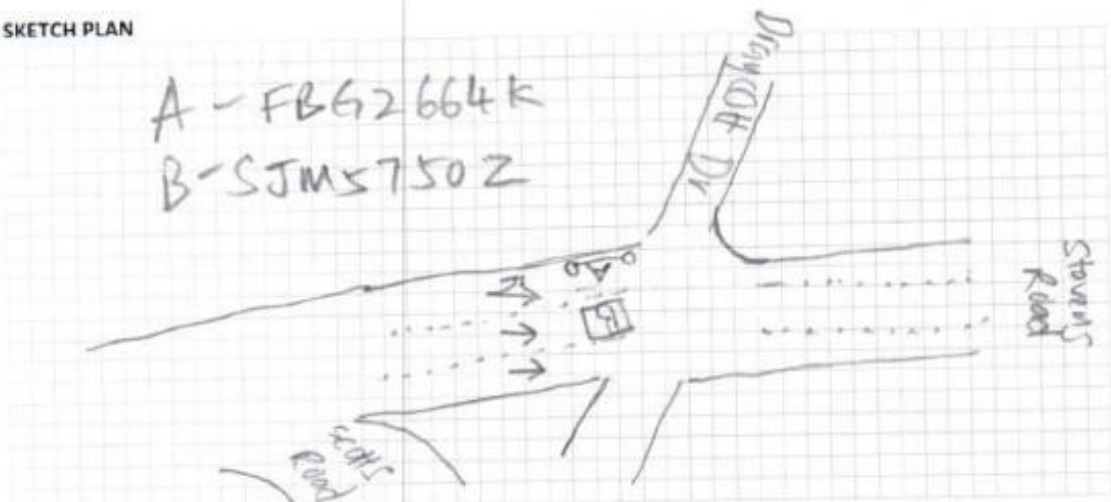

Driver's Signature

(If driver is not the policyholder)
Date & Time:


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

Sketch Plan #2

SKETCH PLAN



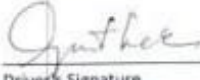
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

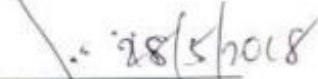
Pls Refer to the Police Report
J/20180527/2110

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.:



**SINGAPORE
POLICE FORCE**

POLICE REPORT (NP299)

Police Station Of Origin
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999



J/20180527/2110

1 of 2

Report No. J/20180527/2110

Date/Time Report Made 27/05/2018 17:34		Vide Report No.		Station Diary No. 172	
Name Of Informant HO GUAT LOK		Address APT, BLK 705 WOODLANDS DRIVE 40 #04-24 SINGAPORE 730705			
ID Type / ID No. NRIC NO / S2592730C		Contact No. Home/Office		Mobile 97552325	
Nationality MALAYSIAN		Email Address			
Occupation Chef		Sex Male	Age 63	Date of Birth 25/02/1955	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 27/05/2018 14:30 - 27/05/2018 15:00		Location Of Incident SCOTTS ROAD SINGAPORE Junction of Stevens Road and Draycott Road			

Brief details.

I was travelling on the 3rd lane along Scotts Road towards Stevens Road on my motorcycle (FBG2664K), approaching the junction near Stevens Road and Draycott Road, a car (SJM5750Z) from the 2nd lane swerve in to the left which causes me to brake however the car (SJM5750Z) front left bumper hit my rear right side of my motorcycle (FBG2664K) and causes damages to it.

No one was injured at that point of time. No police or ambulance was at scene. No one was conveyed to

Signature Of Officer Recording The Report:

J / Sgt 2 JONATHAN LOW JIN HUANG
Sgt RUHAIDI BIN HASSAN

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
SI RUHAIDI BIN HASSAN
Contact No.: 67910000

Signature Of Informant:

Date/Time:
27/05/2018 17:34

Classification Of Case:

Authentication Stamp





**SINGAPORE
POLICE FORCE**



J/20180527/2110

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180527/2110

the hospital. I wish to inform that the driver of the said car intended to compensate the accident, however we did not exchange particular. I wish to inform that I have only the driver's contact number (HP: 91013321) and the driver only informed that his name is Mr Goh.

I am lodging this report for my own recording purposes at the moment.

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J / Sgt 2 JONATHAN LOW JIN HUA 11
Sgt RUHAIDI BIN HASSAN 67910000

Signature Of Interpreter:
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Classification Of Case:



Signature :

SN 130

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Police Report



**SINGAPORE
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J/20180527/2110

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Police Report



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