

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	07/06/2018 11:31
Date Of Accident	04/06/2018 23:45
Exact Location Of Accident	BUKIT PANJANG ROAD TOWARDS CHOA CHU KANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ827Z
Insured/Policyholder	
Name Of Registered Owner	GOH AH BENG
NRIC No	S1052575F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94885581
Alternative Phone No	OTHERS-94885581

Vehicle Particulars

Manufacturer	HONDA
Model	WAVE 125-R-125CC (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
Fleet Policy	NO
Policy Number	5094645249
Cover Note Number	

Driver

Name of Driver	GOH AH BENG
NRIC No	S1052575F
Date Of Birth	23/11/1949
Occupation	INDOOR
Date Of Driving Pass	22/10/1973
Driving Experience	44 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94885581
Fax Number	
Contact Number	OTHERS-94885581
Email Address	NOEMAIL

Address	BLK 234 BUKIT PANJANG RING ROAD #04-13
Postcode	670234
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 - HEAD TO REAR
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?	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

PLEASE REFER TO POLICE REPORT/20180605/2159

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	SLP7775A
Vehicle Make/Model/Colour	MERCEDES A45
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHUA JIA EN, KEITH
NRIC/Passport Number	S8835059F
Contact Number	93873713
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name	GOH AH BENG
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FZ827Z
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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.

X 

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.:

Accident Sketch Plan

SKETCH PLAN

Vehicle A: FZ8
Vehicle B: SLP7

Scott moving fast

Start

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report. T/20180605/2159

DECLARATION

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

✓ 吳

Policyholder's Signature
Date & Time:

Driver's Signature: _____
(If driver is not the policyholder)
Date & Time: _____

Reporting Centre Personnel's Signature
Name: Rodolfo V. H. H.
NRIC/FIN No.: 07/06/2018

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180605/2159

1 of 3

Report No. T/20180605/2159

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/06/2018 21:40	Vide Report No.: T/20180605/2009	Station Diary No.: 185
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Informant's Particulars

Name of Informant: GOH AH BENG	Address: APT BLK 234 BUKIT PANJANG RING ROAD #04-13 SINGAPORE 670234		
ID Type / ID No: NRIC NO / S1052575F	Contact No.:	Mobile: 94885581	
Nationality: SINGAPORE CITIZEN	Home/Office:		
	Email:		
Sex: Male	Age: 68	Date of Birth: 23/11/1949	Type of Informant: Rider
Race: Chinese	Language:	Institution / School Name:	
Occupation: Cleaner in offices and other establishments nec	Driving Licence Information: Class: 2B		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/06/2018 23:45	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BUKIT PANJANG ROAD CHOA CHU KANG ROAD After traffic junction of Bangkit Road and Bukit Panjang Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FZ827Z	Motorcycle	HONDA	WAVE 125R A	Blue	Slightly Damaged	0
SLP7775A	Car	MERCEDES BENZ	A45	Grey		0

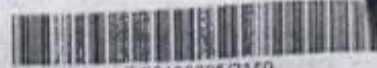
Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FZ827Z	NTUC Income Insurance Co-Operative Limited	5094645249	06/10/2017	05/10/2018

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180605/2159

2 of 3

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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Rider		ID No.	S1052575F
Name	GOH AH BENG		
Related Vehicle	FZ827Z (Motorcycle)	Contact No.	94885581
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	05/06/2018	Date Discharge	05/06/2018
No. of Days granted Medical Leave	07	Degree of Injury	Slight
Driver			
Name	CHUA JIA EN, KEITH	ID No.	S8835059F
Related Vehicle	SLP7775A (Car)	Contact No.	93873713
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 04/06/2018 at about 2345 Hrs, I was riding my motorbike FZ827Z travelling along Bukit Panjang Road towards Choa Cho Kang Road on the first lane of 3. Upon reaching the junction of Bukit Panjang Road and Bangkit Road I saw that the traffic light was green. Thus, I proceeded straight when suddenly V2 a silver Mercedes A45 SLP7775A collided onto the rear of my bike causing me to lose balance and fall. I then proceeded to Mount Alvernia for treatment as I suffered abrasion on my hands and legs and was given 7 days of MC.

T/201800062159

CONTINUATION OF REPORT

Informant is not able to provide sketch plan

Classification Of Case

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

