

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 15:39
Date Of Accident	06/06/2018 18:05
Exact Location Of Accident	ALONG BISHAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FT3155R
Insured/Policyholder	
Name Of Registered Owner	TENG KAM CHOY
NRIC No	S2531992C
Email Address	PALUSY@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97576095
Alternative Phone No	OFFICE-97576095

Vehicle Particulars

Manufacturer	HONDA
Model	CB400
Exact Purpose for which vehicle was being used at time of accident	
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	P0385183
Cover Note Number	

Driver

Name of Driver	TENG KAM CHOY
NRIC No	S2531992C
Date Of Birth	12/03/1961
Occupation	INDOOR
Date Of Driving Pass	13/11/1979
Driving Experience	38 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97576095
Fax Number	
Contact Number	OFFICE-97576095
E Mail Address	PALUSY@YAHOO.COM.SG

Address	BLK 203 BISHAN ST 23 #09-441
Postcode	2057
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	
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	TOA PAYOH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , POSTCODE: 319194 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2519999 - FAX NO: 63548749
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20180607/2073.

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	GBG6711G
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	GOEI EK HWA
NRIC/Passport Number	S0472178J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number PC1143J
Vehicle Make/Model/Colour
Details Of Properties VEHICLE C
Vehicle Category COMMERCIAL VEHICLE
Name of Driver YAAKOB BIN MOHD SHARIP
NRIC/Passport Number S1211494Z
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SGP663J
Vehicle Make/Model/Colour
Details Of Properties VEHICLE D
Vehicle Category PRIVATE CAR
Name of Driver HENRY YUEN PENG YIP
NRIC/Passport Number S0697767G
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TENG KAM CHOY
Approximate Age
Injuries Sustain
Injured person in which vehicle? FT3155R
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
6. The 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 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.

x 

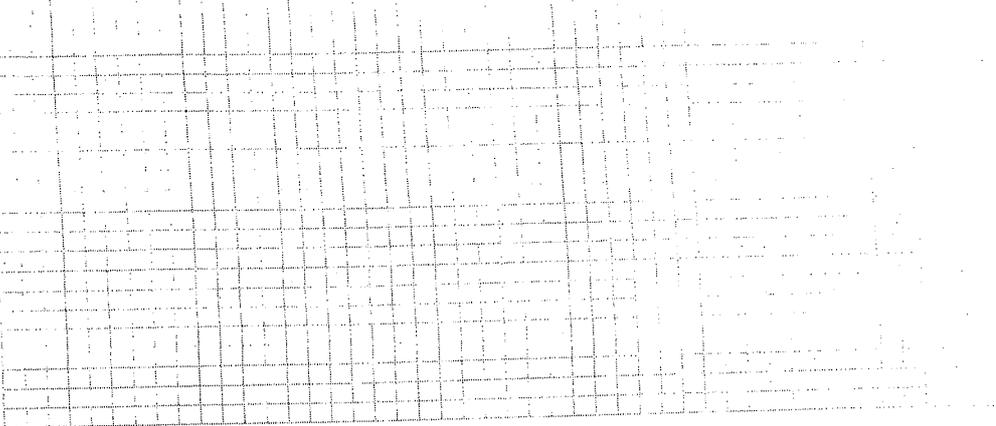
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police Report no T/20180607/2073

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.:

SPRINT/STANDARD FORM 100

LETTER OF UNDERTAKING

I/We, LENG BAN CHAY, the owner of vehicle no. 77 3155R

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within **14(fourteen) days of occurrence or discovery of damage.**

My/Our Third Party claim is handle by my/our preferred workshop, _____

Signed and Acknowledge by:



.....

.....
Company Stamp

07/06/2018
.....
Date

Sketch Plan #4 Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180607/2073

1 of 4

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

Report No. T/20180607/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/06/2018 12:40	Vide Report No.:	Station Diary No.: 77
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Informant's Particulars

Name of Informant: TENG KAM CHOY		Address: APT BLK 203 BISHAN STREET 23 #09-441 SINGAPORE 570203	
ID Type / ID No.: NRIC NO / S2531992C		Contact No.: Home/Office: Mobile: 97576095	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 57	Date of Birth: 12/03/1961	Type of Informant: Rider
Race: Chinese		Language:	Institution / School Name:
Occupation: ENGINEER		Driving Licence Information: Class: 2B,2A,3,4,5 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/06/2018 18:05	Type of Location: Straight Road
Location: Along Road 1 BISHAN ROAD Bishan Road towards Ang Mo Kio				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
FT3155R	Motorcycle	HONDA	CB400S.F.H. V	Silver	Seriously Damaged	0
GBG6711G	Lorry					0
PC1143J	Bus/Coach/Mi nibus					0
SGP996J	Car					0



**SINGAPORE
POLICE FORCE**



T/20180607/2073

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

2 of 4
Report No. T/20180607/2073

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FT3155R	AXA INSURANCE SINGAPORE PTE LTD	P0385183	17/04/2018	16/04/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	TENG KAM CHOY		ID No.	S2531992C
Related Vehicle	FT3155R (Motorcycle)		Contact No.	97576095
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4,5 Date of Expiry: NIL
Date Treatment	07/06/2018		Date Discharge	07/06/2018
No. of Days granted Medical Leave	05		Degree of Injury	Slight
Driver				
Name	GOEI EK HWA		ID No.	S0472178J
Related Vehicle	GBG6711G (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
Driver				
Name	YAAKOB BIN MOHD SHARIP		ID No.	S1211494Z
Related Vehicle	PC1143J (Bus/Coach/Minibus)		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



**SINGAPORE
POLICE FORCE**



T/20180607/2073

3 of 4

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

Report No. T/20180607/2073

CONTINUATION OF REPORT

Driver			
Name	HENRY YUEN PENG YIP		ID No. S0697767G
Related Vehicle	SGP996J (Car)		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 06/06/2018 at about 1805hrs, I was riding along Bishan Road going towards Ang Mo Kio. I was travelling in the central lane. One lorry, GBG6711G(V2) was travelling in front of me. V2 cut to the left lane. Out of a sudden, he cut back to my lane and jam break. I could not stop in time and therefore hit on his right rear. That impact causes me to fall off my vehicle.

Afterwhich, I discovered that is an accident between one mini bus and car in front of the mini bus and the lorry had hit on to the mini bus. I wish to state that the V2 cut back in to my lane in a fast speed and break that cause me could not react in time. After the accident, I felt pain at my shoulder and neck area. I went to mount Alvernia hospital and was given 5 days medical leave.

Accident Sketch Plan Pg. 1



SINGAPORE
POLICE FORCE



T/20180607/2073

Police Station Of Origin:
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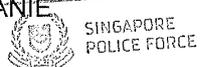
CONTINUATION OF REPORT

4 of 4
Report No. T/20180607/2073

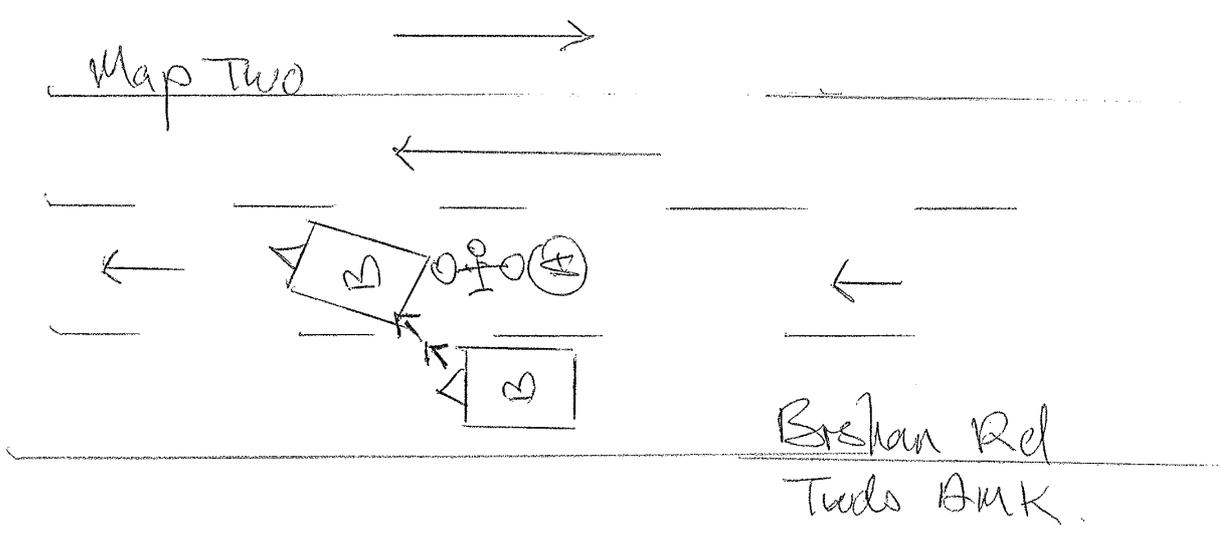
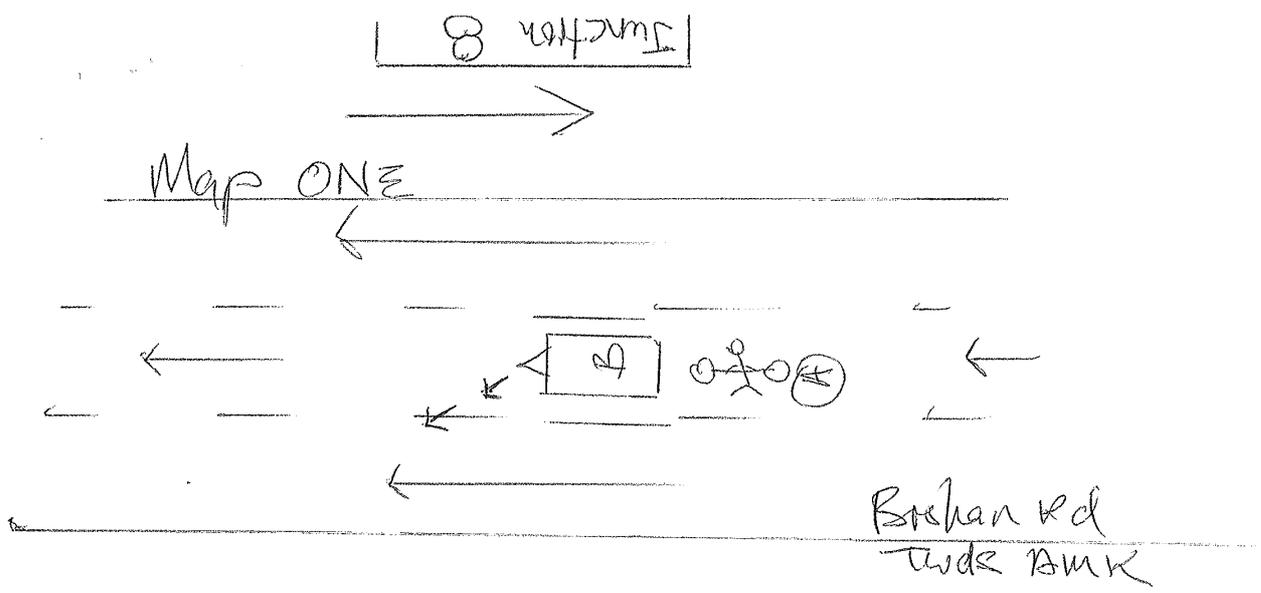
Sketch Plan

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: E / Sgt 1 LIM JIAN HONG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 07/06/2018 12:40
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case: <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">SN 168</div>
Authentication Stamp NP168	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">  SINGAPORE POLICE FORCE </div> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> SIGNATURE </div>

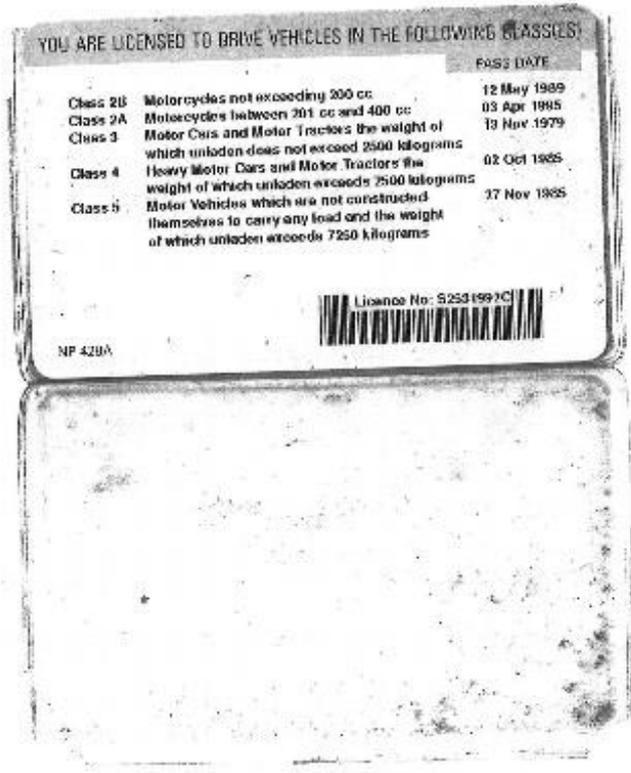
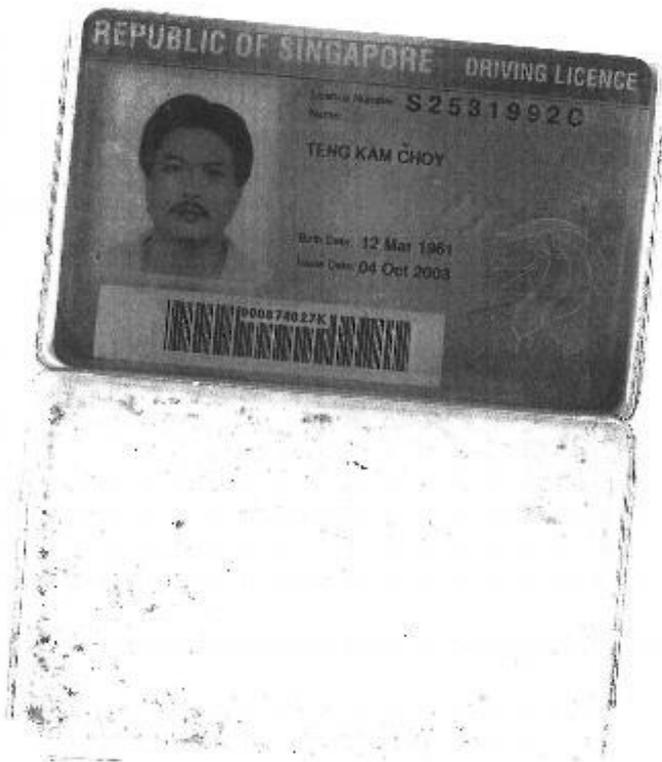
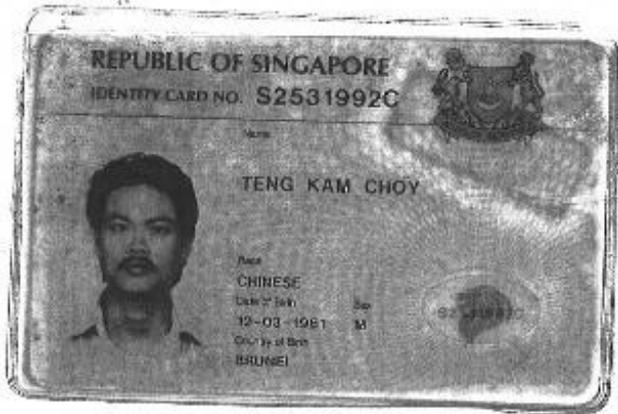
Accident Sketch Plan Pg. 1



Date: 06062018
 Time: 1805 hrs
 place: Braham Rd towards AMK.
 Veh's: A) FT 3155R
 B) CBA 6711G.
 C) PC 1143J
 D) O.P. 221T

THE HON. COMMISSIONER OF POLICE, JOINT
 POLICE OFFICER, SINGAPORE
 POLICE OFFICER, SINGAPORE COMMUNITY CLUB
 SINGAPORE

Driving License



INSURANCE

MBS

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068511
 Customer Service Centre #B1-01
 Tel: (65) 63387288 Fax: (65) 63382922
 Website: www.axa.com.sg
 GST Registration Number: 100903512M
 customer.service@axa.com.sg



CERTIFICATE OF INSURANCE

Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 199) Motor Vehicles (Third Party Risks and Compensation) Rules, 1965 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia)

CERTIFICATE NO. : VMO/P0385183 Account No. : 03375
 Coverage : Third Party Only
 Sum Insured : NIL
 Name of Policy Holder : TENG KAM CHOY
 Vehicle Registration No. : FT3155R
 Period of Insurance : From 17/04/2018 To 16/04/2019 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

- (a) The Policyholder
- (b) TENG KAM CHOY

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.

LIMITATIONS AS TO USE*

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

The Policy does not cover:

- a) Use for hire and reward
- b) Use for racing, pace-making, reliability trial or speed-testing
- c) Use for the carriage of goods (other than samples) in connection with any trade or business
- d) Use for any purpose in connection with the Motor Trade

(11)

* Limitations rendered inoperative by Section 3 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 199) 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 199) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGRAN09 on 12/03/2018

IMPORTANT :

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 189)

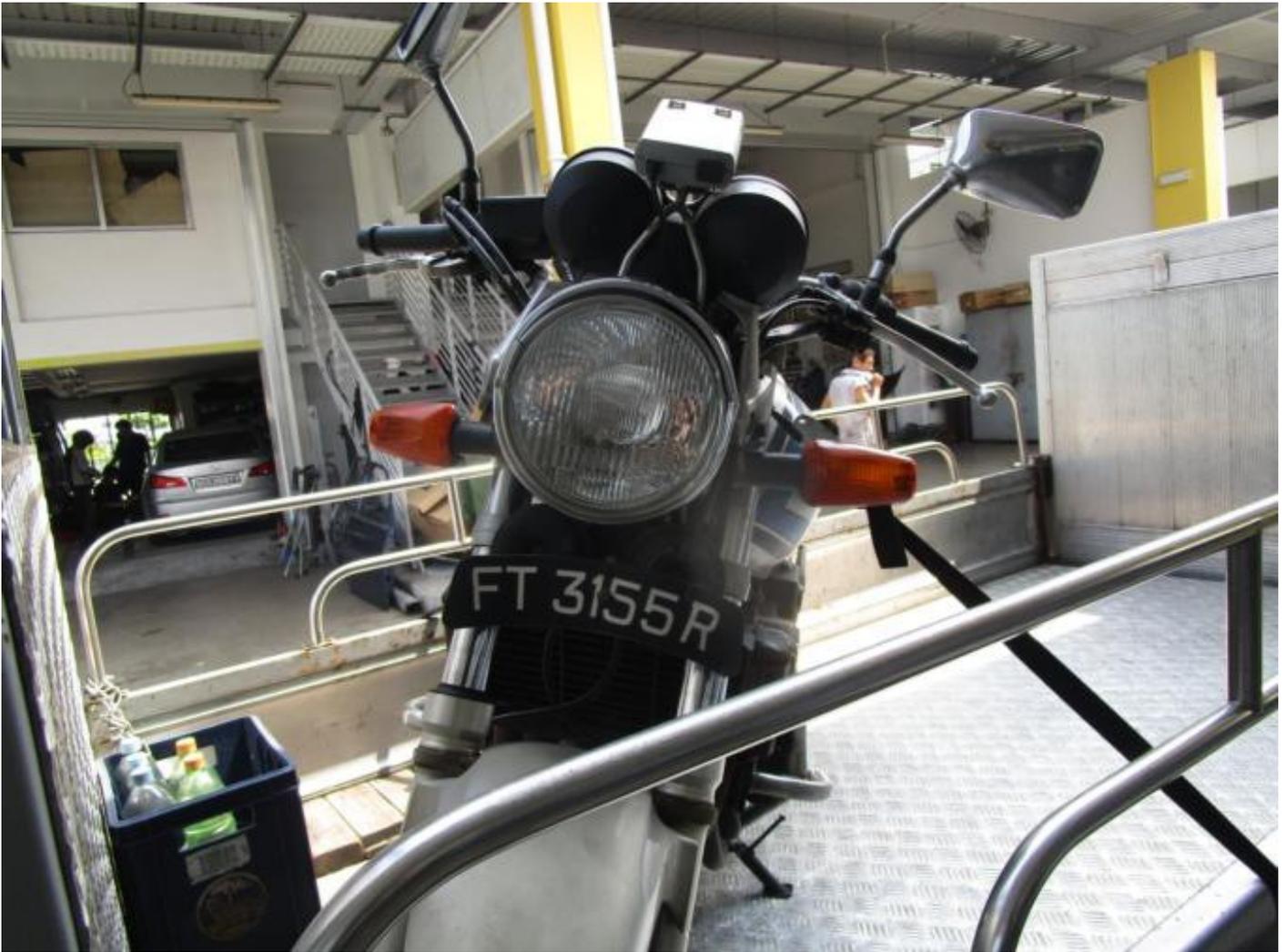
The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and endorsement etc.

AXA INSURANCE AGENCIES PTE LTD
 (1) - 1/F DEPARTMENT
 80 MacRae Road
 #02-01 Wisma Galah
 Singapore 248048
 Tel: 6454 4388 Fax: 6453 4466
 Email: tomson@axa.com.sg

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

