#### 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 witholding 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.

aforesaid.	I hereby consent to the archiving of this report at the centre and to copies of the report being made available				
	ACCIDENT STATEMENT				
Date Of Report	06/07/2018 09:21	(February 1997)			
Date Of Accident	01/07/2018 20:40				
Exact Location Of Accident	WOODLANDS AVE 5 > WOODLANDS AVE 2				
Country/State of Loss	SINGAPORE				
	DETAILS OF OWN VEHICLE				
Vehicle Registration Number	FW7510G				
Insured/Policyholder					
Name Of Registered Owner	ZEFFLIN LOK YEE YANG				
NRIC No	S9516085I				
Email Address	NOEMAIL				
Mobile Phone No	(LOCAL) +65-97509378				
Alternative Phone No	OFFICE-97509378				

Vehicle Particulars

Manufacturer HONDA

Model CB400SF2J-399CC

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 5096215409

Cover Note Number

Driver

Name of Driver ZEFFLIN LOK YEE YANG

NRIC No S9516085I Date Of Birth 07/05/1995 Occupation **INDOOR** Date Of Driving Pass 28/11/2017

**Driving Experience** 0 YEAR AND 7 MONTH

Gender MALE -

Mobile Number (LOCAL) +65-97509378

Fax Number

Contact Number OFFICE-97509378

EMail Address NOEMAIL Address

BLK 202 MARSILING DRIVE #03-140

Postcode

730202

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

NO COLLISION

Weather Conditions

RAINING

WET Road Surface

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

NO

Was any injured conveyed to hospital by

ambulance?

YES YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

Police Station Address

WOODLANDS WEST NPC

ROAD: 9 MARSILING LANE, POSTCODE: 739146, COUNTRY:

SINGAPORE

TEL NO: - FAX NO:

Police Station Contact

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

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

GX9013U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

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	ZEFFLIN LOK YEE YANG	
Approximate Age		
Injuries Sustain		
Injured person in which vehicle?	FW7510G	
Were seat belts worn?		
Was this injured conveyed to hospital by ambulance?	YES	
Address		
Postcode		

#### SKETCH PLAN

### IMPORTANT NOTICE

- Piease report correctly the details of the accident to spend up the clears process.
- 7. This horm must be completed by the Policyholder and/or the Authorised Oriver.
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- By the longment of the report to the insurers, you hereby consent to the archiving of the report at the centre and to copies of the report bring made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

) understand, asknowledge, agree and consern that

- (a) My insured, my workshop and the General Insurance Association of Singapore ("GIA") may/are potential to collect, use, disclose and/or process my personal patential information set out in this (form) and any other personal information provides by my or processed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurers who have insured vertically invalved in this accident shall be collectively retenred to as the "Insurers", the Insurers lawyors/low limits, the Morettery Authority of Singapore and any relevant government agency/authority (such as the police), for the durphyors, bit:
  - (i) processing, handling analog dealing with my claims including the settlement of the claims and any necessary exect put and relating to the claims;
  - (a) it vestigating the accident and/or my caires.
  - his carrying out analyse dealing with my instructions or responding to any enquiries by one;
  - In cominitaring my dains (including the mailing of correspondence, statements, invoices, reports or notices to too, which could evolve disclusions of certain personal data about me to bring about delivery of the come as writing on the external cover of any open/mail backages); analog
  - [y] samplying with applicable law in administering, processing, handling and/or dealing with my claims./cullectate vitne
  - (b) all insurer(s) who have insured vehicle(s) involved in this are deal and the insurer/ lawvers/ aw firms, may/are permitted to collect, use, discuss and/or process my Personal information for one or more of the noise Purposes, and
  - (ii) my Personal information resystain the disclosed by any of the assurer, and/or CIA to the rither polity service provides or eigents] making the ribovy eachieve firms), which may be sized outside of Singapore, for one or more of the above Pariodics.
  - (vii) no Personal information will also be collected and used to complex come history for the purpose of transfer for exercises and entragement in present and a former classes.
  - (c) the ellowration so consisted under to alreve may be smalled / disclosed:
    - (ii) to all insures and/or any of our third parties that passed in evaluating, every gate glassic control argin managing function, but make the next and government agencies us to a cooling treatment for the purposes stated, or
    - (i) for complying with requirements under any organizations, have a court adder-

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### Sketch Plan #2

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SKETCH PLAN

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#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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1 of 3

Report No. T/20180702/2131

Police Station Of Origin: Woodlands West N.P.C. 9 Marsiling Lane SINGAPORE 739146 Tel No: 1800-363 9999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/07/2018 19:17			Vide Report No.:		Station Diary No.: 57	
Informant'	s Particula	ars				
Name of Informant: ZEFFLIN LOK YEE YANG			Address: APT BLK 202 MARSILING DRIVE #03-140 SINGAPORE 730202			
ID Type / ID No.: NRIC NO / S9516085I			Contact No.: Home/Office:			
Nationality: SINGAPORE CITIZEN			Email:		i	
Sex: Male	Age: 23	Date of Birth: 07/05/1995	Type of Informant: Rider			
Race: Chinese			Language: English	Institution /	School Name:	
Occupation: TRAINEE			Driving Licence Information: Class: 2B,2A,3	Date of Exp	piry:	

Type of Accident:	Injury Conveyed By Ambula	Drin Drive No		Date/Time of Accident: 01/07/2018 20:40		Type of Location Straight Road
Location: Along Road 1 Tr WOODLANDS A WOODLANDS A				a a		
Weather: Road Drizzling Wet		Road Surfa Wet	ce:		Roa	d Speed Limit:
Traffic Flow: Traffic		Traffic Cont Not Control		1	Traf	fic Volume:
Type of Collision	n: Against - Others				1	one conveyed by oulance:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FW7510G	Motorcycle	HONDA	CB400SF2J	Black	Slightly Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FW7510G	NTUC Income Insurance Co-Operative Limited	5096215409	24/11/2017	27/11/2018	





2 of 3

Police Station Of Origin: Woodlands West N.P.C. 9 Marsiling Lane SINGAPORE 739146 Tel No: 1800-363 9999

Report No. T/20180702/2131

CONTINUATION OF REPORT

### Brief Details.

On 01/07/2018 at about 2040hrs, I was riding my motorbike (FW7510G) along Woodlands Avenue 5 heading towards Woodlands Avenue 2. The traffic was clear at that time with no vehicles travelling on the straight road. It was however drizzling slightly causing the road surface to be wet. As I was travelling along the second lane, a van then turned out from my left. The van driver was driving along South Woodlands Way and merging into Woodlands Avenue 5.

While the van was merging, the van then cut from the fourth lane all the way into the second lane. Although the van did signal his intention to filter right, the van driver had failed to keep a proper lookout and was directly in front of me. I was travelling about 70km/hr at that point of time.

To avoid a collision, I then applied my horn and brakes at the same time. Despite doing so, the van continued to cut into my lane. I tried to avoid him by swerving to the right, into the first lane, which then caused me to lose control of my mortorbike.

After I fell off my motorbike, the van driver did stop his vehicle and make an assessment of my injuries. As I was in pain, I called the police and a traffic police officer was dispatched to the scene. An ambulance was also dispatched to scene and I was conveyed to Khoo Teck Puat Hospital. I was also given 6 days of MC by the doctor from 01/07/2018 to 06/07/2018.

I would like to state that I could not remember the vehicle plate number of the van and no exchange of contacts were made between us.





Police Station Of Origin: Woodlands West N.P.C. 9 Marsiling Lane SINGAPORE 739146 Tel No: 1800-363 9999 3 of 3 Report No. T/20180702/2131

CONTINUATION OF REPORT

## Sketch Plan

NP168

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:	Signature Of Informant:
Staff Sgt TAN YU REN	Yey
Signature Of Interpreter:	Date/Time:
Not applicable	02/07/2018 19:17
711	
8 9	
Officer In Charge Of Case:	Classification Of Case:
TP / GIT /	
Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI	
Contact No.: 65476904	
Authentication Stamp	



Traffic Police 10 Ubi Avenue 3 Singapore 408865 Tel +65 6547 6904 Fax +65 6547 6259 www.police.gov.sg

Your Ref

Our Ref

: TP/IP/38103/2018

Date

: 17 JULY 2018

ZEFFLIN LOK YEE YANG APT BLK 202 MARSILING DRIVE #03-140 SINGAPORE 730202

Dear Sir/Mdm,

TRAFFIC ACCIDENT INVOLVING MOTORCYCLE FW7510G AND MOTOR VAN GX9013U ALONG WOODLANDS AVENUE 5 ON 01.07.2018 AT ABOUT 8:51 P.M.

I refer to the above accident.

- We have completed our investigations. Our investigation shows that an offence of Inconsiderate Driving under Section 65(b) of the Road Traffic Act Chapter 276 was disclosed against the driver of motor van GX9013U and action has been taken against the driver for the said offence.
- You may wish to note that our decision does not preclude future prosecution should new evidence emerge at a later stage.
- 4 Please be informed that our decision does not preclude you from pursuing civil claims.

Yours faithfully,

SHAHRUL NIZAM for HEAD INVESTIGATION TRAFFIC POLICE SINGAPORE POLICE FORCE

NP 510