SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 <u>truthful and accurate</u> 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.
- 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 | 08/08/2018 11:16 |
| Date Of Accident | 02/08/2018 08:00 |
| Exact Location Of Accident | ALONG BKE TOWARDS DAIRY FARM ROAD |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | FBH7992A |
| Insured/Policyholder | |
| Name Of Registered Owner | RICHARD TAN TIAN HOCK |
| NRIC No | S1736796Z |
| Email Address | TIANFU2018@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-97915771 |
| Alternative Phone No | OTHERS-97915771 |
| Vehicle Particulars | |
| Manufacturer | YAMAHA |
| Model | JUPITER |
| Exact Purpose for which vehicle was being used at time of accident | ON THE WAY TO WORK |
| 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 | MSIG INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | |
| Cover Note Number | 72035800 |
| Driver | |
| N (D) | |
| Name of Driver | RICHARD TAN TIAN HOCK |
| NRIC No | RICHARD TAN TIAN HOCK S1736796Z |
| | |
| NRIC No | S1736796Z |
| NRIC No Date Of Birth | \$1736796Z 24/04/1966 |
| NRIC No Date Of Birth Occupation | \$1736796Z 24/04/1966 INDOOR |
| NRIC No Date Of Birth Occupation Date Of Driving Pass | S1736796Z 24/04/1966 INDOOR 24/07/1984 |
| NRIC No Date Of Birth Occupation Date Of Driving Pass Driving Experience | \$1736796Z 24/04/1966 INDOOR 24/07/1984 34 YEARS AND 0 MONTHS |
| NRIC No Date Of Birth Occupation Date Of Driving Pass Driving Experience Gender | \$1736796Z 24/04/1966 INDOOR 24/07/1984 34 YEARS AND 0 MONTHS MALE |

TIANFU2018@GMAIL.COM

Address BLK 512 WOODLANDS DRIVE 14

#11-97

Postcode 730512

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 RAINING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? YES

Foreign Vehicle Registration Number JRQ7180 (MOTORCYCLE)

Number of vehicles involved in the accident 2
Was any body injured in the Accident? YES
Was any injured conveyed to hospital by
YES

ambulance?

Was any other material or property damaged?

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

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

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

YES

YES

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180803/2008

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 JRQ7180

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver RAJAN SELVAKUMAR

NRIC/Passport Number G6623442N

Contact Number

Address Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name RICHARD TAN TIAN HOCK

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? FBH7992A

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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 liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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

Accident Sketch Plan

| SKETCH PLAN | BKE | Tou | ARDS | DIA | 24 PA | RW EX | |
|---|---------------------------|---|-----------------|----------|--------------------------------------|-----------------|----------------------------|
| <u></u> | J.B. | N D | | | 10 | | TAR AWAY IN FRONT ACCIDENT |
| | <u> </u> | | [] | 1 7997 0 | Ω | Ω | |
| DESCRIBE CIRCUMS | TANCES OF | THE ACCIDENT | A) FBH B) JR | 7180 | | | |
| | | | | | | | |
| | | | | | A | 1 | |
| | | | | | Mon | 8 | |
| | | | 210 | e T | 2 | Me | - |
| | | | John | 1080 | 51 | | |
| | | J.1/2 | 1201 | 5 | / | | |
| | 250 | (V) | 1 | | | | |
| 00 | 7 | | / | | | | |
| | | | | | | | |
| | / | | | | | | |
| PECLARATION We declare the forego | Pasticulars Jun Tan | are true in every re | spect. | | all | oslosi | 2018 |
| olicyholder's Signature late & Time: | 18 40 | Driver's Signature (If driver is not the Date & Time: | policyholder) | ONE | porting Centr me: IIC/FIN No.: | e Personnel Sig | WHAT TOPS |





Police Station Of Origin: Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

1 of 4 Report No. T/20180803/2008

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 03/08/2018 01:16 | | Made: | Vide Report No.: F/20180802/0085 | Station Diary No.: 20 | |
|---|-------------|-------|---|----------------------------|--|
| Informa | nt's Partic | ulars | | | |
| Name of Informant: RICHARD TAN TIAN HOCK | | | Address: APT BLK 512 WOODLANDS DRIVE 14 #11-97 SINGAPORE 730512 | | |
| ID Type / ID No.: NRIC NO / S1736796Z | | 96Z | Contact No.: Home/Office: | Mobile: 97915771 | |
| Nationality: SINGAPORE CITIZEN | | EN | Email: | | |
| Sex: Age: Date of Birth: Male 52 24/04/1966 | | | Type of Informant: Rider | | |
| Race: Chinese | | W. | Language: | Institution / School Name: | |
| Occupation: MAINTAINANCE | | | Driving Licence Information: Class: 2B,3 | Date of Expiry: | |

| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 02/08/2018 08:00 | Type of Location Straight Road | |
|-------------------------------|---|-----------------------|---|-----------------------------------|--|
| Along BKE he Weather: | EXPRESSWAY eading towards the direction | on of Diary farm. | | Road Speed Limit: | |
| Clear | | Dry | | | |
| Traffic Flow: Traffic One Way | | Traffic Control: | | Traffic Volume: Heavy | |
| Type of Collis | ion: | | | Anyone conveyed by | |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------------|--------|--------------------|-------|----------------------|-----------------|
| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenger |
| FBH7992A | Motorcycle | YAMAHA | JUPITER MX (HC) | Red | Seriously Damaged | 0 |
| JRQ7180 | Motorcycle | | | | Slightly Damaged | 0 |

| Details of Vehicle Insurance | | | | | |
|------------------------------|---|--------------|------------|-------------|--|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date | |
| FBH7992A | MSIG INSURANCE (SINGAPORE) PTE. LTD. | 72035800 | 03/10/2017 | 02/10/2018 | |



T/20180803/2008

2 of 4

Report No. T/20180803/2008

Police Station Of Origin: Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

CONTINUATION OF REPORT

| Details of Person Any Pedestrian In | | | | | |
|--------------------------------------|-------------------------------|------------------------------------|-----------|-----------------------------------|------------------------------------|
| No. of Pedestrian | | Use of Pedestrian Crossing: NA | | | |
| Rider | | ing to: | | | |
| Name | RICHARD TAN TIAN HOCK | | ID No. | | S1736796Z |
| Related Vehicle | FBH7992A (Motorcycle) | Contact No. | | 97915771 | |
| Hospital/Clinic | NG TENG FONG GENERAL HOSPITAL | | | of e & Date | Class: 2B,3 Date of Expiry: NIL |
| Date Treatment | 02/08/2018 | charge | 02/08 | /2018 | |
| | ted Medical Leave 02 | Degree o | of Injury | Sligh | |
| Rider | | K hereight | | Belli | |
| Name | RAJAN SELVAKUMAR | | ID No. | | G6623442N |
| Related Vehicle | JRQ7180 (Motorcycle) | Contact No. | | NIL | |
| Hospital/Clinic | NIL | Class Drivin Licent Expir | g | Class: NIL Date of Expiry: NIL | |
| Date Treatment | NIL | Date Dis | charge | NIL | |
| | nted Medical Leave NIL | Degree | of Injury | Sligh | it |

Brief Details.

On 02/08/2018 at about 0800hrs, I was riding my blke plate no. FBH7992A along BKE heading towards the direction of diary farm. I was riding on the 2nd lane and wanted to make a lane change to the 1st lane. I noticed that there was a congestion up from due to a traffic accident thus I slowed down (20km/hr to 30km/hr), signaled and made a change of lanes after a quick check on my blind spot. While I was making the change of lanes I felt an impact from the back of my bike and I skidded and fell on my left. The rider who collided onto me came to assist me, he is one namely: Rajan Selvakumar, Male/Malaysian aged 31yrs, FIN No. G6623442N (C/O Pico Guards P/L), owner of bike plate no. JRQ7180. I was conscious but in a lot of pain and was having fainting spells. An AETOS officer who came across our accident assisted to call for the ambulance and the police. I was then conveyed to Ng Teng Fong Hospital to receive treatment. I was discharged on the day itself and received a medical leave of 2 days from 02/08/2018 to 03/082018. I wish to inform that I suffered abrasions on my left forearm and left lower limbs, as well as pain on my right knee. I noticed that Rajan Selvakumar suffered abrasions on his right feet while he was treated by the ambulance staff. My bike suffered scratches on the left body and the foot stand area, the gear lever and pillion seat rest were dented. I was informed by the traffic police officer to lodge a report of the accident after receiving treatment from the hospital.





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

CONTINUATION OF REPORT

3 of 4

Report No. T/20180803/2008





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

4 of 4 Report No. T/20180803/2008

CONTINUATION OF REPORT

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: J / Sgt 3 KELLY LEE KAI LIN | Signature Of Informant: |
|--|--------------------------------|
| Signature Of Interpreter: Not applicable | Date/Time: 03/08/2018 01:16 |
| Officer In Charge Of Case: TP / GIT / Sr Staff Sgt NOR FAIZAL BIN YAHYA Contact No.: 65476202 | Classification Of Case: |
| Authentication Stamp | |



















