

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	27/08/2018 15:56
Date Of Accident	25/08/2018 14:45
Exact Location Of Accident	ALONG BALESTIER ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA9898T
Insured/Policyholder	
Name Of Registered Owner	TANOTO SHIPYARD PTE LTD
Co Reg No	198703005G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62647300

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VA/GA042912
Cover Note Number	

Driver

Name of Driver	TANOTO WILLIE
NRIC No	F0859028K
Date Of Birth	20/08/1984
Occupation	INDOOR
Date Of Driving Pass	03/03/2007
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	{LOCAL} +65-81574451
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NO 1 JALAN SAMULUN
Postcode	629119
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	COLLIDED INTO MOTORCYCLIST
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?	NO
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)	5
Passenger 1	NAME: : JOAN TANDRA GENDER: : FEMALE
Passenger 2	NAME: : SUSANNA GENDER: : FEMALE
Passenger 3	NAME: : ASHTON TANOTO GENDER: : MALE
Passenger 4	NAME: : KAYLA TANOTO GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20180825/7016.

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	FBN2238X
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

LIM TECK LIANG

NRIC/Passport Number

S8022624A

Contact Number

91034444

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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.

Kerlyn Ong Kai Li

DID : 6771 4420 HP : 9186 5111

Email : kerlyn.ong@cyclecarrion

Cycle & Carriage Industries

Customer Service Centre - P



Policyholder's Signature

Date & Time 27/08/2018 1412

Driver's Signature

(If driver is not the policyholder)

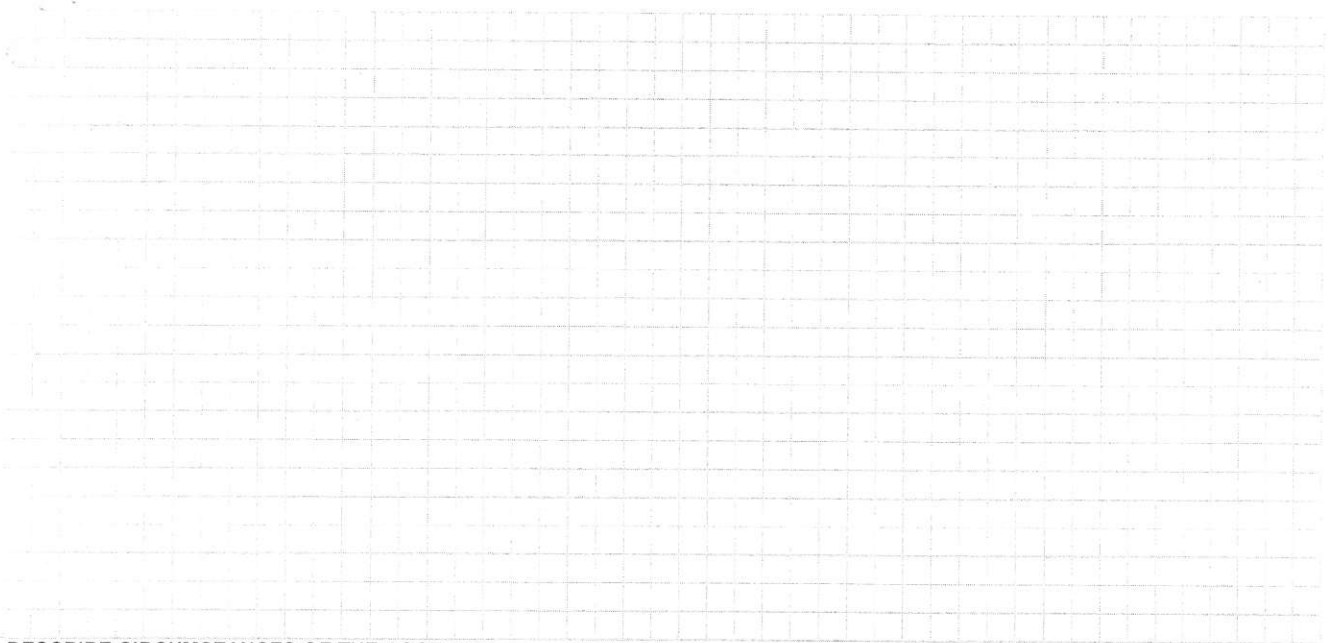
Date & Time 27/08/2018 1412

Reporting Centre Personnel's

Name: KERLYN

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report no. T/2018 0825/7016

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Kerlyn Ong Kai Li

DID : 6771 4420 HP : 9186 5113

Email : kerlyn.ong@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop

Policyholder's Signature

Date & Time 27/08/2018 1412



Driver's Signature

(If driver is not the policyholder)

Date & Time 27/08/2018 1412

Reporting Centre Personnel's

Name: KERLYN

NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180825/7016

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180825/7016

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/08/2018 18:11		Vide Report No.: E/20180825/0139		Station Diary No.:	
Informant's Particulars					
Name of Informant: TANOTO WILLIE			Address: 9 ROBIN LANE SINGAPORE 258239		
ID Type / ID No.: FIN NO / F0859028K			Contact No.: Home/Office: Mobile: 81574451		
Nationality: INDONESIAN			Email: wtanoto@gmail.com		
Sex: Male	Age: 34	Date of Birth: 20/08/1984	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: BANK EXECUTIVE			Driving Licence Information: Class: 3 Date of Expiry: 24/03/2022		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/08/2018 14:45	Type of Location: Straight Road
Location: BALESTIER ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBN2238X	Motorcycle			Blue	Slightly Damaged	0
SJA9898T	Car	MERCEDES BENZ	E200	Blue	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



SINGAPORE POLICE FORCE



T/20180825/7016

Police Station Of Origin:
Traffic Police Division HQ
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Report No. T/20180825/7016

CONTINUATION OF REPORT

Rider			
Name	Lim Teck Liang		ID No. S8022624A
Related Vehicle	FBN2238X (Motorcycle)		Contact No. 91034444
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	TANOTO WILLIE		ID No. F0859028K
Related Vehicle	SJA9898T (Car)		Contact No. 81574451
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: 24/03/2022
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

The accident occurred on Balestier Road, heading towards Lavender Road. This is in front of a shop called Avantgarde Curtain, at 334 Balestier Road.

I was on the middle lane of the 3-lane road, trying to filter to the right-most lane. Traffic was very heavy and slow moving. I estimate that it could not have been more than 5 or 10 kilometres per hour. The right lane was clear to me and the next closest vehicle in the lane is the motorcycle I collided with. I estimate him to be approximately 7-8 vehicles distance away from me at the time I was entering the lane. He was wearing a bright pink Food Panda uniform and as such was very visible.

Judging that the lane was clear, I signalled right and moved slowly into the lane. In the course of doing so, I heard a bang near the right-back passenger car door and stopped my vehicle immediately. When I got out of the car, the motorcycle was down, but the rider was standing and helping his bike up. The rider claimed to be injured and immediately called for an ambulance for himself. Both of us jointly checked him for injuries and the only visible one was a scratch on his right index finger. However, he said his back, which is suffering from a chronic injury he says he has been seeing a specialist for, was aching and he needed to go to the hospital. He continued to be mobile, was independently taking photographs of the accident site, spoke on the phone several times and we exchanged information and contact details. I was physically fine and needed no medical attention.

There was a 30-40 cm scratch across the right back car door and this was the main visible damage for my car. For his motorbike, I could only see a scratch on an emblem on the left side. There were no other damages to other vehicles or public property as the collision only involved two parties. There was no resulting debris on the road.



**SINGAPORE
POLICE FORCE**



T/20180825/7016

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Report No. T/20180825/7016

CONTINUATION OF REPORT

I have some photos of the vehicles and of the rider immediately after the accident. I do not have an in-vehicle camera.

I called 999 and was informed that the emergency services have already been notified and the ambulance came by in maybe 10-15 minutes and the traffic police 10 or so minutes after that. The paramedics checked the rider and he repeated to them what he had told me and afterwards he proceeded to board the ambulance after collecting his valuables. The traffic police officer came by just as the ambulance was about to leave, spoke to the rider for a couple of minutes, and then directed me to move the vehicle to the leftmost lane of Balestier Road. I left the scene after the traffic police officer issued me with a case card and told me to come here to the police station to make a police report.



**SINGAPORE
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T/20180825/7016

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Report No. T/20180825/7016

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
SHAHRUL NIZAM BIN SAMARRI
Contact No.: 65476904

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
25/08/2018 18:11

Classification Of Case: