

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	21/07/2018 11:30
Date Of Accident	20/07/2018 23:00
Exact Location Of Accident	LEBUHRAYA 2ND LINK (KM 1)
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL2041M
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-62414992

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID (A)
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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	

Driver

Name of Driver	HOO KIN SING
NRIC No	S8068726E
Date Of Birth	23/05/1980
Occupation	OUTDOOR
Date Of Driving Pass	05/11/2008
Driving Experience	9 YEARS AND 8 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-94598662
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	NOADDRESS
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
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?	YES
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	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT

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	FP500T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE

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	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FP500T
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

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.



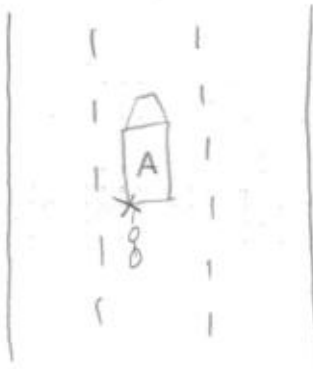
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

and Link



A: QLL 2041M
B: FP 500.T

Describe Circumstances of the Accident

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.

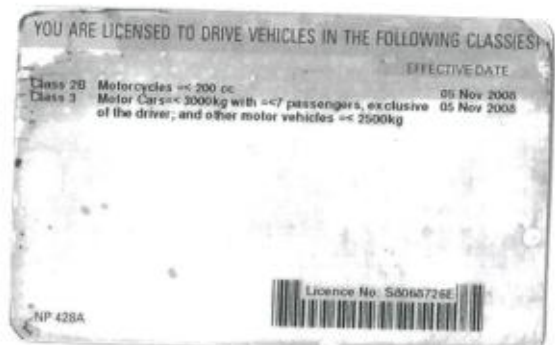
 

Policyholder's Signature / Date & Time



Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel





**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20180721/2045

1 of 3

Report No. T/20180721/2045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/07/2018 11:56	Vide Report No.:	Station Diary No.: 90
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Informant's Particulars

Name of Informant: HOO KIN SING			Address: 50 CANBERRA DRIVE #03-17 SINGAPORE 768438		
ID Type / ID No.: NRIC NO / S8068726E			Contact No.: Home/Office: Mobile: 94598662		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 38	Date of Birth: 23/05/1980	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 20/07/2018 23:00	Type of Location:
Location: Along Road 1 SECOND LINK KM1 Expressway from Tuas 2ND Link				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FP500T	Motorcycle	YAMAHA	TMAX530(D X)	Blue	Slightly Damaged	0
SLL2041M	Car	HONDA	VEZEL HYBRID 1.5X AUTO	Brown	Slightly Damaged	0



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Tel No: 1800-7659999



T/20180721/2045

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Report No. T/20180721/2045

CONTINUATION OF REPORT

Brief Details.

On 20/07/2018 at about 2300hrs while driving (SLL2041M) along the KM 1 expressway Tuas 2ND Link into Malaysia, suddenly I heard a loud thump at the rear of my car and I saw a motorcycle (FP500T) falling to the left of my vehicle. I then stopped my car and stepped out to provide assistance to the fallen motorist. Both parties were able to exchange particulars. I then noticed light damages on the left rear bumper of my car and the motorcycle's right chassis was damaged. The motorist was then conveyed by ambulance and the Malaysian traffic police arrived shortly after.



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20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20180721/2045

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Report No. T/20180721/2045

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 /

Staff Sgt MUHAMMAD SALIMIN BIN OMAR

Signature Of Interpreter:

Not applicable



Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt RAZIZ BIN TAHAR

Contact No. : 65476200

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

21/07/2018 11:56

Classification Of Case:

Accident Sketch Plan

**POLIS DIRAJA MALAYSIA**
REPOt POLIS

Balai : TRAFIK ISKANDAR PUTERI
Daerah : ISKANDAR PUTERI
Kontinjen : JOHOR
No Repot : TRAFIK IPUTERI/007267/18
Tarikh : 21/07/2018
Waktu : 0042 AM
Bahasa Diterima : B. Malaysia

Pegawai Penylasat : R189981

Butir-butir Penerima Repot

Nama : ENKU MOHD FAIZAL B. NIK MUSTAFA
Butir-butir Jurubahasa (Jika Ada)
Nama : ---
No Paspot : ---
Alamat : ---

No Personel : R204553

Pangkat : KONST/P

No K/P (Baru) : ---

No Polis/Tentera : ---

Bahasa Asal : ---

Butir-butir Pengadu

Nama : HOO KIN SING
No K/P (Baru) : 800523016155
No Sijil Beranak : ---
Jantina : Lelaki
Keturunan : Cina
Pekerjaan : PEMANDU
Alamat Tempat Tinggal : L 61 KAMPUNG AIR BEMBAN KULAI, 80120, JOHOR
Alamat Ibu/Bapa : ---
Alamat Pejabat : ---
No Tel (Rumah) : ---
Emel : ---

No Polis/Tentera : ---

No Paspot : ---

Tarikh Lahir : 23/05/1980

Umur : 38 tahun 1 bulan

Warganegara : Malaysia

No Tel (Pejabat) : ---

No Tel (HP) : 0108268936

Pengadu Menyatakan:-

PADA 20/07/2018 JAM LEBIH KURANG 2300 HRS SAYA PANDU M/KAR JENIS HONDA VEZEL NO.PENDAFTARAN SLL2041M DARI SINGAPORE HENDAK PULANG KE RUMAH. APABILA TIBA DI KM 1 LEBUHRAYA 2ND LINK SAYA JALAN TERUS,TIBA-TIBA SEBUAH M/SIKAL NO.PENDAFTARAN FP500T YANG BERADA DI BELAKANG TELAH MENGHIMPIT DAN MELANGGAR M/KAR SAYA DI SISI KIRI. SAYA TIDAK MENGALAMI SEBARANG KECEDERAAN. KEROSAKAN PADA M/KAR SAYA IALAH PADA BAHAGIAN BELAKANG :LAMPU KIRI BELAKANG,BONET,BUMPER,FENDER BELAKANG KIRI,PINTU BELAKANG KIRI DAN LAIN-LAIN KEROSAKAN BELUM KENAL PASTI.SEKIAN REPOt SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

: R204553 | 21/07/2018 01:01:06 AM

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

