

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	19/09/2018 14:34
Date Of Accident	17/09/2018 02:00
Exact Location Of Accident	BKE TWDS PIE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL7951Y
Insured/Policyholder	
Name Of Registered Owner	LIM AI GEOK
NRIC No	S1406474E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97122384
Alternative Phone No	OTHERS-97122384

Vehicle Particulars

Manufacturer	YAMAHA
Model	XABRE TFX150
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5088593378-01
Cover Note Number	

Driver

Name of Driver	TAY YU HENG
NRIC No	S9633335H
Date Of Birth	19/09/1996
Occupation	OUTDOOR
Date Of Driving Pass	11/01/2017
Driving Experience	1 YEAR AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97122384
Fax Number	
Contact Number	
Email Address	TAYYUHENG88@GMAIL.COM

Address	BLK 259 BOON LAY DRIVE #12-523
Postcode	640259
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	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	JURONG WEST NPC
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180918/2001

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	FQ7655D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	KENNEDY KOWK JUN AN
NRIC/Passport Number	S9632237B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	TAY YU HENG
Approximate Age	
Injuries Sustain	LEFT LEG,RIGHT WRIST & LEFT ELBOW
Injured person in which vehicle?	FBL7951Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

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)**

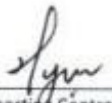
I understand, acknowledge, agree and consent that:

- (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.

Policyholder's Signature
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time: 19/09/18

 19/09/18

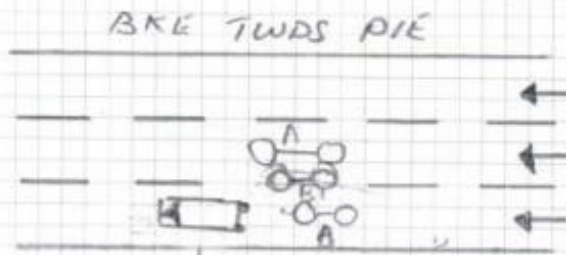
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

A - FBL7951Y

B - FQ76JSD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the police report: 1/20180918/2001

DECLARATION

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

Policyholder's Signature
Date & Time:

3
Driver's Signature
(If driver is not the policyholder)
Date & Time: 19/09/18

2/19/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20180918/2001

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 3

Report No. T/20180918/2001

CONTINUATION OF REPORT

Brief Details.

On 17/9/2018 at around 0200hrs, i was riding my bike(FBL7951Y) along BKE towards PIE. I was riding on the second left most lane. While on my left there was another rider however, i do not remember what is the plate number however, the model of the bike is Yamaha R15, black color with the rider namely: Keanedy Kowk Jun An, S9632237B.

Ahead of the rider was a vehicle going to make a stop as it flashes hazard light. the rider then make a lane change towards his right side without signaling before hand. As a resulted, the other rider crash along the left side of my bike. I then lost my balance and fell towards the left of my bike. Passerby then stop on the road to help me out. Both of us then exchange our particulars. After that, i then make a check on my bike and discovered that the gear, hand guard and mirror was damaged. There's ambulance on scene.

On the same date at round 0600hrs, i went to Ng Teng Fong to seek treatment and i was given medical leave from 17/9/2018 to 24/9/2018. I sustained injuries on left leg, cuts on my right wrist and left elbow.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180918/2001

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3

Report No. T/20180918/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/09/2018 00:05		Video Report No.:		Station Diary No.: 1	
Informant's Particulars					
Name of Informant: TAY YU HENG			Address: APT BLK 259 BOON LAY DRIVE #12-523 SINGAPORE 640259		
ID Type / ID No.: NRIC NO / S9633335H			Contact No.: Home/Office: Mobile: 97122384		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 21	Date of Birth: 19/09/1996	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: DISPATCH			Driving Licence Information: Class: 2B,2A Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 17/09/2018 02:00	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY TOWARDS PIE.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL7951Y	Motorcycle	YAMAHA	XABRE TFX150	Grey	Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20180918/2001

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 3

Report No. T/20180918/2001

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Police Report



**SINGAPORE
POLICE FORCE**



T/20180918/2001

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649618
Tel No: 1800-2689999

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Report No. T/20180918/2001

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 2 NIGEL LIM NIAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
18/09/2018 00:06

Officer In Charge Of Case:
TP / GIT /
SI NORASHIKIN BINTE DAUD
Contact No.: 65476439

Classification Of Case:

Authentication Stamp
NP188