

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 liability.
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	29/11/2018 19:47
Date Of Accident	28/11/2018 08:30
Exact Location Of Accident	STRATHMORE AVE PUBLIC CARPARK NUMBER Q93 LOT23
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FZ8988P
Insured/Policyholder	
Name Of Registered Owner	TAN KENG SIONG (CHEN QINGXIANG)
NRIC No	S7935613A
Email Address	ORTHODOXY_TKS@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96370981
Alternative Phone No	OTHERS-96370981

Vehicle Particulars

Manufacturer	BMW
Model	C650 GT
Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5102093279
Cover Note Number	

Driver

Name of Driver	TAN KENG SIONG (CHEN QINGXIANG)
NRIC No	S7935613A
Date Of Birth	09/11/1979
Occupation	INDOOR
Date Of Driving Pass	20/06/2014
Driving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96370981
Fax Number	
Contact Number	OTHERS-96370981
Email Address	ORTHODOXY_TKS@YAHOO.COM.SG

Address	BLK 82 STRATHMORE AVENUE #04-150
Postcode	141082
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8729999 - FAX NO: 67748639
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181129/2044

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	GBF5131S
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	

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.
- (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:

 29/11/2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

 29/11/2018


SKETCH PLAN

UNKNOWN BIKE WAS PROCEED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
7/2018/1129/2014

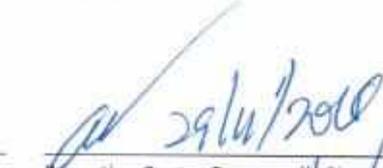
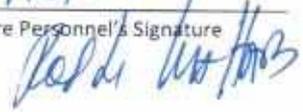
DECLARATION

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

 29/11/2018

Policyholder's Signature
Date & Time:

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

 29/11/2018
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20181129/2044

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

2 of 3

Report No. T/20181129/2044

CONTINUATION OF REPORT

Brief Details.

On 28/11/2018 at about 0830hrs, I parked my motorcycle bearing registration number FZ8988P at Strathmore Avenue public carpark number Q93, lot 23. At that point of time, everything was intact.

On the same day at about 2200hrs, I wanted to go out and ride my motorcycle. I then discovered that my motorcycle had fallen. I made a check and noticed a note saying "Sorry. I wait u 30 mins please call. 6383 1188" I then contacted the number and he provided me with the vehicle registration number which is GBF 5131S belonging to Joaquim Florist & Gifts Pte Ltd. He admitted that one of his driver had accidentally hit my bike while reversing.

I would like to mention that there were cracks & scratches at my left side fairing. The side mirror is also damaged. No one was injured.



**SINGAPORE
POLICE FORCE**



T/20181129/2044

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

3 of 3

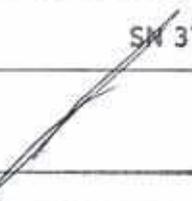
Report No. T/20181129/2044

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: D / Sgt 2 KHAIRUL ANWAR LLOVIDO BIN JOHARI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 29/11/2018 12:23
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No: 65476151  POLICE FORCE	Classification Of Case:
Authentication Stamp NP168  SIGNATURE	

Claim Handling

Accident MT/1021943

Policy No.	5102093279	Vehicle No.	FZ8988P	GST Registration No.	
Certificate No.					
Policyholder Name	TAN KENG SIONG (CHEN QINGXIANG)			Policyholder NRIC	S7935611A
Product Code	MOTORCYCLE INSURANCE	Cover Type	Comprehensive	Leasing	0
Contact No.(Mobile)	96370981	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	<input type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

Accident Details

Report Date	29/11/2018 19:58	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	28/11/2018	Time of Accident hh:mm	08:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	STRATHMORE AVE PUBLIC CARPARK NUMBER Q53 LOT23				

Excess

Own damage Excess	500.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

Benefits

GST Registered Information

GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					

Policyholder Mailing Address

Address 1	BLK B2 #04-150	Address 2	STRATHMORE AVENUE	Address 3	SINGAPORE 141082
Address 4		Address Type	Singapore address	Post Code	141082
Unit No.	04-150	Related Policy Number	5102093279		

DI Driver Info

Driver Name	Tan Keng Siong	Driver Type	Main Driver	Driver DOB	09/11/1979
Unnamed driver Name		Driver NRIC	S7935611A	Driving Experience	2
Register Date of Driver License	01/01/2018	Driver Age	39	Contact No.(Home)	
Contact No.(Mobile)	96370981	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK B2 #04-150	Address 2	STRATHMORE AVENUE	Address 3	SINGAPORE 141082
Address 4		Address Type	Singapore address	Post Code	141082
Unit No.	04-150				
Does he own a Singapore Registered car?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Driver Vehicle No.	FZ8988P	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Modification History

Claim 001 **New**

Claim Type *	OO-MX	Insured Name	TAN KENG SIONG (CHEN QINGXIANG)	Insured NRIC	S7935611A
Contact No.(Mobile)	96370981	Contact No.(Home)	N/A	Contact No.(Office)	
Email Address		DI Vehicle Number	FZ8988P	TP Vehicle Number	GBF11
Claim Description	FZ8988P / GBF1115 ON 28 Nov 2018				
Preferred Workshop		Insured Liability	Not at Fault		
Repair Finalisation	Yes	Repaired Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	29/11/2018 20:00	Claim Close Date		Date Received	29/11/2018
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/1021943	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	29/11/2018 20:01

Attachment	Uploaded By/Date	Category	Urgency	Confidential	Urgency	Description	M
Choose File	No file chosen	Clear	Please Select	NO	Normal		
Choose File	No file chosen	Clear	Please Select	NO	Normal		
Choose File	No file chosen	Clear	Please Select	NO	Normal		
Choose File	No file chosen	Clear	Please Select	NO	Normal		
Choose File	No file chosen	Clear	Please Select	NO	Normal		
Choose File	No file chosen	Clear	Please Select	NO	Normal		
Message Read		Clear	Please Select	NO	Normal		

Attachment List

Attachment	IAAC_BUKIT_MERAH_300676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 29 Nov 2018 20:01	Category	Photos	Urgency	Normal	Description	Photos 2018-11-29	M
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ACCIDENT STATEMENT

ACCIDENT DATE: (28/11/2018) (DD/MM/YYYY). TIME: (08:30) (HH:MM)

LOCATION: Strathmore Ave public carpark Q93, lot 23

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: F28988P
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5102093279
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: BMW C650GT
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Tan Keng Siong (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S7935613A CONTACT: 96370981
c) ADDRESS: Blk 82 Strathmore Ave #04-150 S/141082

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: as above (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

*d) DATE OF BIRTH: (09/11/1979) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 20-6-2014

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Clementi NPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBF5131S MODEL: van
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

*No of passenger
(including driver)
()

*No of passenger
(including driver)
()

*No of passenger
(including driver)
()

email = orthodoxy_tks@yahoo.com.sg

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7935613A



Name

TAN KENG SIONG
(CHEN QINGXIANG)

陈庆祥

Race

CHINESE

Date of birth

Sex

09-11-1979 M

Country of birth

SINGAPORE

S7935613A

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S7935613A

Name

TAN KENG SIONG
(CHEN QINGXIANG)

Birth Date: 09 Nov 1979

Issue Date: 01 Nov 2011



002013544F



4784725

NRIC No S7935613A



Date of issue
01-11-2011

Address
APT BLK 82 STRATHMORE AVENUE
#04-150
SINGAPORE 141082

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 CC	26 Mar 2003
Class 2A	Motorcycles between 201 CC and 400 CC	10 Nov 2009
Class 2	Motorcycles > 400 CC	28 Jun 2014

S7935613A

S / No. 9000197382

NP 428A



License No: S7935613A