

## 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	04/01/2019 13:45
Date Of Accident	03/01/2019 18:00
Exact Location Of Accident	AIRPORT ROAD OUTSIDE PAYA LEBAR AIRBASE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN4450K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE ZENG FENG
NRIC No	S8528263H
Email Address	DENNIZLEE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91838845
Alternative Phone No	OTHERS-91838845

### Vehicle Particulars

Manufacturer	HONDA
Model	CB400SF MANUAL
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	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	MSD/VMS/18-995575-WTT
Cover Note Number	

### Driver

Name of Driver	LEE ZENG FENG
NRIC No	S8528263H
Date Of Birth	29/08/1985
Occupation	INDOOR
Date Of Driving Pass	27/03/2008
Driving Experience	10 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91838845
Fax Number	
Contact Number	OTHERS-91838845
Email Address	DENNIZLEE@GMAIL.COM

Address	BLK 132 BEDOK NORTH STREET 2 #05-83
Postcode	460132
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 (including own vehicle) 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	GEYLANG N.P.C
Police Station Address	<b>ROAD:</b> 132 PAYA LEBAR ROAD , <b>POSTCODE:</b> 409014 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190103/2123

#### 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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)

### SKETCH PLAN

1. Please report **correctly** the details of the accident to speed up the claims process.
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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. 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.
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)**

(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.

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

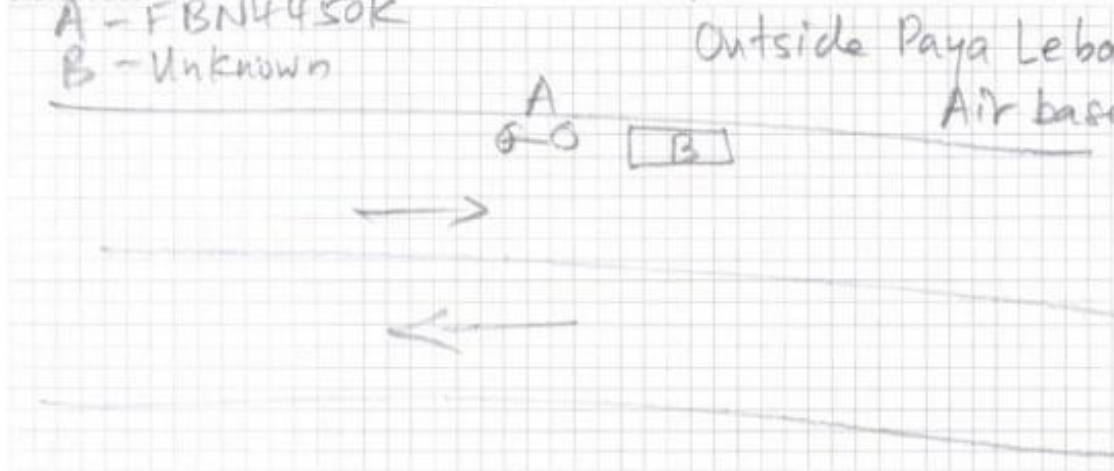
# Sketch Plan #2

## SKETCH PLAN

A - FBN4450K  
B - Unknown

AIRPORT ROAD

Outside Paya Lebar  
Air base.



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls Refer to the Police Report -  
T/20190103/2123

## DECLARATION

I/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:

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

## Sketch Plan #3



**SINGAPORE  
POLICE FORCE**



T/20190103/2123

2 of 3

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

Report No. T/20190103/2123

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	LEE ZENG FENG	ID No.	S8528263H
Related Vehicle	FBN4450K (Motorcycle)	Contact No.	91838845
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the 3/1/19 at about 1800hrs, I parked my motorcycle outside the Paya Lebar Airbase for delivery, when I returned back from the delivery. I noticed that my motorcycle had shifted from its original position, and also there are scratches on the front fender.

# Sketch Plan #4

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S8528263H**



Name  
**LEE ZENG FENG**  
**(LI ZENG FENG)**  
**李 增 丰**

Race  
**CHINESE**

Date of birth  
**29-08-1985**

Country/Place of birth  
**SINGAPORE**

Sex  
**M**




REPUBLIC OF SINGAPORE **DRIVING LICENCE**



License Number **S8528263H**

Name  
**LEE ZENG FENG**  
**(LI ZENG FENG)**

Valid Date: **29 Aug 19**

Issue Date: **27 Mar 2006**

001565749D

5578434



NRIC No: **S8528263H**



Date of issue  
**24-03-2016**

Address  
**APT BLK 132 BEDOK NORTH STREET 2**  
**#05-83**  
**SINGAPORE 460132**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

		PASS DATE:
Class 2B	MOTORCYCLES NOT EXCEEDING 200 CC	27 Mar 2009
Class 2A	MOTORCYCLES BETWEEN 201 CC AND 400 CC	16 Apr 2009
Class 3	MOTOR VEHICLES EXCEEDING 400 CC	09 Mar 2009
Class 4	MOTOR VEHICLES AND MACHINERY EXCEEDING 2000 WATTS OR 1.5 KW	09 Mar 2009

S / No. 9000224916

License No: **S8528263H**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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/20190103/2123

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

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Report No. T/20190103/2123

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/01/2019 19:30		Vide Report No.:		Station Diary No.: 94	
<b>Informant's Particulars</b>					
Name of Informant: LEE ZENG FENG			Address: APT BLK 132 BEDOK NORTH STREET 2 #05-83 SINGAPORE 460132		
ID Type / ID No.: NRIC NO / S8528263H			Contact No.: Home/Office: Mobile: 91838845		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 33	Date of Birth: 29/08/1985	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: IT ENGINEER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/01/2019 18:00	Type of Location:
Location:  AIRPORT ROAD  outside Paya Lebar Airbase				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBN4450K	Motorcycle	HONDA	CB400SF MANUAL	Black	Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBN4450K	MSIG INSURANCE (SINGAPORE) PTE. LTD.	60822250	02/10/2018	01/10/2019

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190103/2123

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

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Report No. T/20190103/2123

### CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	LEE ZENG FENG	ID No.	S8528263H
Related Vehicle	FBN4450K (Motorcycle)	Contact No.	91838845
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

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Police Report



SINGAPORE  
POLICE FORCE



T/20190103/2123

Police Station Of Origin:  
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132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

3 of 3

Report No. T/20190103/2123

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:

G /

Sgt 2 CHEW SONG YAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/01/2019 19:30

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No.: 65476145

Classification Of Case:

Authentication Stamp

NP168

SIGNATURE