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D.OA: 15/01/2018 14/40 1-Motor Cla	lm Form				
OD / TP / Reporting Only	(Within: OD Zhrs, TP (hrs)				
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Assessment/S	urvey Report	A ANNA SANA		770	
TP Insurer: Ass't Report	by Fax/Hand	Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:		
TP Particulars: Veh No: SU YY99W	. INC(.)/Non-INC()		
Owner / Driver: (Tel:)	
Policy No: () Period: ()	Cover Type: ()	
Confirmed by : (Dates,	Timer)	
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-2	0%; P: 21-79%. P:	80-100%]	148	
Year of Registration: () Warranty: YES ()/NO()			
Excess: (\$) Loading: \$1,000 ()/\$2,000)()				
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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 witholding 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.

artin system;	
Mark Mark Mark Control of the Contro	ACCIDENT STATEMENT
Date Of Report	16/01/2019 12:18
Date Of Accident	15/01/2019 14:40
Exact Location Of Accident	JUNCTION OF JALAN BUKIT MERAH AND KIM TIAN ROAD
Country/State of Loss	SINGAPORE
直接规定 要提高效益等品层次	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBK6178A
Insured/Policyholder	
Name Of Registered Owner	QUEK MONG SENG
NRIC No	S1435695I
Email Address	BERNARDQUEKMONGSENG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92364516
Alternative Phone No	OTHERS-92364516
Vehicle Particulars	
Manufacturer	HARLEY-DAVIDSON
Model	VRSCDX NIGHT ROD SPECIAL
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V13237/VMS/R02
Cover Note Number	
Driver	
Name of Driver	QUEK MONG SENG
NRIC No	\$14356951
Date Of Birth	10/12/1960
Occupation	INDOOR
Date Of Driving Pass	20/03/2017
Driving Experience	1 YEAR AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92364516
Fax Number	
Contract Number	02-11-12-12-12-12-12-12-12-12-12-12-12-12

OTHERS-92364516

BERNARDQUEKMONGSENG@GMAIL.COM

Address

BLK 74A REDHILL ROAD

#20-40

Postcode

151074

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

2

involved in the accident

_

NO

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)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND ATTACHMENT

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

SLL4499M

Vehicle Make/Model/Colour

BMW

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

BERTRAND

NRIC/Passport Number

Contact Number

92771714

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME:

GENDER:

SKETCH PLAN

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. 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)

I understand, acknowledge, agree and consent that:

- 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
- 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

Driver's Signature

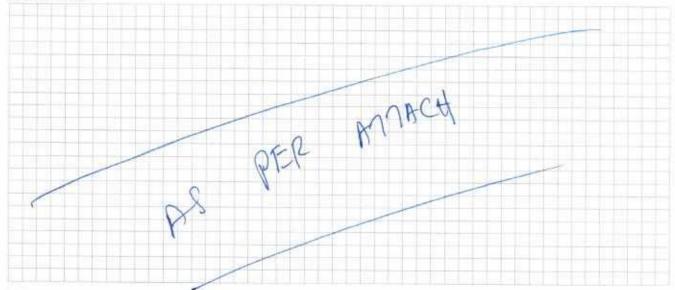
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature
Name:

NRIC/FIN No.:

SKETCH PLAN



OCCED	a contracto	
: NETTER	TO STATIKMENT -	

DECLARATION

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

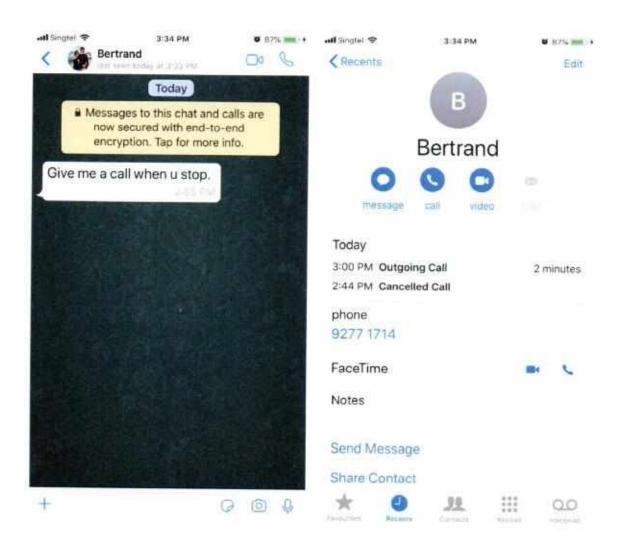
Policyholder's Signature

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

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

I was travelling along Jalan Bukit Merah towards Kg Bahru Road/Eu Tong Sen Street and stop at the traffic light at about 2.40 pm. When the traffic light turn green, I move my vehicle forward. The car on the left did not move off. My vehicle engine guard scratch onto the right rear end of the rear bumper of the vehicle on my left. The vehicle is a white colour BMW with registration plate SLL 4466 M. We both move forward ahead crossing the traffic light and park at the left lane along Jalan Bukit Merah. The driver and the front seat passenger alighted. The front seat passenger (going by the name Bertrand) and myself examined the car. The scratch is very superficial and based on that, I offered him a private settlement amount of \$150 to \$200. He rejected and we both decided to lodge accident report instead.

At about 2.55pm, Bertrand sent me a WhatsApp message to call him when I stop as I was riding on the road. I called him back at 3.00pm and we talked over the phone. He wanted \$500 for the private settlement. I counter offered him private settlement amount of \$300 which to me is fair as the scratch is very superficial, which again he rejected. Hence, we ended our tele-conversation and decided to proceed with our accident report.



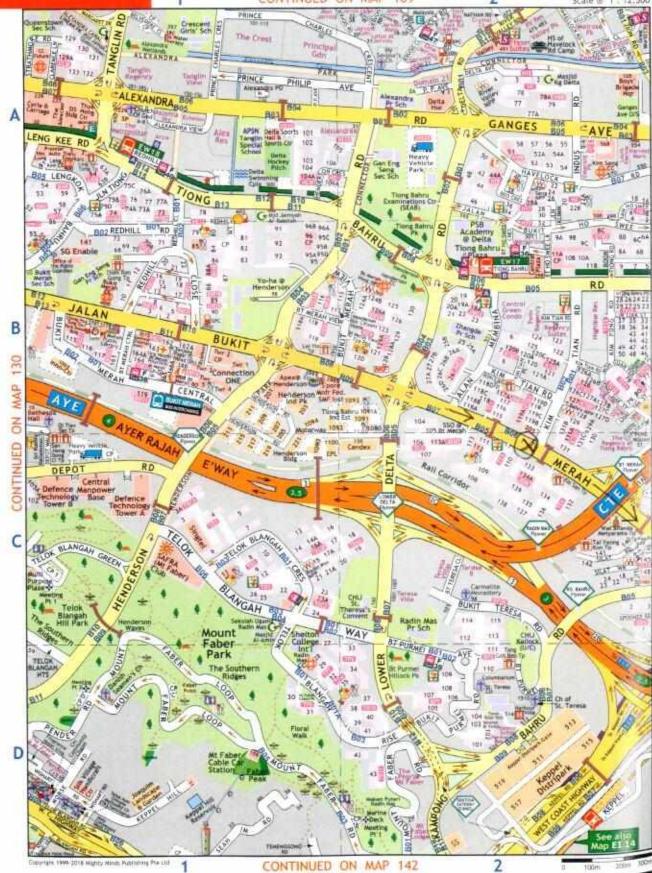
Quek Mong Seng Harley Davidson Night Rod Special FBK 6178 A

15 Jan 2019

6.1.19 11.30 a.m. al 16 lospola Rosh horsons

kg Pahru Road/ Towards TO CTE Eu Tong Sen street Kim Tian Road vehicle vehicle SLL 4499M FBK 6178A

11.70 am.



Need a customised Area Map? Singapore Map? World Map? We provide maps of all to suit your requirem

Email your enquiry for a quote: mighty@mightyminds.com.sg or call Tel: 6353 5035



Jal Wolor 2018 hors



Malle 12019 Rolli habbas

ACCIDENT STATEMENT

	The state of the s	
	ACCIDENT DATE: 15/-1.19 UDDALLIONON TILL 2 400M	
	(HH:MM)	Kim.
	LOCATION: Jalan Bakit Merah / Kin Tian Road INIC	tion
	1. DETAILS OF VEHICLE	W 100 M
	alvehicle NUMBER: FBK 6/78 A	
	DINSUBANCE COLUMN	
	CIPOLICY NUMBER: 51 18 V 13237 VM CIPO 2	
	dipolicy type (coupperson)	
	DE COMPREHENSIVE Y THIRD PARTY / THIRD PARTY FIRE &THEFT	
110	SOURCE TO THE PROPERTY OF THE	oul
	1) TYPE: (SALOON / COUPE / MPV /VAN / LORRY / MOTORCYCLE) OTHERS)	
*	DIPURPOSE OF USING AT A COMMERCIAL MOTORCYCLE)	
	I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)	
	IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)	
	ANAME: QUEK MONG SENG : (MALEY FEMALE)	
	DINRIC/FIN/PASSPORT: 51435695/I CONTACT: 92364516	
	c)ADDRESS: 74 A Red hill Road # 20-40	
* 8	Signed 15 1531	
25.116 . 0	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	7.
\$40 of passon	eleb puriver	
Clinduding dri	DINAME: QUER MONG SENG (MALE) FEMALE)	
(1)	CHRICIFINIPASSPORT: SIASSE 95/7 CONTINUE DO DO DE ARIC	- 2
-	CIADDRESS: 74A Redhill Road #20-40	
	*d)DATE OF BIRTH-1 /D 1/2 1/2/2	ė li
8	e)OCCUPATION: (INDOORY OUTDOOR)	
	DATE OF DRIVING PASC 20-3-2017	
	4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES KNO)	
	CONDITION: (CLEAR / RAINING / OTHERS	
	THE SURFACE TURY WET / OTHERS	
	o. WAS ANYBODY INJURED LYES INO	
	OREPORTED TO POLICE LYES ANOT	
	IF YES, PLEASE STATE WHICH POLICE STATION	
He of passinger	O. INIKU PAKIT VEHICLE	
Charles 1	a) VEHICLE NUMBER: SLL4499M MODEL: BMW	1
Clinduding driver	NAT KNOWN - COMMA CARRAL TO AVERT	101 -
(2)	c) NRIC/FIN/PASSPORT:CONTACT: 92771714	1.00
	d) VEHICLE NUMBER: MODEL: (Front Pas	enger
the of passange		201
(Including drive	f) NPIC/FIN/PASSBORT	of
()	CONTACT:	1151
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	party:	
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	and the state of t	













Liberty Insurance Pte Ltd

Registration no 199002791D 51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 5511 Fax: (65) 5225 5890 Website: http://www.libertylnsurance.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No

SI18V13237 /VMS /R02

Form

MY1

Date of issue

23-Oct-2018

Index Mark and Registration No. of Vehicle:

FBK6178A

2 Chassis number of Vehicle

5HD1HHHC5GC800206

3 Name of Policyholder

QUEK MONG SENG

4.Effective date of Commencement of Insurance

for the purposes of the Act.

09-NOV-2018 00:00

Date of Expiry of Insurance.

08-NOV-2019 23:59

6 Persons or Classes of Persons

ntitled to drive":

QUEK MONG SENG

The Policyholder only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the

7 Limitations as to use

Use only for social, domestic and pleasure purposes and in connection with the Policyholder's business or profession.

8 The Policy does not cover.

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials or speed-testing.
- C) Use for the carriage of goods (other than samples) in connection with any trade or business.
- D) Use for any purpose in connection with the Motor Trade.

"Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987

IWe hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act 1987 (Malaysia).

> For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers

> > Authorised Signature

For Information only:

COVERAGE

Comprehensive, Flood and Special Perils

SUM INSURED (SS)

MARKET VALUE AT THE TIME OF LOSS

Section I \$700.00, Theft (Outside Singapore) \$2,500.00

EXCESS (S\$): FINANCE COMPANY:

PRODUCER NAME:

E TAY TRADING COMPANY



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048550
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: \$665500200 / 057 Reg. No.1 M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report. .:

			ADDE	MUDIN	3.3		
A)	PARTICULARS OF PE	RSONMAKIN	GTHEAMENDME	NTS:		0	÷
	Original Report No	MAGUE	1007252	Vehicle Regi	stration N	. FBK 6/1	18A
	Name(as shownin NRIC)		. 0	NRIC/FIN/P		01000	
	(*Vehicle Driver/*		(*) Please delete a	s appropriate	ssportno		102
	Address	:				Singanor	ol.
{{	Contact (Tel)	:		Mobile No. :	9236	Singapor 4576	el
	Emall Address						
	Date of Accident	150	1/2019	Time of Accid	dent: (4:40 .	
	Place of Accident	: Turcow	u of JALON	BUKI MERO			ROAD
1	Insurance Company	1 00	come W			TOPE NOO	1
	9.						
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					and the same of th	16lo/200	3

Date:

90

MARK SHOWERS -