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TP Particulars: Veh No: - Veh No:	671	. INC()/Non-INC() Paki	
Owner / Driver: (:	Tel:	<i>'</i>	,
Policy No: () Period	d: () (Cover Type: (
Confirmed by : (H	Date:	Timer		1
Insured/Driver Liability: (%) [Not			; P: 21-79%. P:	80-100%	
Year of Registration: () Was)/NO()		00 10010	
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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 wiful 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.

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 u

	ACCIDENT STATEMENT
Date Of Report	11/02/2019 18:39
Date Of Accident	11/02/2019 08:30
Exact Location Of Accident	BRADDELL ROAD AT BISHAN FLYOVER TOWARDS LORNIE
Country/State of Loss	SINGAPORE
Alberta Albert	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBH326U
Insured/Policyholder	
Name Of Registered Owner	TAN XIN RONG ROY
NRIC No	S8832894I
Email Address	RAYMONDTAN_008@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96799588
Alternative Phone No	OTHERS-96799588
Vehicle Particulars	

Vehicle P	articul	ars
-----------	---------	-----

Manufacturer	SUZUKI
Model	GSR600K6

Exact Purpose for which vehicle was being used at

time of accident

COMMUTING TO SCHOOL

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken Vehicle Category

THIRD PARTY MOTORCYCLE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

THIRD PARTY

Fleet Policy

NO

Policy Number

5088355949-01

Cover Note Number

Driver

Name of Driver TAN MING HUI, RAYMOND (CHEN MINGHUI)

NRIC No S9401825J Date Of Birth 23/01/1994 Occupation INDOOR Date Of Driving Pass 10/04/2015

Driving Experience 3 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96799588

Fax Number

Contact Number OTHERS-96799588

EMail Address RAYMONDTAN_008@HOTMAIL.COM Address

BLK 361 HOUGANG AVENUE 5

#06-320

Postcode

530361

SIBLING

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

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?

Foreign Vehicle Registration Number

JSQ677 (MOTORCYCLE)

Number of vehicles (including own vehicle)

involved in the accident

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?

YES

If Yes, Please state which Police Station

Police Station Name

DOVER NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 3 DOVER ROAD , POSTCODE: 130003 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7788999 - FAX NO: 67762859

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190211/2056

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

JSQ677

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)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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:

- (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)
 - (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.

11/02/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Person Name

NRIC/FIN No.:

Policyholder's Signature Date & Time:

SKETCH PLAN	BISHAN	FLYOUR	Along	BRANDELL	. ROAD	
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DECLARATION	N .					
I/We declare the	e foregoing particu	lars are true in ever	ry respect.			1 /
		fa	11/02/10	1	al 11/10	11/2019
Policyholder's Sig Date & Time:	nature			Ren		l's Sighature
CIARMC Statistical	nFarm_V/	Date & Time:		NR	IC/FIN No.:	1000



1 of 3

Report No. T/20190211/2056

Police Station Of Origin: Dover NPP

3 Dover Road #01-368 SINGAPORE 130003

Tel No: 1800-7788999

		CONTRACTOR STREET	
REPORT	OF A	TRAFFIC	ACCIDENT

	Date/Time Report Made: 1/02/2019 12:41		Vide Report No.: Station Diary N		
Informa	nt's Particu	lars			
	Informant: IG HUI, RA	YMOND	Address: APT BLK 361 HOUGANG AV 530361	VENUE 5 #06-320 SINGAPORE	
ID Type NRIC NO	/ ID No.: D / S940182	25J	Contact No.: Home/Office: Mobile: 96999588		
National SINGAP	ity: ORE CITIZ	EN	Email:	2 2	
Sex: Male	Age: 25	Date of Birth: 23/01/1994	Type of Informant: Rider		
Race: Chinese			Language:	Institution / School Name: SIT	
Occupation: Student			Driving Licence Information: Class:	Date of Expiry:	

Seneral Infor	mation of the Accide	nt			
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 11/02/2019 08:30	Type of Location:	
		Road Surface:		Road Speed Limit:	
Weather: Clear		Dry		toad opeed Limit.	
Traffic Flow:		Traffic Control:	3	raffic Volume:	
Type of Collis Between Mor	sion: ving Vehicles - Head	To Rear	6	Anyone conveyed by ambulance:	

Details of V	ehicle Involve	The State of the S	PARTON AND AND AND AND AND AND AND AND AND AN	man a second	100000	N ID
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH326U	Motorcycle				Slightly Damaged	0
JSQ677	Motorcycle					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



2 of 3

Report No. T/20190211/2056

Police Station Of Origin: Dover NPP

3 Dover Road #01-368 SINGAPORE 130003

Tel No: 1800-7788999

CONTINUATION OF REPORT

Rider			16 10 100	1.5.11		004040054
Name	TAN MING HUI, RA	YMOND		ID No.		S9401825J
Related Vehicle	FBH326U (Motorcyc	cle)		Conta	ct No.	96999588
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
	ted Medical Leave	NIL	Degree o	f Injury	NIL	

Brief Details.

On the 11/02/2019 at about 0832hrs, I was riding along Braddell Road near to Bishan flyover. I was riding on the left lane and the car on the merging lane abruptly merged into my lane. Therefore, I tried to avoid the car and out of a sudden the Malaysian motorcycle behind me hit onto my rear of my motorcycle, resulting the rider to fall from his motorcycle. After which, I asked if he was fine and he said that he was fine and rode off. I only manage to get his number plate and no particulars. I have bike camera on my motorcycle which have the footage of the incident.





Police Station Of Origin: Dover NPP 3 Dover Road #01-368 SINGAPORE 130003 Tel No: 1800-7788999

3 of 3 Report No. T/20190211/2056

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 Informant:
Date/Time: 11/02/2019 12:41
Classification Of Case:

Claim Handling Accident MT/1031467 \$1000355849-01 Wenterle No. FBH3060 GST Registration No. Certificate No. Policyholder NRIC 58832694 Policyholder Name TAN XIN RONG BOY Product Code MOTORCYCLE INSURANCE Cover Type Third Farty Lasting Contact No. (Office) Coreact No.(Home) Contact No.(Motive) 96939588 746. * Special flamers Email Address «Code Research VPK. w. No. ... Yes TCA a: 500 Yes NUMBER OF STREET Private Hiro No **NCD Presente** 211 W Accident Details Accident Type Collision - Head to Rear Accident Report Within 24 hrs Report Date 11/02/2019 18:52 Yes Country of Accident Date of Accident 11/02/2019 Time of Accident titi mm 06:30 Singapore Reporting Centre Orange Force ECM No. BRADDELL ROAD AT BISHAN FLYDVER TOWARDS LORRIE Austrient Location Or Excess Windstreen Ferres Additional faces Own stamage Excess Outside Singapore OD Excess Uningraph Driver Excess Outside Singapore TP Excess Third Party Excess 0:00 ⇒ Senetits ♥ GST Registered Information **GST Aegistration Date** GST Regulared OST Registration No. **GST Status** Verified me Modification History ₩ Policyholder Hailing Address STRIGHTONE STORES HOUSAMS AVENUE S Address 3 Address 1 BUX 361 #05-320 Address 1 Address Type Dropepure address Post Code 530361 Address 4 Belated Policy Number 5088295849-01 86-328 @ Of Driver Info Driver Name TAN HING HUI KAYMOND Driver Type Onver DOE 23/01/1994 Driver NATC 594010293 Unnamed driver Name Driving Experience Register Date of Driver License 10/04/2015 Driver April Compact Neurottice) Centact No.(Home). Address 2 Address 3 Address 1 Approve Type Foreign address Pest Cade Address 4 Unit No. Does he own a Singapore Registered car? Driver Vehicle No. FBH326U Orlver Incurer Company MTUC Y45 = NO Declaration Greatratyser or blood Test. Reading? Ves - No Amy intury? Hodification History Claim 001 Num . Insured TAN KIN BONG BOY SBE32894T OD-NX Claim Tabe * 82834574 64236177 92179850 Contact No (Mobile) Vehicle PB-0280 ROYTANKROCHAN.COM 05Q677 Email Address FBH326U / 95Q677 ON 11 Feb 2019 Claim Description Preferred Workshop Bennick No. Yes Feralisation Yes Englarment Listerly Not at Fault CIIA Received Preferred Workshop, Name unkno 11/02/2019 18/94 Dele Registered BOSLI WAHAB Report Taken By F. Print AK letter Save Submit Attachment MT/1031467 Accident No. 11/02/2010 19:02 Upload Date # Yes D No Last Dec. Received Description • Caregory * Path 5 * NO * Normal Choose File No file mosen Cinar Please Select * NO * Normal Chaose File No file chaesn Clear Please Select Choose File | No file chosen Char Please Select * NO * Normal * * NO # Normal * Choose File No file chosen Clear Please Select + NO Choose File No file chosen . . Hease Select Clear + No * No . Choose File No file chosen Clear Please Select Send Message Wetsage Rend W Attachment List Mag Sant? (CD) Ŷ Description Optoaded By/Date Category Urgancy Attachment 51" (MIN) NAC_BUKIT_MERAH_880676[NATIONAL ASSESSMENT CENTRE SERVICE S (BUHIT MERAH)) oo 11 Feb 2019 19:02 NRIC/ Driving License 2019-2-11 NKIC/ Orlving License Normal 0.72 NAC_BURIT_MERAH_BOOK/SE NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 11 Feb 2019 19:02 5A5 2015-2-11 NAC_BLACT_MERAH_BOSG76; NATIONAL ASSESSMENT CENTRE SERVICE S (BUICT MERAH)) on 13 Feb 2019 18:95 Phones 3019-2-11

BAC_RURIT_MERAH_BUDGTS NATURAAL ASSESSMENT CENTRE BERVICE 5 (BUKIT MERAH)) on 11 Feb 2025 18:54	Photos	Normal	
NAC_BURIT_MERAH_BODATA(NATIONAL ASSESSMENT CENTRE SERVICE 3 (BURIT HERAH)) on 11 Feb 2019 18194	Photoe	furmat	
NAC BURIT MERAH BODATE: NATIONAL ASSESSMENT CENTRE BEBYICS			

5 (BUKIT MERAH)) on (1 Feb 2019 18:54	Proces	Sormat	Photos 3019-2-13
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Photos 2019-2-11

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7

Lipitaded By/Date	Finder Date	File Name	

MAC_BURIT_MERAH_BOOGREF NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 17 Feb 2019 18:14

Addin

ACCIDENT STATEMENT

ACCIDENT DATE: 11. 102 100 (DD/MM/	YYYY). TIME: (8 :32)(HH:MM)
	zent along bruddell rood
	: - Drug 611 1008
1. DETAILS OF VEHICLE	
a) VEHICLE NUMBER: FBH 326 LI	N 200 N W
b)INSURANCE COMPANY: NTUC	Encome
c)POLICY NUMBER:	
dIPOLICY TYPE: (COMPREHENSIVE ATHIRD	PARTY / THISD BARTY CIRE STUCKT
O)MAKE & MODEL: Suzelci	TOBET / THIRD PARTY FIRE WITHER!
f)TYPE:(SALOON / COUPE / MPV /VAN / LO	OPPY / GOTOPOVOLE / OTHERS
g) VEHICLE CATEGORY: (PRIVATE / COMM	FRCIAL MOTORCYCLE
h) PURPOSE OF USING AT ACCIDENT TIME:	Connuting to School
I) ARE YOU CLAIMING UNDER YOUR OWN	MISTIDANICE INECHIO
IF NO, PLEASE STATE (THIRD PARTY CLAIM	Y REPORTING ONLY
2. INSURED / POLICY HOLDER	
an Kin Rong, Pay Alname: Fan Ming Hat, Raymo	(MALE) FEMALE)
588328741 b) NRIC/FIN/PASSPORT: 57401825	F CONTACT: 96 799588
CIADDRESS: BIC 361 Hougang A	WE 5 #06-370 Singapon
630,6	
*CONTINUE TO 3.d IF DRIVER ALSO POLICY	Y HOLDER
Ho of passanges DRIVER	1
(Including driver) DINAME: Can Miny Hui Raym	MALE / FEMALE
CITALCHINA ASSPORT: 34 4010 23 J	
530761	e 5 #106-320 stry opone
*d)DATE OF BIRTH: 1 23/ 01/ 1994 10	Q-MINITED AND ADDRESS OF THE PARTY OF THE PA
eJOCCUPATION: (NDOOR / OUTDOOR)	DD/MM/YYYY)
	4/2015
4. WAS DRIVER AN EMPLOYEE OF THE INS	IRED'S COMBANIVA (VEC. 1/10)
INO, RELATIONSHIP OF THE DRIVER W	VITH INSURED. STRIZNO
OF CONDITION; (CLEAR) RAINING	OTHERS_
DIROAD SURFACE: (DRY / WET / OTHERS	
6. WAS ANYBODY INJURED (YES / NO)	
7. a) REPORTED TO POLICE (YES / NO)	:0
IF YES, PLEASE STATE WHICH POLICE STATIC	Dover NPP
# No of passenger a) VEHICLE NUMBER: 350677	dia na managana na managan
Cluded by Deliver States	MODEL:
(Including driver) b) DRIVER'S NAME: () NRIC/FIN/PASSPORT:	
9. THIRD PARTY VEHICLE	CONTACT:
No of passanger d) VEHICLE NUMBER:	F 400 Lance 100
a lea at hassender	MODEL:
(Induding driver) f) NRIC/FIN/PASSPORT:	N 14
()	CONTACT:
Fig	* * * *

email = raymond Tan_ 008@hotmail.com

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S9401825J



Name

TAN MING HUI, RAYMOND (CHEN MINGHUI)

CHINESE 23-01-1994

SINGAPORE



4437547



S9401825J

27-07-2009

APT BLK 361 HOUGANG AVENUE 5 #06-320 SINGAPORE 530361

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES! Class 28 Motorcycles =< 208 CC 26 Sep 2011 Class JA Metersycles between 201 CC and 400 CC 13 Jan 2014 Class 2 Matarryvier > 400 CC 18 Apr 2015 Managents = 3000 kg with == 7 passengers, exclusive of the driver; and motor tracture/vehicles == 2500 kg 27 Aug 2012 S/No. 9000215946 \$94018253

NP 428A

Hello, NAC_BUKIT_MERA	H 800676		232	NAME OF TAXABLE PARTY.	200		Tables Surviv			Gener	alClaim
My Desktop Notice of Loss		Policy Query Change Passwo						ge Password	1 Log O		
		Policy No. Vehicle No.(For Motor)		FBH326U		Date of Accident Certificate Number Search		11/02/2019 17:35			
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC		Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5088355949- 01		TAN XIN RONG ROY	588328941	GMC	Third Party	FBH326U	FBH326U	16/04/2018	15/04/2019