

## 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	01/03/2019 14:49
Date Of Accident	22/02/2019 09:00
Exact Location Of Accident	PIE TOA PAYOH
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBC5130K
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#### Insured/Policyholder

Name Of Registered Owner	KANE ONG WOON CHONG
NRIC No	S8233088G
Email Address	KANEONG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91870005
Alternative Phone No	OTHERS-91870005

#### Vehicle Particulars

Manufacturer	HONDA
Model	PHANTOM-197CC TA200
Exact Purpose for which vehicle was being used at time of accident	TRAVEL TO WORK
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/18-376336-CA
Cover Note Number	

#### Driver

Name of Driver	KANE ONG WOON CHONG
NRIC No	S8233088G
Date Of Birth	05/10/1982
Occupation	INDOOR
Date Of Driving Pass	20/04/2013
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91870005
Fax Number	
Contact Number	OTHERS-91870005
Email Address	KANEONG@HOTMAIL.COM

Address	413 COMMONWEALTH AVENUE WEST #25-3023
Postcode	
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	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	CLEAR

#### 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?	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?	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 PLAN

#### 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	SLR962L
Vehicle Make/Model/Colour	TOYOTA PRIUS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHAN YEOW HONG
NRIC/Passport Number	S7230237J
Contact Number	87888178
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	KANE ONG WOON CHOONG
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Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBC5130K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	413 COMMONWEALTH AVENUE WEST #25-3023
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: 1/3/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

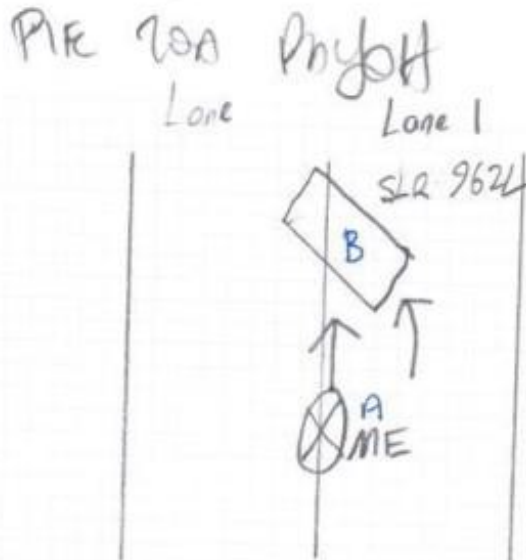
Name:

NRIC/FIN No:

# Accident Sketch Plan

## SKETCH PLAN

A) FBC 5130 K  
B) SLR 962 L



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving in between Lane 1 & 2.  
Car SLR 962 L cut into my direction from Lane 1.  
No left signal was observed, from the car.  
FBF 2434 Y may witness this incident.  
I hit onto the car and the car bumper was damaged.

## DECLARATION

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

Policyholder's Signature:  
Date & Time: 230pm  
1/3/2019

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

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

## Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8233088G



Name  
KANE ONG WOON CHONG  
王 文 聰  
Race  
CHINESE  
Date of Birth  
05-10-1982 Sex  
M  
Country of Birth  
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S8233088G  
Name  
KANE ONG WOON CHONG  
Birth Date 05 Oct 1982  
Issue Date 20 Apr 2013



3311226



NRIC No. S8233088G

Blood Group Date of issue  
18-02-2003

Address  
APT BLK 413 COMMONWEALTH AVENUE WEST  
#25-3023  
SINGAPORE 120413

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

	EFFECTIVE DATE
Class 1B Motorcycles <= 200 CC	30 Apr 2013
Class 2 Motor cars <= 3000 kg <= 10 <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	31 Nov 2013

S8233088G S / No. 9000181217

NP 428A





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





# Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
 6 Raffles Quay #15-00 Singapore 048580  
 Tel (65) 6324 0010 Fax (65) 6324 0030  
 Operating Hours: Monday to Friday, 09:00 - 17:00  
 UEN: S683300200 / GST Reg. No: M400017731

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

## ADDENDUM

### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MX18419028311 Vehicle Registration No: FBC 5130K  
 Name (as shown in NRIC): KANE ONG NRIC/FIN/Passport No: S8233088G  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address: \_\_\_\_\_ Singapore ( )  
 Contact (Tel): \_\_\_\_\_ Mobile No.: 91870005  
 Email Address: \_\_\_\_\_  
 Date of Accident: 22/02/2019 Time of Accident: 09:00  
 Place of Accident: PIE To 2nd Payoff  
 Insurance Company: M81G

### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Insured Vehicle Number To FBC 5130K ON SKETCH PLAN

Policyholder / Driver's Signature  
 Date:

Reporting Centre Personnel's Signature  
 Name: Rose Lim  
 NRIC/FIN No.:  
 Date: 08/03/2019