

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 ability.
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 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	30/08/2017 10:40
Date Of Accident	30/08/2017 07:20
Exact Location Of Accident	AFTER U-TURN OF HOUGANG AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBC477T
Insured/Policyholder	
Name Of Registered Owner	TEO WEE SOON, JAIME
NRIC No	S8702520I
Email Address	JAIMETEO87@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97352018
Alternative Phone No	OTHERS-97352018

Vehicle Particulars

Manufacturer	HARLEY-DAVIDSON
Model	FXDB DYNA STREET BOB
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	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MC/00170975/03
Cover Note Number	17/04/2017 - 16/04/2018

Driver

Name of Driver	TEO WEE SOON, JAIME
NRIC No	S8702520I
Date Of Birth	04/02/1987
Occupation	INDOOR
Date Of Driving Pass	20/01/2014
Driving Experience	3 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97352018
Fax Number	
Contact Number	OTHERS-97352018
Email Address	JAIMETEO87@GMAIL.COM

Address	BLK 358 HOUGANG AVE 5 #13-354
Postcode	530358
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 - HEAD ON COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
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

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

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	SJR4506T
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	LIU WEI
NRIC/Passport Number	S2648461H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name	TEO WEE SOON, JAIME
Approximate Age	

Injuries Sustain

RIGHT HAND,KNEE & ELBOW

Injured person in which vehicle?

FBC477T

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan

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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

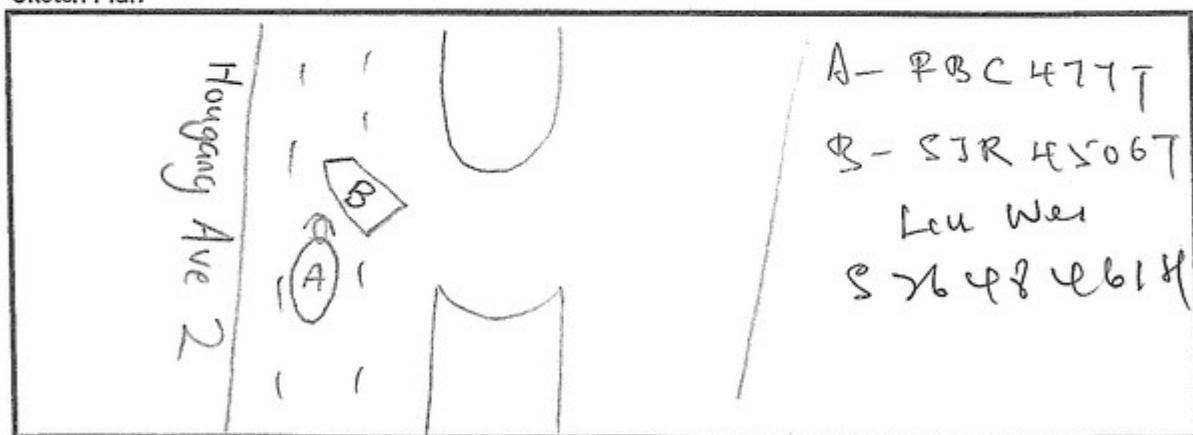
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Date: 30/08/17 Time: 07:20 Location: After U-turn of Hongkong Ave 2

My Vehicle A: FBC 477T Vehicle B: SJR 4506T Vehicle C/Others: NA

Was travelling along Hongkong Ave 2 after a right turn from Upper Serangoon Road. While approaching the u-turn in front of block 708, I noticed a white car was waiting at the u-turn and was cautiously riding past it towards the u-turn exit. At the last moment, the white car drove out in front of me. I horned, jam braked and swerved but could not avoid it. My bike made a glancing T-bone with car and went down on the left side. I was throw off by the impact. Suffered abrasion on my knee and impact on the rear of my helmet. Driver stopped to investigate and exchange details. There was also a lorry driver who witness the accident and stopped to assist.

☐ Claim OD / TP at Ah Lim Motor

☒ Claim OD / TP at other workshop

☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to

My workshop :

Email Address :

& Myself :

Email Address :

Note : Please take note that your insurer have **14 days** timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

Declaration

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

Je

Policyholder's Signature

Date & Time:

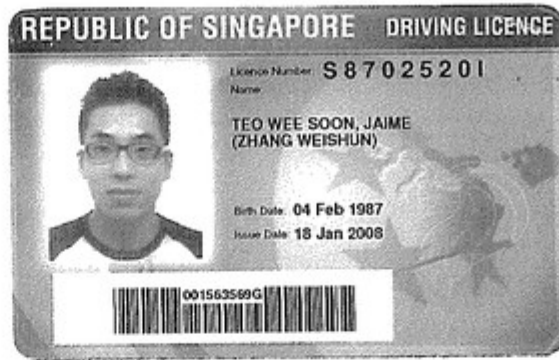
Driver's Signature (If driver is not the policyholder)

Date & Time



Witnessed by Reporting Centre

Personnel



Hp 9735 2018

Email, jaimeteo87@gmail.com

Add: Blk 358 Hongkong Ave 5
 #13-354 sc 530 358)



CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

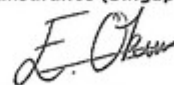
This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	:	MC/00170975/03
Type of Coverage	:	Comprehensive Cover
1) Vehicle Registration No.	:	FBC477T
Chassis No.	:	5HD1GX4158K300569
2) Name of Policy Holder	:	Jaime, Teo Wee Soon
3) Effective Date of Commencement of Insurance for the Purpose of the Act	:	17/04/2017
4) Date of Expiry of Insurance	:	16/04/2018
5) Persons or Classes of Persons Entitled to Drive		
(a) The Insured		
(b) A named driver who is driving on the Insured's order or with his permission.		
Provided that the person driving has a valid Motorcycle driving licence to drive in Singapore and is not under suspension or disqualification from driving.		
6) Limitations as to use*		
Use only for private purposes, in accordance with the declared motorcycle usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.		
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.		
Sum Insured	:	Market Value
Policy Excess	:	S\$ 600.00
Main driver	:	Jaime, Teo Wee Soon
Important Note: The policy only cover the main driver and the following named driver: No named driver declared		
Finance Company / Hire Purchase	:	

I/We 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 the Road Transport Act, 1987 (Malaysia).

Issued on: 24/03/2017

Direct Asia Insurance (Singapore) Pte. Ltd.



Edip Okur
Chief Underwriting Officer

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



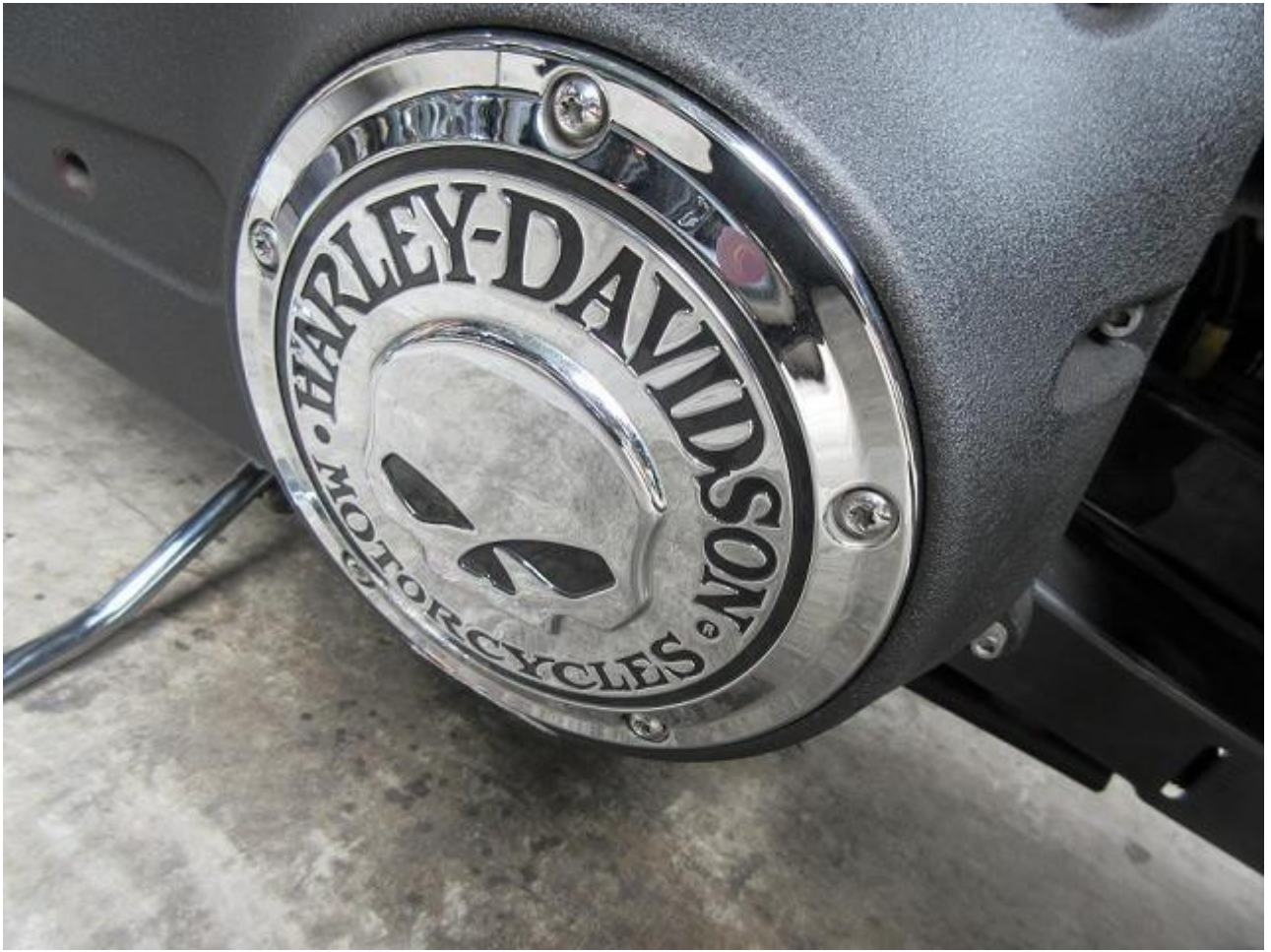
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