





## 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	27/03/2019 15:39
Date Of Accident	27/03/2019 08:45
Exact Location Of Accident	ALONG NICOLL HIGHWAY TOWARDS CITY LAMP POST 79F
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ1474P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	POH ZHI YANG, FABIAN (FU ZHIYANG)
NRIC No	S8742646G
Email Address	POH.FABIAN1@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91522868
Alternative Phone No	OTHERS-91522868

### Vehicle Particulars

Manufacturer	BMW
Model	116D 5DR HATCHBACK DSC LED
Exact Purpose for which vehicle was being used at time of accident	DRIVING TO WORK

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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29082976 QMY
Cover Note Number	

### Driver

Name of Driver	POH ZHI YANG, FABIAN (FU ZHIYANG)
NRIC No	S8742646G
Date Of Birth	27/03/1987
Occupation	INDOOR
Date Of Driving Pass	12/03/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91522868
Fax Number	
Contact Number	OTHERS-91522868
Email Address	POH.FABIAN1@GMAIL.COM

Address: 7 FERNVALE CLOSE  
#06-13  
Postcode: 797488  
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? 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): 3  
Passenger 1: NAME: : WIFE  
GENDER: : FEMALE  
Passenger 2: NAME: : FRIEND  
GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police? YES  
If Yes, Please state which Police Station  
Police Station Name: KRETA AYER NEIGHBOURHOOD POLICE POST  
Police Station Address: ROAD: 32 NORTH CANAL ROAD , POSTCODE: 059282 , COUNTRY: SINGAPORE  
Police Station Contact: TEL NO: 1800-5359999 - FAX NO: 62362541  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190327/2026

#### 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: FBJ1544P  
Vehicle Make/Model/Colour:  
Details Of Properties  
Vehicle Category: MOTORCYCLE  
Name of Driver: SYED

NRIC/Passport Number

Contact Number

87507818

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

### IMPORTANT NOTICE

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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) 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:

27/3/19

1158

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

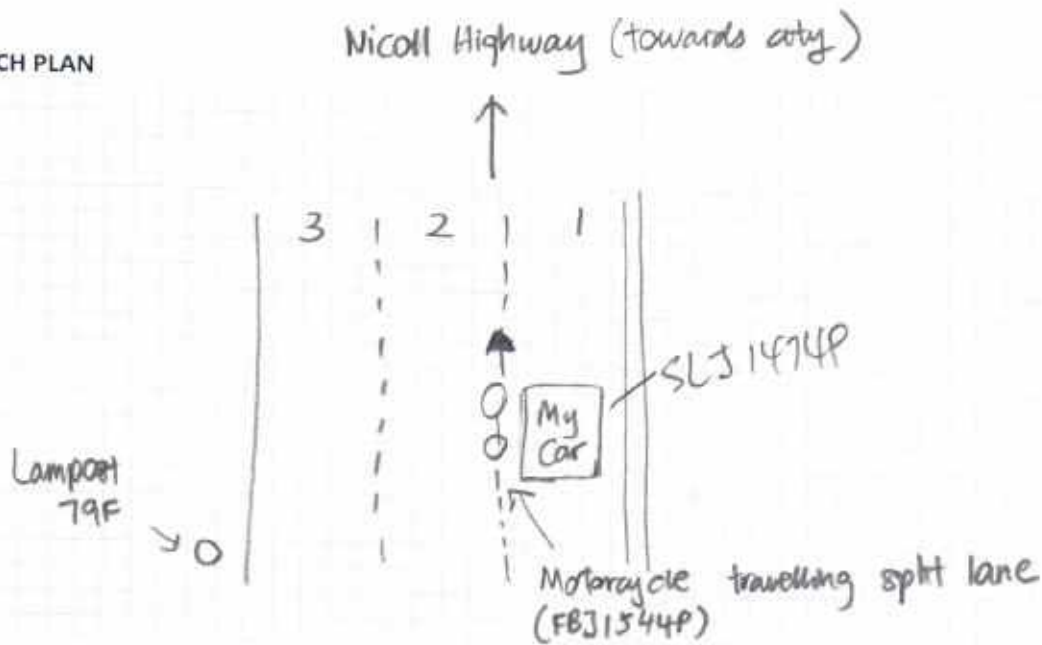
NRIC/FIN No.:



27/03/2019  
Roshan



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*as referred to Police Report  
7/20190327/2026*

DECLARATION

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

*[Signature]*  
Policyholder's Signature

Date & Time:

27/3/19

1158

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

*[Signature]* 22/03/2019  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

22/03/2019

*[Signature]*



# SINGAPORE POLICE FORCE



T/20190327/2026

Police Station Of Origin:  
Kreta Ayer NPP  
32 North Canal Road SINGAPORE 059282  
Tel No: 1800-5359999

1 of 3

Report No. T/20190327/2026

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 27/03/2019 10:52		Vide Report No.:		Station Diary No.: 27	
<b>Informant's Particulars</b>					
Name of Informant: POH ZHI YANG, FABIAN			Address: 7 FERNVALE CLOSE #06-13 SINGAPORE 797488		
ID Type / ID No.: NRIC NO / S8742646G			Contact No.: Home/Office: Mobile: 91522868		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 31	Date of Birth: 29/12/1987	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: BANKER			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 27/03/2019 08:45	Type of Location: Straight Road
Location: Along Road 1 NICOLL HIGHWAY				
Driving along Nicoll Highway towards the City Lamp Post Number: 79F				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ1544P	Motorcycle				Slightly Damaged	0
SLJ1474P	Car				Slightly Damaged	2

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20190327/2026

Police Station Of Origin:

Kreta Ayer NPP

32 North Canal Road SINGAPORE 059282

Tel No: 1800-5359999

2 of 3

Report No. T/20190327/2026

**CONTINUATION OF REPORT**

Driver			
Name	POH ZHI YANG, FABIAN	ID No.	S8742646G
Related Vehicle	SLJ1474P (Car)	Contact No.	91522868
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 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 above mentioned date, and time while travelling on the first lane along Nicoll Highway towards the City, I had intended to filter to the second lane.

I at that time was driving about 30km/h as there was a heavy traffic. I switched on my left signal light, and checked both my rear and blind sight. Upon seeing that it is clear, I had then wanted to head out. That was when the said motorcycle "FBJ1544P" had suddenly came close to the left side of my car. The motorcyclist was in between the first and second lane.

The motorcyclist then had collided to my left side mirror. Since my mirror was adjustable, there were slight damages and my left side mirror was adjusted due to the impact. The incident happened near to Lamp Post number 79F.

I had noticed the motorcyclist moving at a faster speed than I was. I then saw the motorcyclist had fell along with his motorcycle. I had seen no other visible injuries only scratched to his hands. I assisted to call for the ambulance to which he was conveyed conscious. I only managed to get hold of his Handphone number ; 8750 7818.

There are no serious damages to my car.





**SINGAPORE  
POLICE FORCE**



T/20190327/2026

Police Station Of Origin:

Kreta Ayer NPP

32 North Canal Road SINGAPORE 059282

Tel No: 1800-5359999

3 of 3

Report No. T/20190327/2026


**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: A / Sgt 2 SITI NURDIANA BINTE KHAIRUDDIN
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt RAZIZ BIN TAHAR Contact No.: 65476200

Signature Of Informant: 
Date/Time: 27/03/2019 10:52
Classification Of Case:

Authentication Stamp  
NP168



# ACCIDENT STATEMENT

ACCIDENT DATE: (27/03/2019) (DD/MM/YYYY). TIME: (08:45) (HH:MM)

LOCATION: NICOLL HIGHWAY (TOWARDS CITY) NEAR LAMPOST 79F

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLJ1474P  
 b) INSURANCE COMPANY: MSIG  
 c) POLICY NUMBER: A 80457198 QMY  
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: BMW SLJ1474P  
 f) TYPE: SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: DRIVING TO WORK  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO  
 IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY REPORTING

## 2. INSURED / POLICY HOLDER

- a) NAME: POH ZHI YANG FABIAN (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 88742646G CONTACT: 91522868  
 c) ADDRESS: 17 FERNVALE CLOSE #06-13 (S) 797488

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: (29/12/1987) (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING PASS 12 MAR 2008

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: CLEAR / RAINING / OTHERS \_\_\_\_\_

b) ROAD SURFACE: DRY / WET / OTHERS \_\_\_\_\_

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: KRETA AYER POLICE STATION

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FB31544P MODEL: MOTORBIKE  
 b) DRIVER'S NAME: SYED  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 87507818

## 9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

WIFE (F)  
FRIEND (F)

\* No of passenger  
(Including driver)  
(3)

\* No of passenger  
(Including driver)  
( )

\* No of passenger  
(Including driver)  
( )

Email = poh.fabian1@gmail.com

VIDEO



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO S8742646G



Name

POH ZHI YANG, FABIAN  
(FU ZHIYANG)

傅志扬

Race

CHINESE

Date of birth

29-12-1987

Country/Place of birth

SINGAPORE

Sex

M



NRIC No S8742646G

5997023



Date of issue

08-08-2018

Address

7 FERNVALE CLOSE  
#06-13  
SINGAPORE 797488

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8742646G

Name

POH ZHI YANG, FABIAN  
(FU ZHIYANG)

Birth Date 29 Dec 1987

Issue Date 12 Mar 2008



001581011D

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

PASS DATE

Class 3 Motor Class < 3500kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg 12 Mar 2008

L.P. 42/15



Licence No: S8742646G

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 Co. Reg. No. 200412212G CST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
 (REPUBLIC OF SINGAPORE)  
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1  
 Individual Ownership

**MOTOR MAX PLUS**  
**Comprehensive**

Certificate No. A 29082976 QMY

Excess : SGD500  
 Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle  
 SLJ11474P

2. Name of Policyholder  
 Poh Zhi Yang Fabian

3. Effective Date of the Commencement of Insurance for the purposes of the Act  
 23/06/2018

4. Date of Expiry of Insurance  
 28/05/2019

5. Persons or Classes of Persons entitled to drive\*

Poh Zhi Yang Fabian  
 Looi Yee Feng

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

6. Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business.  
 The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or 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 (Malaysia), are not to be included under these headings.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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 Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.  
 Approved Insurers

  
 for Chief Executive Officer





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours: Monday to Friday, 09:00 - 17:00  
UEN: S665500200 / GST Reg. No: M400017735

**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: MAIA49040096 Vehicle Registration No: SLJ 1474P  
Name (as shown in NRIC): POH ZHI YONG, FABIAN NRIC/FIN/Passport No: S8742646G  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address: \_\_\_\_\_ Singapore ( )  
Contact (Tel): \_\_\_\_\_ Mobile No.: 91522868  
Email Address: \_\_\_\_\_  
Date of Accident: \_\_\_\_\_ Time of Accident: 08:45  
Place of Accident: Anchor Kuching Highway Tanjong Pagar 10mp 1087 79F  
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:

POLICY NUMBER A 29082976 QMY

Policyholder / Driver's Signature  
Date:

28/03/2019  
Reporting Centre Personnel's Signature  
Name: Paul W. Hoo  
NRIC/FIN No.: \_\_\_\_\_  
Date: