

## 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	08/04/2019 18:54
Date Of Accident	07/04/2019 09:15
Exact Location Of Accident	ALONG HOLLAND ROAD BEFORE PIERCE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG5353M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MAURICE MICHAEL MANNING
Passport No/FIN	G5991681K
Email Address	MOMANNING@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81823837
Alternative Phone No	OTHERS-81823837

### Vehicle Particulars

Manufacturer	DUCATI
Model	MONSTER 400-398CC (M)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5097974621-01
Cover Note Number	

### Driver

Name of Driver	MAURICE MICHAEL MANNING
Passport No/FIN	G5991681K
Date Of Birth	19/12/1964
Occupation	INDOOR
Date Of Driving Pass	24/01/2018
Driving Experience	1 YEAR AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81823837
Fax Number	
Contact Number	OTHERS-81823837
Email Address	MOMANNING@YAHOO.COM

Address	3 PANDAN VALLEY #14-312
Postcode	597627
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	NO COLLISION
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)	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	UNKNOWN
Vehicle Make/Model/Colour	PORCHE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident 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' 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:

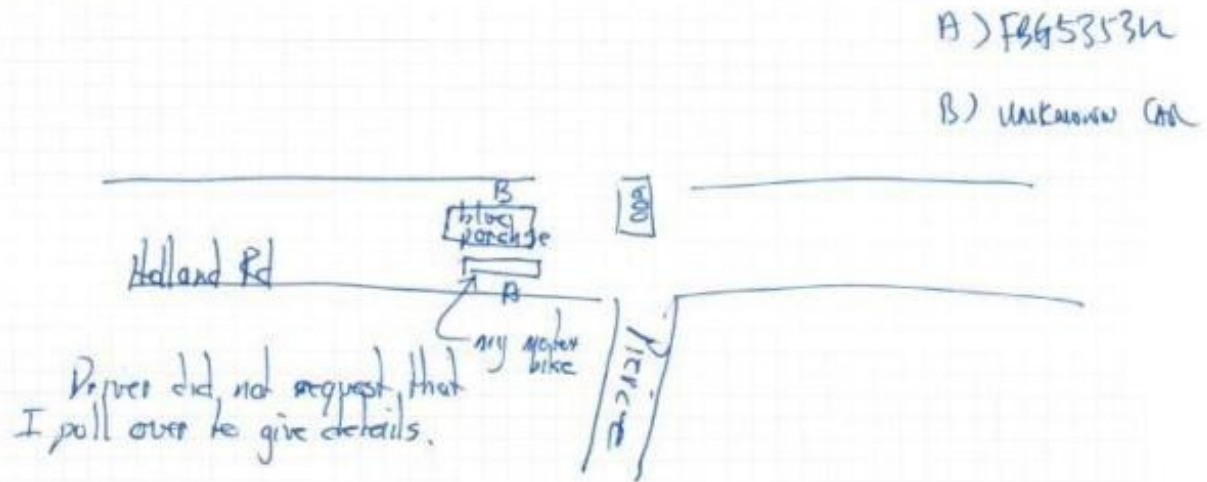
8 April 2019  
10:53

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



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Driver of blue Porsche pulled next to me at traffic light (Holland Rd at Pierce) and said that I had hit his car while moving past at an earlier light on Holland Rd. I told the driver that I don't believe that I did. I moved my motorcycle to other side of car, where he saw damage occurred, he was some dirt but no damage that I saw from a quick look. I again told the driver that I do not believe that I hit his car, ~~but~~ he did not ask me to pull over so when the light changed, I drove off. I did not take down his name or plate number.

## DECLARATION

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

Policyholder's Signature  
Date & Time:  
8 April 2019  
10:52

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

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



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





## Identification Card

**EMPLOYMENT PASS**  
Employment of Foreign Manpower Act (Chapter 21A)  
Republic of Singapore

Employer  
**NATIONAL UNIVERSITY OF SINGAPORE**

Name  
**MAURICE MICHAEL NANNING**  
(Passport)  
**BRICK BUSINESS**

File  
**Q5001916**

Date of Application  
**29-11-2017**

Date of Issue  
**04-01-2018**

Date of Entry  
**04-01-2018**

**U5502488**

**REPUBLIC OF SINGAPORE** DRIVING LICENCE

Vehicle No. **G5991681K**

Name  
**MAURICE MICHAEL NANNING**

Date of Birth  
**15 Dec 1964**

Issue Date  
**24 Jun 2018**

Valid Till  
**24 Jun 2023**

**0002767962**

**VISIT PASS**  
Immigration Regulations

Name  
**MAURICE MICHAEL NANNING**

Date of Birth  
**15-12-1964**

Sex  
**M**

Nationality  
**AMERICAN**

File  
**Q5001916**

Date of Issue  
**04-01-2018**

Date of Entry  
**04-01-2018**

**MULTIPLE JOURNALS VISA ISSUED**

YOU ARE TO Surrender this card when it is CANCELLED  
OR has EXPIRED, ON WHICH A NEW CARD IS ISSUED TO YOU

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

		EFFECTIVE DATE
Class 20	Motorcycles up to 200 cc	24 Jun 2018
Class 2A	Motorcycles between 201 cc and 400 cc	24 Jun 2018
Class 2	Motorcycles > 400 cc	24 Jun 2018
Class 3	Motor cars with gross weight < 3500kg with up to 7 seats (weight, exclusive of the driver, and other motor vehicle with gross weight up to 3500kg)	24 Jun 2018

NP 426A

