

## 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	28/03/2019 16:23
Date Of Accident	27/03/2019 21:30
Exact Location Of Accident	JURONG TOWN HALL RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE7203K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN LIAN ZHEN
NRIC No	S8811382I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91076837
Alternative Phone No	OFFICE-91076837

### Vehicle Particulars

Manufacturer	SUZUKI
Model	GSX1300
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	PNMC2019-00000668
Cover Note Number	

### Driver

Name of Driver	TAN LIAN ZHEN
NRIC No	S8811382I
Date Of Birth	12/04/1988
Occupation	INDOOR
Date Of Driving Pass	06/10/2009
Driving Experience	9 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91076837
Fax Number	
Contact Number	OFFICE-91076837
Email Address	NOEMAIL

Address	BLK 330 JURONG EAST AVE 1 #05-1708
Postcode	600330
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 TO REAR
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED

#### 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	SCF3438J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JEFFREY TAN YONG HENG
NRIC/Passport Number	S7225524J
Contact Number	97959809
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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) 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:

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

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

## Sketch Plan #2

### SKETCH PLAN

Refer to police report

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

### DECLARATION

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

Policyholder's Signature  
Date & Time:

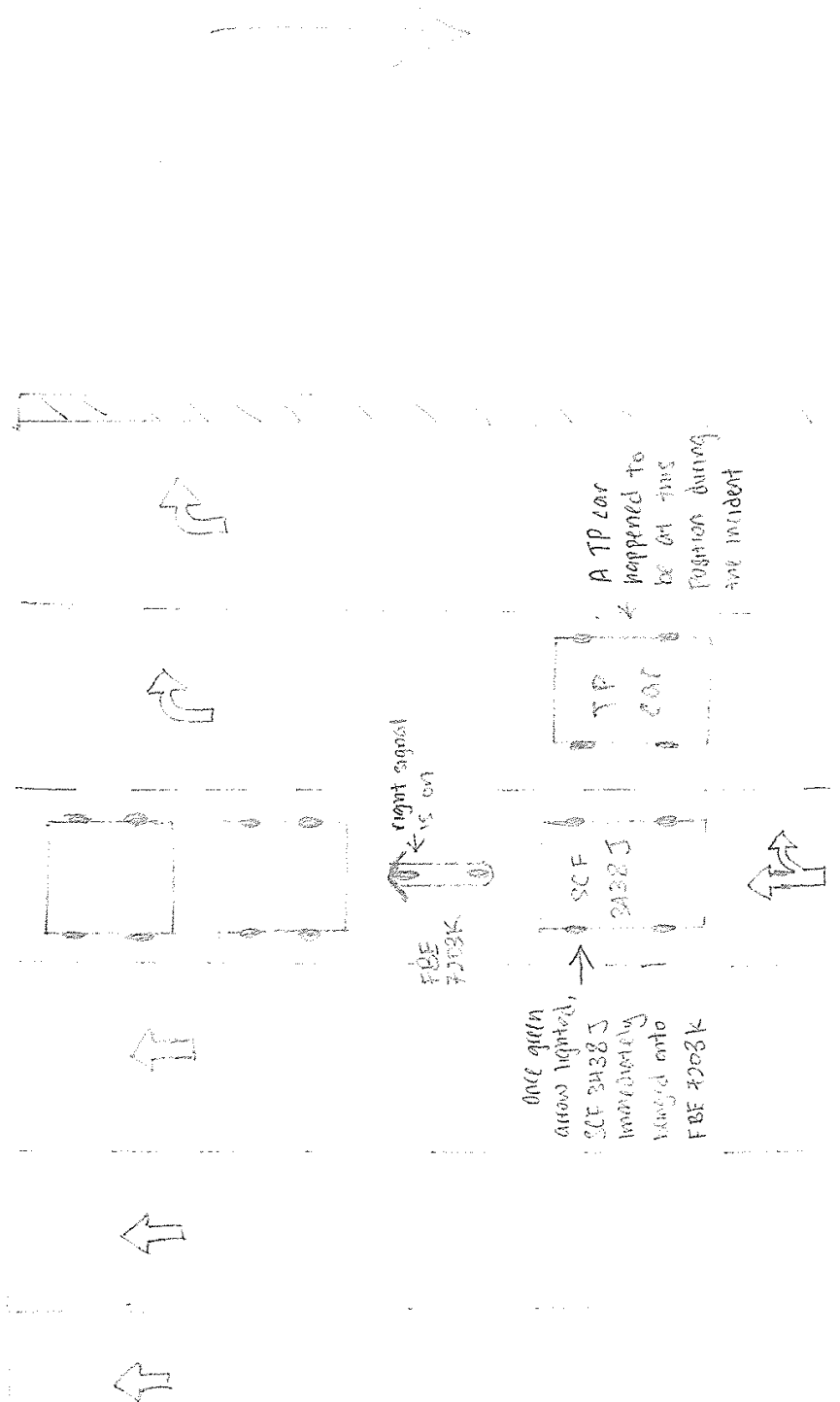
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

→ PIE change

Traffic junction

Turn right on green arrow





## CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance  
if Your Motorcycle breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNM2019-00000668

Plan Name: Third Party Fire & Theft

Motorcycle plate number: FBE7203K

Your name (As the policyholder): Tan Lian Zhen

Coverage start date: 06/02/2019

Coverage end date: 05/02/2020

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to ride: You Only

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Motorcycle Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Motorcycle understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Motorcycle is being used for personal use in accordance with Your contract.

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We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 26/01/2019

Abhishek Bhatia  
Chief Executive Officer  
FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888  
or email us at [contact.sg@fwd.com](mailto:contact.sg@fwd.com) if any details  
in this Certificate of Insurance need to be changed.

IDENTITY CARD NO. S88113821



Name

TAN LIAN ZHEN

陳 聯 禎

Race  
CHINESE

Date of birth Sex  
12-04-1988 M

Country of birth  
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S88113821

Name: TAN LIAN ZHEN

Birth Date: 12 Apr 1988

Issue Date: 28 Apr 2008

001596915C



NRIC No. S88113821



Date of issue  
28-04-2008

Address

APT BLK 330 JURONG EAST AVENUE 1  
#05-1708  
SINGAPORE 600330

4 2 1 9 5 2 6

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

PASS DATE

Class	Description	Pass Date
Class 2B	Motorcycles <= 200 CC	12 Nov 2007
Class 2A	Motorcycles between 201 CC and 400 CC	05 Oct 2009
Class 2	Motorcycles > 400 CC	15 Jul 2011
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	13 Mar 2018

S / No. 9000313341

S88113821



NP 428A





**SINGAPORE  
POLICE FORCE**



T/20190328/7013

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20190328/7013

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
MUHAMMAD KHAIRIL BIN KAMAL  
Contact No.: 65476131

Authentication Stamp

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
28/03/2019 14:38

Classification Of Case:

POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190328/7013

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20190328/7013

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/03/2019 14:38	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: TAN LIAN ZHEN		Address: APT BLK 330 JURONG EAST AVENUE 1 #05-1708 SINGAPORE 600330	
ID Type / ID No.: NRIC NO / S88113821		Contact No.: Home/Office:	Mobile: 91076837
Nationality: SINGAPORE CITIZEN		Email: lianzhen88@hotmail.com	
Sex: Male	Age: 30	Date of Birth: 12/04/1988	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: Others		Driving Licence Information: Class: 2B,2A,2,3      Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/03/2019 21:30	Type of Location: Traffic light
Location:  JURONG TOWN HALL ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE7203K	Motorcycle	SUZUKI	GSX1300RL 0	White		0
SCF3438J	Car			Silver	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE7203K	FWD Singapore Pte. Ltd	PNMC2019- 00000668	06/02/2019	05/02/2020

POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190328/7013

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20190328/7013

CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	TAN LIAN ZHEN	ID No.	S8811382I
Related Vehicle	FBE7203K (Motorcycle)	Contact No.	91076837
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	27/03/2019	Date Discharge	28/03/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight
<b>Driver</b>			
Name	Jeffrey Tan Yong Heng	ID No.	S7225524J
Related Vehicle	SCF3438J (Car)	Contact No.	97959809
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I, vehicle No. FBE7203K, was at the traffic light waiting to turn right with 2 cars ahead of me with right signal on. When the "turn right on green" arrow lighted from red to green, the car, vehicle No. SCF3438J, behind me knocked onto the rear of my motorcycle immediately. The cars in front of me have not moved off yet. My motorcycle was damaged. TP arrived on site. Driving particulars were exchanged. I have sought medical attention at Ng Teng Fong Hospital myself after the incident and given 5 days of MC.

Videos/pictures exceeding 2MB: YES

Any landmarks (e.g. opposite CPF building)?: NO

Location: Jurong Town Hall Road before turning into PIE towards Changi.

Did the accident take place at a pedestrian crossing?: NO

SCENE PHOTO



SCENE PHOTO





SCENE PHOTO



SCENE PHOTO



SCENE PHOTO





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



SCENE PHOTO



## Addendum Sheet



**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: S66550020G / 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 : MYT219040640 Vehicle Registration No: FBE7203K  
Name (as shown in NRIC) : TAN LIAN ZHEN NRIC/FIN/Passport No : S8811382I  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : BLK 330 JURONG EAST AVE 1 #05-1708 Singapore (600330)  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 91076837  
Email Address : \_\_\_\_\_  
Date of Accident : 27/03/2019 Time of Accident : 21:30  
Place of Accident : JURONG TOWN HALL RD  
Insurance Company: FWD Singapore Pte. Ltd.

#### (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:

UPLOAD VIDEO AND RECORRECT VEHICLE NO.

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**SHUYI**

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

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