## 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	21/05/2019 15:52
Date Of Accident	15/05/2019 17:10
Exact Location Of Accident	NORMANTON PARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBF5533R
Insured/Policyholder	
Name Of Registered Owner	KEK HAN BOON
NRIC No	S7432932B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97211305
Alternative Phone No	OFFICE-97211305
Vehicle Particulars	
Manufacturer	KYMCO
Model	SK60AE
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	5061420143-05
Cover Note Number	
Driver	
Name of Driver	SONNY KEK HAN BOON
NDIC No	\$7/32032B

 NRIC No
 \$7432932B

 Date Of Birth
 09/10/1974

 Occupation
 INDOOR

 Date Of Driving Pass
 05/08/2003

Driving Experience 15 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97211305

Fax Number

Contact Number OFFICE-97211305

EMail Address NOEMAIL

**BLK 14 TOH YI DRIVE** Address

#09-31

Postcode 590014

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** 

**COLLISION - ROUNDABOUT** Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

ambulance?

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

YES

YES

1

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

**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 - SINGAPORE CITY

NO

NO

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

Police Station Address **SINGAPORE** 

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT - T/20190516/7005.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SHA8014H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category TAXI

Name of Driver TAN WEE KEONG (TIAN WEIQIANG)

NRIC/Passport Number S7838323B

**Contact Number** 

Address Postcode

Insurance Company Name

Page 2 of 24

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1** 

Name SONNY KEK HAN BOON

Approximate Age

Injuries Sustain BODY
Injured person in which vehicle? FBF5533R

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address 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:

- 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)
  - (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 Signatu

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Perso Name:

's Signature

NRIC/FIN No.

## **Accident Sketch Plan**

SKETCH PLAN	P.A.				
Normanyon perk	<b>國</b> /				A: FEF5373 PL 3: CHA8VNH
DESCRIBE CIRCUMSTANCE					
Refer to police	4 - 4 - d	120190516	Just		
DECLARATION					
I/We declare the foregoing par	ticulars are true in ev	ery respect.			7/2
Policyholder's Signature Date & Time:	Driver's Sign (If driver is a	ature not the policyholder		Reporting Centre	Personnel's Signature

Date & Time:

NRIC/FIN No.:

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## Police Report





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

1 of 3 Report No. T/20190516/7005

Date/Time Report Made: 16/05/2019 11:30			Vide Report No.:	Station Diary No	
Informa	nt's Partic	ulars			
	Informant, KEK HAN		Address: APT BLK 14 TOH YI DRIVE #	#09-31 SINGAPORE 590014	
ID Type / ID No.: NRIC NO / S7432932B		328	Contact No.: Home/Office:	Mobile: 97211305	
Nationality. SINGAPORE CITIZEN		EN	Email: sonnykek@gmail.com		
Sex: Male	Age:	Date of Birth: 09/10/1974	Type of Informant:		
Race: Chinese			Language: English	Institution / School Name	
Occupation: Other administrative and related associate professionals nec			Oriving Licence Information: Class: 2R 2A 2 3 4	Date of Expiry	

Type of Accident:	Attended by Police	Drink Drive:	Accident:	Type of Location Roundabout
Location:		TAD	15/05/2019 17:1	10
NORMANTO	N DADIS			
W. JEWANTER	WHARK			
187 - 17		17		
		Road Surface:		Road Speed Limit:
Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Clear Traffic Flow		Dry Traffic Control:		50 Km/h
Clear Traffic Flow		Dry		
Clear Traffic Flow One Way Type of Collis		Dry Traffic Control Not Controlled		50 Km/h Traffic Volume Light
	ion: ing Vehicles - Side Swip	Dry Traffic Control Not Controlled		50 Km/h Traffic Volume:

Details of V	enicle involve	d				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
FBF5533R	Motorcycle				Continuent	0
SHA8014H	Car	HYUNDAI		Yellow		0

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

## **Police Report**



7/20190516/7005

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

2 or 3 Report No. 1/20190510/7005

## CONTINUATION OF REPORT

Rider				
Plante	SONNY KEK HAN BOON		iD No.	574329325
Related Vehicle	FBF5533R (Motorcycle)		Contact No.	97211305
Hospital/Clinic	MATIONAL UNIVERSITY HOSPITAL		Class of Driving Licence & Expiry Date	Class 2B 2A 2 3 4 Date of Explry: NIL
Date Treatment	15/05/2019	Date Disc	charge   15/05	2019
	ted Medical Leave 103	Degree o	f Injury   Sligh	1
Driver				
Name	TAN WEE KEONG (TIAN WEIG	IANG)	ID No.	\$78383238
Related Vehicle	SHA8014H (Car)		Contact No.	NIL
Hospital/Clinic	MIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry, NIL
Date Treatment	NIL	Date Disc	charge   NIL	
Mo. of Days gran	ted Medical Leave NIL	Degree o		

## Brief Details

Accident involving Tusi SHA8014H and Motorcycle FBF5533R at Normanton roundabout.

This audident happened on 15/5/2018 at Normanton Park roundabout at around 5.10pm. I was travelling along science Park Drive towards Queensway.

Traffic was light and I travel along behind a yellow taxi.

Reaching the round about the taxi enters and I followed behind after checking it was safe to do so in the roundabout the taxi suddenly brake and I immediately move to the right side to avoid it. At this point I was beside the taxi and then it made a sharp right turn and I was hit.

The collision was with the taxi right front area and my motorcycle left side area. I fell and my motorcycle landed at the road divider opposite. Traffic police and ambulance came and I was brought to NUH.

## **Police Report**



GILLIAM GUYY DOOD

HOPERT THE LIGHT DOOR TO LOUIS

3013

To the Public of Order To the Public of Officer one 400000

CONTRADATION OF BEFORE

Sketch High

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Standard Of Officer Recording The Report	Signature Of Informant The identity of the parent making this report has been authenticated by SingPoss. No eighpture is required.
Signature Of Interpreter Not applicable	Date/Time: 15/05/2019 11:30
MOHAMMAD SHAHRIL BIN ABDULLARI Contact No. 65476083	Classification Of Case.
Authentication Stamp	d branch control of the control of t































