Kesend23-04-19;10:54 ;

## RECEIVED 06/05/2019 00:41

Kok Leong

1/ 10

MBI319032289-01 / STA INSPECTION PTE LTD - Doon Ley ENTRY DATE & TIME; 23/04/2019 10:20 SUBMITTED BY; Woodford Richard Vincom

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 23/04/2019 10:52

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Places report <u>correctly</u> the details of the accident to speed up the cisims 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 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 Contra 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 perfec.

  7. By the Indonment of this record to the insurance with barehy secretal to the problems of this record at the contract of t
- 7. By the ladgement of this report to the insurers, you hereby consent to t

	ACCIDENT STATEMENT	
Date Of Report *	23/04/2019 10:23	
Date Of Accident	1B/04/2019 20:3D	
Exact Location Of Accident	ALONG BRADDELL ROAD / LYNWOOD GROVE	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	F8L5278X	
insured/Policyholder	•	
Name Of Registered Owner	ONG JOO YEOW	
NRIC No .	\$0865200G	
Email Address	NOEMAIL .	
Mobile Phone No	(LOCAL) +65-86634615	
	· · · ·	

Alternative Phone No. OFFICE-96634815 Vehicle Particulars

Model

Exact Purpose for which vehicle was being used at

time of accident

Manufacturer

PRIVATE USE

FZN160-149CC

YAMAHA

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Piesse state action to be taken

THIRD PARTY

Vehicle Category

MOTORCYCLE

Insurance Company

Name of Insurance Company

MSIG INSURANCE (SINGAPORE) PTE, LTD.

Type Of Coverage

THIRO PARTY FIRE AND/OR THEFT

Flaat Policy

NO

MALE

Policy Number

MSD/VMS/18-392051-CA

Cover Note Number

Drivor

Name of Driver ONG JOO YEOW NRIC No S0865200G Date Of Birth 04/05/1951 Occupation OUTDOOR Date Of Driving Pass 08/05/1985

Driving Experience 33 YEARS AND 11 MONTHS

Gender

Mobile Number (LOCAL) +65-96634615

Fax Number

Contact Number OFFICE-96634615

EMail Address NOEMAIL

Resend23-04-19;10:54

Kok Leong

2/ 10

Address BLK 185 BISHAN STREET 13 #03-331

Postcode 570185

Was driver an employee of the insured's Company

OWNER If No, Relationship of the Oriver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

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 BISHAN NEIGHBOURHOOD POLICE CENTRE

2

NO

ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: Police Station Address

SINGAPORE

NQ

Police Station Contact TEL NO: 1800-5529999 - FAX NO: 65561905

Was notice of intended Prosecution given?

If Yes, against whom? Circumstances of Accident

REFER ATTACHED Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SLP78598 Vehicle Registration Number

Vehicle Make/Model/Colour NA

Details Of Properties NA

Vahicle Category PRIVATE CAR

Name of Driver NA

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

Kok Leong

# 3/ 10

Resend23-04-19;10:54 ;

No. Of Passenger (Including Driver)

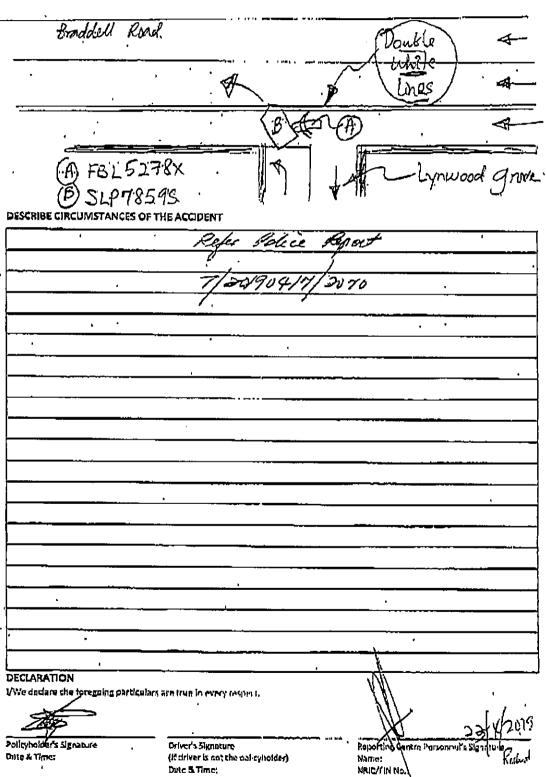
	DETAILS OF INJURED PERSON 1
Name .	ONG JOO YEOW
Approximate Age	67
Injuries Sustain	REFER REPORT
Injured person in which vehicle?	FBL5278X
Were seat belts wom?	NO ,
Was this injured conveyed to hospital by ambulance? .	NO .
Address	· BLK 185 BISHAN STREET 13 #03-331 ·
Postcode	570185

Resend23-04-19;10:54 ;

Kok Leong

# 4/ 10

Skotch Plan



Dute 5. Time;

Mark 1995 Add 2

Page 4 of 21

Resend23-04-19; 10:54

Kok Leong

5/ 10

#### Sketch Plan #2

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report correctly the details of the oxident to speed up the dains process.
- This Form must be completed by the Policyholder and/or the Authorised Driver
- information provided must be as truthful and accurate as possible. Any will misrepresentation or with volding of muturial lacts may allow insurance compenies to repudiate nolicy liability.
- The Bussel and acceptance of this story by incument companies for not an admission of policy likelity on the part of the assorance ദമന്വാര്ല്
- 5. Any false reporting may be referred to the Folice for investigation.
- The rupoil, will be forwarded by the insurers of the GIA Resords Management Curtic established by the General insurance Assetistion of Singapore (GIA) for archiving and that copies of this report will for a tee be made available upon application by Interested parties.
- ?. By the fodument of this report to the insurers, you hereby demont to the archiving of this report at the control of to copies of the report heling made available aforesald.
- 8. Consent under the Personal Data Protection, Act (PDPA)

I understand, acknowledge, agree and content that:

- (a) My losseur, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my memory dott/persons information and on this [form] and any other personal information provided by me or nosecuted by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer's) who have insured vehicle(of involved in the accident fall insurer(s) who have insured vehicles) involved in this accident shall be callectively referred to on the "insurers"), the insurers' inwyers/lay in ms, the · Mondary Authority of Singaporn and any relevant storminant agency/puthority truth as the police), for the purposely.
  - (i) processing hundling and/or dealing with my claims including the subtiment of the claims and any nerwy ary investigations relating to the claims;
  - (II) investigating the accident und/or my dailing
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by men
  - (ly) administering my ciolina (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve distinsure of certain personal duta about me to bring about helivery of the same or well as on the external cover of envelopes/inslipsekegus); and/or
  - (v) complying with applicable law in administering, protessing, handling and/or dealing with my claims (collectively the
- (b) all insurer(s) who have insured vehicle(s) involved in this assistant and the insurers' lawyers/law tirms, may/we permitted 10 called, rise, distinse and/or process my Personal information for one or more of the above Porposes; and
- my Personal information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agentalincluding their lawyors/sust (trans), which may be sited outside of Singapore, for one of the above Parapases.
- my Personal information will also be collected and used to compile claims history for the purpose of traid detection, investigation and monogement in present and all future claims.
- the information so militaries under (d) above may be slived a disclosed:
  - (i) to all injuries and/or any other third parties (that assist in evaluating investigating controlling or managing tract). regulators, law enforcement and government estimotes as reasonably required for the purposes statut, or
  - (II) for complying with requirements undir the substitutory fews or court orders.

Policyholder's Signsture Date & Time

בוטיבר's אווים בייום (if driver is not the policyholder) Date & Times

Adebriing So ง Personnel'กวิเอกมามก

Namel NRIC/FIN NO:

Resend23-04-19;10:54 ;

Kok Leong

# 8/10





Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

1 of 3

Report No. T/20190417/2070

### REPORT OF A TRAFFIC ACCIDENT.

Date/Time Report Made: 17/04/2019 12:27		fade:	Vide Report No.:	Station Diary No.:		
Haforma	ntelPartic					
	f Informant: OO YEOW		Address: APT BLK 185 BISHAN STRE 570185	ET 13 #03-331 SINGAPORE		
	/ ID No,; O / \$086520	00G	Contact No.: Home/Office:	Mobile: 96634615		
Nationa SINGAF	lity: PORE CITIZ	EN ,	Email:			
Sex: Male	1 0 1 1 10 11 - 11 11		Type of Informant: Rider			
Race: Chinese	, == 1		Language:	Institution / School Name:		
Occupa		•	Driving Licence Information:	Date of Evning		

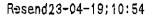
Type of Accident:	Non-injury · Attended by Police	Drink	Date/Time of Accident: 16/04/2019 20:3	Type of Location T-Junction
BRADDELL F LYNWOOD G		wood Grove Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage	· Way.	Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis Between Mov	ion: ing Vehicles - Head To	Side		Anyone conveyed by ambulance: No

		· · · · · · · · · · · · · · · · · · ·			<u></u>	
						<b>计图数图象图像数据</b>
Wehreles No.	Treams	Make 2 Page 1	Modeler	COLUMB	Condition	No of Rassenger
FBL5278X	Motorcycle	YAMAHA	FZN150	Red	Slightly Damaged	0
SLP7859S	Car	MITSUBISHI	SPACE STAR 1,2 CVT	Silver	Slìghtly Damaged	

Details of Vehicle insurance	
Webice No Linsurance Compan	VERTER AND MINISUMPCONOL OF REFERENCE OF THE EXPLOYED TO

Kok Leong

9/ 10







Police Station Of Origin: Bishari N.P.C

2 of 3 Report No. T/20190417/2070

20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

CONTINUATION OF REPORT

ED MAINTEN	The same of the sa	distribution and supplement and supplemental	Salar Salar	Marie
	headle Sample	105 V ANDSO NIS		
EDI 5079V	MOIO INCUSANOS (ONOS SOS			
l .	MSIG INSURANCE (SINGAPORI	E)   MSDSMT1839205	51 02/12/2018	01/12/2019
**************************************	PTE: LTD.			, ,

Any Pedestrian II	Ninvolved	1	A PROPERTY OF		CARROLL STREET,
No. of Pedestriar		Use of Peo	destriar	Cross	ing: NA
RICOL		The state of		- 1	
Name	ONG JOO YEOW		ID No		S0865200G
Related Vehicle	FBL5278X (Motorcycle)		Contact No.		96634615
Hospital/Clinic	TAN TOCK SENG HOSPITAL	, , , , , , , , , , , , , , , , , , ,	Class Drivin Licend Expiry	g	Class: 2B Date of Expiry: NIL
Date Treatment	16/04/2019	Date Disc	<del></del>		/2019
No. of Days gran	ted Medical Leave NIL '	Degree of			

Brief Details.
On 16/04/2019 at 2030hrs, I was riding my motorcycle (FBL5278X) at the T-junction of Braddell Road and Lynwood Grove. I was driving on the second lane, when suddenly a vehicle (SLP7859S) drove out of from Lynwood Grove and went into the second lane instead of the third lane. I wish to state that there is a double white line in between the third and second lane. The driver has to drive into the third lane instead of the second lane. Shortly after, the police and ambulance arrived at scene. However, I was not conveyed by the ambulance and was sent to Tan Tock Seng Hospital by the driver's husband instead.

# 10/ 10

3 of 3

RECEIVED 06/05/2019 00:41 Kak Leong

Resend23-04-19;10:54 ;





Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

Report No. T/20190417/2070

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: E / Sgt 2 MOHAMAD FAIZAL BIN HASHIM TOH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 17/04/2019 12:27
Officer in Charge Of Case: TP / GIT / Staff Sgt MUHAMMAD, KHAIRIL BIN KAMAI Contagt No.: 65476131	Classification Of Case:
Authentication Stamp	

18-04-19;03:05PM; From:

To: .65155215

To: 63975576

Page: 1/1

MSIG

MSIG Insurance (Singapore) Pte. Ltd. (Co.,Rog. No., 2004122120) 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tal +85 6827 7888, Fax +65 5827 7890

maig.com.ag

#### MOTORCYCLE INSURANCE SCHEDULE

**DATE OF ISSUE: 13/12/2018** 

AGENCY: A0074-001-10900

COMMERCIAL AGENCY PTE LTD

03-MAR-2019 03:51 From: COMMERCIAL AGENCY P 62973981

POLICY NO: MSD/VMS/18-392051-CA

INSURED:

NAME: ADDRESS: ONG JOD YEOW

185 BISHAN ST 13

#03-331 SE 570185 NRIC NO:

S0865200G

DRIVING EXP:

DATE OF BIRTH: 04/05/1951 (67 yrs) 08/05/1985 (33 yts)

CONTACT NO:

96634615

BUSINESS OR PROFESSION:

SHIP CAPTAIN

PERIOD OF INSURANCE FROM:

02/12/2018

TO 01/12/2019

12:01AM

REGISTRATION NUMBER:

FBL5278X

CUBIC CAPACITY:

MAKE OF VEHICLE:

YAMAHA

YEAR OF REGISTRATION: 2016

INSURED ESTIMATE OF VALUE: PMV

PREVAILING MARKET VALUE

SEATING CAPACITY:

AUTHORISED DRIVERS:

THE INSURED ONLY.

ENDORSEMENTS APPLICABLE: 2C 2K 3Q 15 M23

PREMIUM:

184.00

EXCESS: \$300(FIRE&THEFT) \$600(ENDT 2K)

CST @ 7%

12.98

TOTAL 1

196.88

NO CLAIM BONUS OF 20% IS ALLOWED

NAME OF EMPLOYER AND/OR

HIRE PURCHASE OWNER: YONG SENG HENG MOTOR SERVICES

REPLACING FOLICY NO: MSD/VMS/17-374109-CA.

Sanction Limitation and Exclusion Clause

No Insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that Insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sunctions, laws or regulations of the European Union or United Kingdom or United States of America,

MSIG losurance (Singapore) Fre. Ltd.

Approved Insurers

