

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	02/07/2019 10:59
Date Of Accident	01/07/2019 06:45
Exact Location Of Accident	WOODLANDS AVENUE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBC3809A
Insured/Policyholder	
Name Of Registered Owner	FONG KIM YEW
NRIC No	S7773900I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90181894
Alternative Phone No	OFFICE-90181894

Vehicle Particulars

Manufacturer	YAMAHA
Model	T135-135CC
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/19-999038-WTT
Cover Note Number	

Driver

Name of Driver	FONG KIM YEW
NRIC No	S7773900I
Date Of Birth	09/08/1977
Occupation	INDOOR
Date Of Driving Pass	09/02/1998
Driving Experience	21 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90181894
Fax Number	
Contact Number	OFFICE-90181894
EEmail Address	NOEMAIL

Address	APT BLK 502A YISHUN STREET 51 #13-408 SINGAPORE
Postcode	761502
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JSG2713 (MOTORCYCLE)
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
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	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP1319U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SEVUGAN PALPANDI
NRIC/Passport Number	G2246033T
Contact Number	82600932
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number JSG2713
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name FONG KIM YEW
Approximate Age 41
Injuries Sustain REFER POLICE REPORT
Injured person in which vehicle? FBC3809A
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? NO
Address APT BLK 502A YISHUN STREET 51
#13-408 SINGAPORE
Postcode 761502


SKETCH PLAN

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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:

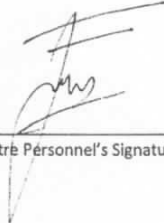
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:



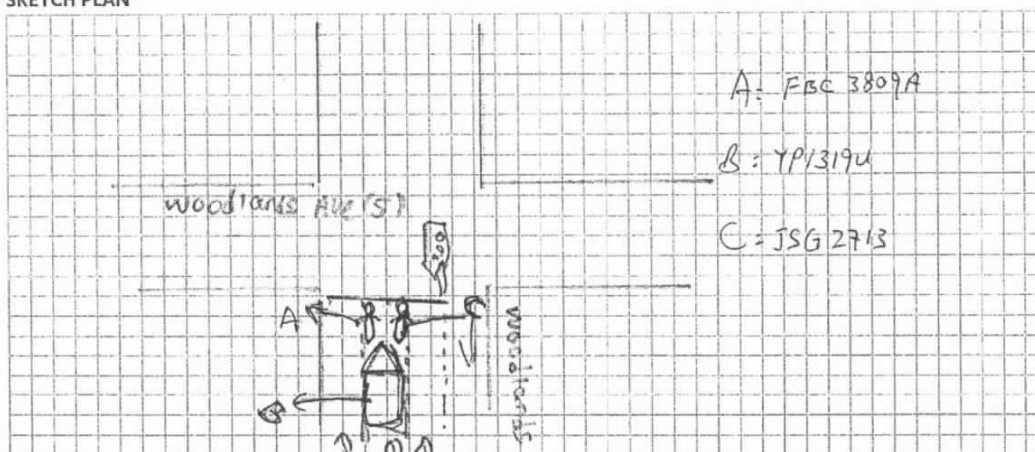
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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- REFER 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.:



**SINGAPORE
POLICE FORCE**



T/20190701/2029

1 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20190701/2029

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/07/2019 10:27	Vide Report No.: L/20190701/0046	Station Diary No.: 51
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Informant's Particulars			
Name of Informant: FONG KIM YEW		Address: APT BLK 502A YISHUN STREET 51 #13-408 SINGAPORE 761502	
ID Type / ID No.: NRIC NO / S77739001		Contact No.: Home/Office: Mobile: 90181894	
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 41	Date of Birth: 09/08/1977	Type of Informant: Rider
Race: Chinese		Language: Chinese	Institution / School Name:
Occupation: CONSTRUCTION WORKER		Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/07/2019 06:45	Type of Location: X-Junction
Location: Along Road 1 WOODLANDS AVENUE 2				
At the cross junction of woodlands AVE 2 and AVE 5				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Woodlands East NPC
No. 3 Woodlands Drive 63
Singapore 737890

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Colour	Damage	No. of Passenger
FBC3809A	Motorcycle	YAMAHA	T135	White Blue	Slightly Damaged	0
JSG2713	Motorcycle				Seriously Damaged	0
YP1319U	Lorry				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date



SINGAPORE POLICE FORCE



T/20190701/2029

1 of 4

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3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20190701/2029

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/07/2019 10:27	Vide Report No.: L/20190701/0046	Station Diary No.: 51
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Informant's Particulars				
Name of Informant: FONG KIM YEW			Address: APT BLK 502A YISHUN STREET 51 #13-408 SINGAPORE 761502	
ID Type / ID No.: NRIC NO / S77739001			Contact No.: Home/Office: Mobile: 90181894	
Nationality: MALAYSIAN			Email:	
Sex: Male	Age: 41	Date of Birth: 09/08/1977	Type of Informant: Rider	
Race: Chinese			Language: Chinese	Institution / School Name:
Occupation: CONSTRUCTION WORKER			Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/07/2019 06:45	Type of Location: X-Junction
Location: Along Road 1 WOODLANDS AVENUE 2				
At the cross junction of woodlands AVE 2 and AVE 5				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Woodlands East NPC
No. 3 Woodlands Drive 63
Singapore 737890

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBC3809A	Motorcycle	YAMAHA	T135	White-blue	Slightly Damaged	0
JSG2713	Motorcycle				Seriously Damaged	0
YP1319U	Lorry				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



SINGAPORE POLICE FORCE



T/20190701/2029

1 of 4

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ID Type / ID No.: NRIC NO / S7773900I			Contact No.: Home/Office: Mobile: 90181894		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 41	Date of Birth: 09/08/1977	Type of Informant: Rider		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: CONSTRUCTION WORKER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/07/2019 06:45	Type of Location: X-Junction
Location: Along Road 1 WOODLANDS AVENUE 2				
At the cross junction of woodlands AVE 2 and AVE 5				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
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
FBC3809A	Motorcycle	YAMAHA	T135	White	Slightly Damaged	0
JSG2713	Motorcycle				Seriously Damaged	0
YP1319U	Lorry				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20190701/2029

2 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20190701/2029

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBC3809A	MSIG INSURANCE (SINGAPORE) PTE. LTD.	60843850	16/02/2019	21/02/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	FONG KIM YEW		ID No.	S7773900I
Related Vehicle	FBC3809A (Motorcycle)		Contact No.	90181894
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL
Driver				
Name	SEVUGAN PALPANDI		ID No.	G2246033T
Related Vehicle	YP1319U (Lorry)		Contact No.	82600932
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 13/02/2023
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

On 01/07/2019 at about 6.45 a.m., I was riding my motorcycle, Blue Yamaha Spark 135CC, FBC3809A, along Woodlands Avenue 2. As the traffic light was red, I had stopped at the traffic light junction of Woodlands Avenue 5.

While I was stationary and waiting for the traffic light to turn green on Lane 3, out of a sudden, there was a lorry, YP1319U, had suddenly knocked me and another motorcyclist, JSG2713. Both motorcyclist came down from our respective motorcycle and stood one side. After that, the Malaysian motorist called for the police. After a while, traffic police and paramedic officers came to the location. No one was conveyed to hospital.

I suffered pain on my right knee and right hand. I have yet to see a doctor.

My motorcycle damages are damaged rear box, exhaust pipe, rear number plate and rear area of the motorcycle is also damage.



**SINGAPORE
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T/20190701/2029

3 of 4

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CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190701/2029

4 of 4

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3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20190701/2029

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:

L /
Staff Sgt MUHAMMAD FAWZEY BIN
KARIMGHANI

Signature Of Interpreter:
Not applicable

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

SN 130

Signature Of Informant:

Date/Time:
01/07/2019 10:27

Classification Of Case:

