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	03/08/2019 08:48
	Date Of Accident	02/08/2019 05:30
	Exact Location Of Accident	NO 18 JALAN NB2 14/7 TAMAN NUSA BESTARI 2 SKUDAI
	Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
	D	ETAILS OF OWN VEHICLE
	Vehicle Registration Number	FBN9468C
	Insured/Policyholder	
	Name Of Registered Owner	TAN KAI SENG
	NRIC No	S8365421Z
	Email Address	SENG1593@HOTMAIL.COM
	Mobile Phone No	(LOCAL) +65-94568198
	Alternative Phone No	OTHERS-94568198
	Vehicle Particulars	
	Manufacturer	YAMAHA
	Model	SNIPER T150-150CC
	Exact Purpose for which vehicle was being used at time of accident	BIKE WAS PARKED
	Are you claiming under your own insurance policy for repair to your vehicle?	YES
	If No, Please state action to be taken	
	Vehicle Category	MOTORCYCLE
	Insurance Company	
	Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
	Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
	Floot Policy	NO

Fleet Policy NO

Policy Number MSD/VMS/19-393541-CA

Cover Note Number

Driver

Name of Driver TAN KAI SENG
NRIC No S8365421Z
Date Of Birth 17/08/1983
Occupation INDOOR
Date Of Driving Pass 15/05/2012

Driving Experience 7 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94568198

Fax Number

Contact Number OTHERS-94568198

EMail Address SENG1593@HOTMAIL.COM

BLK 136 BISHAN STREET 12 Address

#08-430

Postcode 570136

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 **THEFT** 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

1

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

NO

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

NO

Number of Passengers (Including Driver)

0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name QUEENSTOWN N.P.C

ROAD: 3 QUEENSWAY #01-03, POSTCODE: 149073, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-4719999 - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT D/20190802/2007

Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

Accident Sketch Plan

SKETCH PLAN

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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- 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.
- 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 the purpose of the pu
 - 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 Person

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN		
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DESCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT	
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OECLARATION	rticulars are true in every respect.	
, we declare the foregoing par	includes are true in every respect.	1111
1		m 03/08/200)
Policyhoder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:





1 of 2

Report No. D/20190802/2007

POLICE REPORT (NP299)

Police Station Of Origin Queenstown N.P.C 3 Queensway #01-03 SINGAPORE 149073 Tel No: 1800-4719999

Date/Time Report Made	Vide Re	port No.		Station Diary No.
02/08/2019 09:50				11
Name Of Informant	Address			
TAN KAI SENG	APT BLK 136 BISHAN STREET 1		IAN STREET 12 #	08-430
	SINGAPORE 570136			
ID Type / ID No.	Contact No.			
NRIC NO / S8365421Z	Home/Office Mobile			
			94568198	
Nationality	Email Address			
MALAYSIAN				
Occupation	Sex	Age	Date of Birth	Race
CONSTRUCTION SUPERVISOR	Male	35	17/08/1983	Chinese
institution/School Name	Language			
Date/Time Of Incident	Location	Of Inciden	t	
02/08/2019 00:00 - 02/08/2019 05:30	NO 18 JALAN NB2 14/7 TAMAN NUSA BESTARI 2			
	81300 SKUDAI JOHOR			
	MALAYSIA			

Brief details.

On 01/08/2019, at about 1830hrs, I parked my motorcycle FBN9468C inside my front porch. On 02/08/2019 at about 0000hrs, I went to bed and the motorcycle was still there. When I was about to leave my house in the morning at about 0530hrs, i discovered that my motorcycle is not there. My gate had signs of tampering marks. I have reported to the Malaysian police and will be informing my insurance about this issue. Therefore I am lodging this report

Signature Of Officer Recording The Report:	Signature Of Informant:
D / Sgt 3 LEE JIA YAN	1
Signature Of Interpreter: Not applicable	Date/Time: 02/08/2019 09:50
Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp WONG WAI SIONG Contact No.: 67740000	Classification Of Case:
Authentication Stamp	

Police Report



D/20190802/2007

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20190802/2007

S/N	Vehicle Registration Number	Engine No.	Chasis No.	S'pore Car	Status
1	FBN9468C	G3E6E0141631	MH3UG0740J0143	Yes	Stolen Overseas

Signature Of Officer Recording The Report:

D / Sgt 3 LEE JIA YAN

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp WONG WAI SIONG Contact No.: 67740000

Authentication Stamp

Signature Of Informant:

Date/Time: 02/08/2019 09:50

Classification Of Case: