

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	29/07/2019 15:04
Date Of Accident	30/05/2019 09:45
Exact Location Of Accident	CTE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBJ3974T
Insured/Policyholder	
Name Of Registered Owner	CHIONG ZHENG KANG
NRIC No	S9113837I
Email Address	ZHENGKANG91@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98263381
Alternative Phone No	OTHERS-96954291

Vehicle Particulars

Manufacturer	HONDA
Model	CB400-399CC
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5065402007-05
Cover Note Number	THIRD PARTY

Driver

Name of Driver	CHIONG KAH FOO
NRIC No	S2559380D
Date Of Birth	05/05/1963
Occupation	INDOOR
Date Of Driving Pass	09/07/1992
Driving Experience	26 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96954291
Fax Number	
Contact Number	OTHERS-96954291
EMail Address	NOEMAIL

Address	BLK 248 #05-624 COMPASSVALE ROAD
Postcode	540248
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	AFTER RAIN
Road Surface	WET

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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT.

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	SDS5455R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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	CHIONG KAH FOO
Approximate Age	
Injuries Sustain	RIGHT LEG, BOTH ARM
Injured person in which vehicle?	FBJ3974T
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 248 #05-624 COMPASSVALE ROAD
Postcode	540248

Sketch Plan Pg. 1

NTUC Income Motor Service Centre

Report No: MT/

D.O.A:

30.5.19.

Vehicle No:

Make / Model:

FBJ3974T.

Honda CB400

Report Date: 29/7/2019 Start Time: 2:55 PM

Reporting Type: TP

End Time: / /

SKETCH PLAN

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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 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 reasonable required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, law or court orders.

29/7/2019 14:55

Policyholder's Signature
Date & Time:

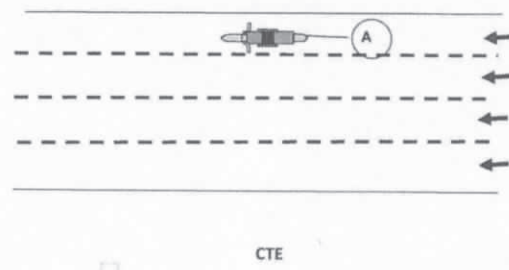
29/7/2019 14:55

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

Reporting Centre Personnel's Signature
Name: Eric Woo Jun Kiat
NRIC/ Fin No: S992753

Sketch Plan Pg. 2

SKETCH PLAN



Vehicle A: FBJ3974T Vehicle B: SDS5455R ☐ CTE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
REFER TO POLICE REPORT.

DECLARATION

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


29/7/2019 14:55
Policyholder's Signature
Date & Time:

29/7/2019 14:55
Driver's Signature (If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: Eric Woo Jun Kiat
NRIC/ Fin No: S992753

POLICE REPORT

SINGAPORE
POLICE FORCE



Police Station Of Origin:

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/06/2019 21:07	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: CHIONG KAH FOO		Address: APT BLK 248 COMPASSVALE ROAD #05-624 SINGAPORE 540248	
ID Type / ID No. NRIC No / S2559380D	Contact No. Home/Office: Mobile: 96954291	Email: ck12026@gmail.com	
Sex: Male	Age: 56	Date of Birth: 05/05/1963	Type of Informant: Rider
Race: Chinese	Language: English	Institution / School Name:	
Occupation: Chef	Driving Licence Information: Class: 2B, 2A, 2, 3	Date of Expiry:	

General Information of the Accident

Type of Accident: Injury	Attended by Police	Drunk Drive: No	Date/Time of Accident: 30/05/2019 09:45	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY				
Weather: Raining	Road Surface: Wet	Road Speed Limit: 90 Km/h	Traffic Flow: One Way	Traffic Control: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				
Anyone conveyed by ambulance: Yes				

Details of Vehicle Involved				
Vehicle No.	Type	Make	Model	Color
FBJ3974T	Motorcycle			
Condition			No of Passenger	
			0	

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



1/20190606/7016

Report No. 1/20190606/7016

1 of 3

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190606/7016

2 of 3

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

Report No. T/20190606/7016

CONTINUATION OF REPORT

Rider			
Name	CHIONG KAH FOO	ID No.	S2559380D
Related Vehicle	FBJ3974T (Motorcycle)	Contact No.	96954291
Hospital/Clinic	RAFFLES HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	30/05/2019	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious

Brief Details.

I was traveling to work via CTE towards the city on my motorbike. The rain was slowly stopping but the road was still wet. As the traffic in the highway was quite heavy, I was slowly cruising in between the most right lanes. It was after the ERP gantry in CTE that I think the accident happen. It happen so suddenly and quickly that I did not know who hit me. I lost conscious after awhile and was brought into A&E at the Raffles Hospital. After the X-Ray the doctor said I fractured both my right arm and right leg. Therefore I believed that I was hit by a vehicle filtering from the left lane to the right lane.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190606/7016

3 of 3

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

Report No. T/20190606/7016

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 / TPIB /
YUS MASTARI I KHAZALI
Contact No.: 65476214

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:
06/06/2019 21:07

Classification Of Case:

[> Back to OneMotoring](#)

Enquire Transfer Fee

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	FBJ3974T		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	HONDA		
Vehicle Model :	CB400		
Chassis No. :	JH2NC4294BK300557		
Propellant :	Petrol		
Engine No. :	NC42E1125644		
Engine Capacity :	399 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	384 kg		
Unladen Weight :	194 kg		
Year Of Manufacture :	2013		
Original Registration Date :	24 Apr 2014		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$4,489.00		
COE Expiry Date :	23 Apr 2024		
Road Tax Expiry Date :	23 Oct 2019		
Inspection Due Date :	23 Apr 2020		
Intended Transfer Date :	05 Aug 2019		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
The current road tax expiry is 23 Oct 2019. You may renew the road tax from 24 Jul 2019 with all pre-requisite(s) fulfilled. If the road tax is renewed after 23 Oct 2019, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable (From 24 Oct 2019 to 23 Apr 2020)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	55.00	-	55.00
Total Amount Payable :			80.00
Amount Payable (From 24 Oct 2019 to 23 Oct 2020)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	110.00	-	110.00
Total Amount Payable :			135.00

You may print this page for reference.

OK

Print