

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	13/08/2019 20:03
Date Of Accident	08/08/2019 18:00
Exact Location Of Accident	BLK 810 CHOA CHU KANG AVENUE 7 MSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN9418Y
Insured/Policyholder	
Name Of Registered Owner	NUR SYAFIQAH BINTE DEWANAN
NRIC No	S9918463I
Email Address	NSYFQH99@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97536084
Alternative Phone No	OTHERS-97536084

Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R155-155CC
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	BUS

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	5106832825
Cover Note Number	

Driver

Name of Driver	NUR SYAFIQAH BINTE DEWANAN
NRIC No	S9918463I
Date Of Birth	15/06/1999
Occupation	INDOOR
Date Of Driving Pass	17/10/2018
Driving Experience	0 YEAR AND 9 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-97536084
Fax Number	
Contact Number	OTHERS-97536084
Email Address	NSYFQH99@GMAIL.COM

Address	BLK 61 GEYLANG BAHRU #06-3253
Postcode	330061
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	3
Was any body injured in the Accident?	NO
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190809/2000

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	SLK3539T
Vehicle Make/Model/Colour	TOYOTA CAMRY 2.5
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBK6667E
Vehicle Make/Model/Colour	GILERA RUNNER
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	83851386
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

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 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: 13/08/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

QUS REFNR 70 POLICER RAPOR
7/20190809/2000

DECLARATION

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


Policyholder's Signature
Date & Time: 13/08/2019

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


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

QUS REFNR 70 POLICER RAPOR

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190809/2000

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

1 of 3

Report No. T/20190809/2000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/08/2019 00:06	Vide Report No.:	Station Diary No.: 4
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Informant's Particulars			
Name of Informant: NUR SYAFIQAH BINTE DEWANAN		Address: APT BLK 61 GEYLANG BAHRU #06-3253 SINGAPORE 330061	
ID Type / ID No.: NRIC NO / S9918463I		Contact No.: Home/Office: Mobile: 97536084	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 20	Date of Birth: 15/06/1999	Type of Informant: Vehicle Owner
Race: Malay		Language:	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: 2B Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/08/2019 18:00	Type of Location: Car Park
Location: Along Road 1 CHOA CHU KANG ROAD 810 Choa Chu Kang Avenue 7 #01-01, Keat Hong Colours, Multi-story car park				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK6667E	Motorcycle	PIAGGIO	GILERA RUNNER ST 200	White	Slightly Damaged	0
FBN9418Y	Motorcycle	YAMAHA	YZF-R155	Blue	Slightly Damaged	0
SLK3539T	Car	TOYOTA	CAMRY 2.5 AUTO	Black		0

POLICE REPORT



**SINGAPORE
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T/20190809/2000

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20190809/2000

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	NUR SYAFIQAH BINTE DEWANAN	ID No.	S9918463I
Related Vehicle	NIL	Contact No.	97536084
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 08/08/2019 at around 1800hrs, i parked my bike (FBN9418Y) for school classes at 810 Choa Chu Kang Avenue 7, Keat Hong Colours Multi-story car park level 1 but could not remember the lot number. I returned back to my bike from my class at around 1930hrs and saw a note left on my bike saying "Urgent, call me at 94550373. I called the number and a guy picked up saying that he saw a black Toyota car knocked onto my stationary bike while it was reversing and the car drove off. The witness mentioned that he saw the whole incident and the driver was Chinese uncle in his late 40's.

I went to check my bike and I saw that the right side of my bike handle has chipped off and I suspect that my bike might have fell and knocked onto the bike (FBK6667E) parked beside mine. I went over to see the bike parked beside and saw a hole on the right body of that bike. The witness has also left a note for the other bike as well. I would like to mention that my bike has suffered some scratches on both side and the fairing was dented. My bike's balancer was also damaged.

There were CCTV around the vicinity and when I arrived at the carpark, both my bike and the other bike was already being carried up. I did not witness the accident and the car was no longer there as well. I called the witness and he said that he will also help me liaise with the other bike owner for this incident.

That is all.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190809/2000

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20190809/2000

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:
A /
Sgt 2 MADELINE LOW GEK TING

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
09/08/2019 00:06

Officer In Charge Of Case:
TP / HRT /
Insp GOH GEOK LYE
Contact No.: 65476148

Classification Of Case:

Authenticated
NP168



SINGAPORE
POLICE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

