

## 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	19/08/2019 11:35
Date Of Accident	11/08/2019 17:10
Exact Location Of Accident	LAVENDER STREET / CAVAN ROAD.
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF4565E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MAK THNG KONG
NRIC No	S9001819A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98399304
Alternative Phone No	OFFICE-98399304

### Vehicle Particulars

Manufacturer	SUZUKI
Model	DR 125SMM
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	5109180793
Cover Note Number	

### Driver

Name of Driver	MAK THNG KONG
NRIC No	S9001819A
Date Of Birth	11/01/1990
Occupation	OUTDOOR
Date Of Driving Pass	10/03/2019
Driving Experience	0 YEAR AND 5 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98399304
Fax Number	(LOCAL) +65-98399304
Contact Number	OFFICE-98399304
EEmail Address	NOEMAIL

Address	APT BLK 337B TAH CHING ROAD #14-59 SINGAPORE
Postcode	612337
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	SIDE SWIPE
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	2
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	TIONG BAHRU NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 128 KIM TIAN ROAD #01-123/ 125 , <b>POSTCODE:</b> 160128 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2739999 - <b>FAX NO:</b> 62785651
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	
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHOW WING CHUEN RICHARD
NRIC/Passport Number	S0374240G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	MAK THNG KONG
Approximate Age	
Injuries Sustain	RIGHT HAND AND LEG.
Injured person in which vehicle?	FBF4565E
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

# Accident Sketch Plan

## SKETCH PLAN

### IMPORTANT NOTICE

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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.

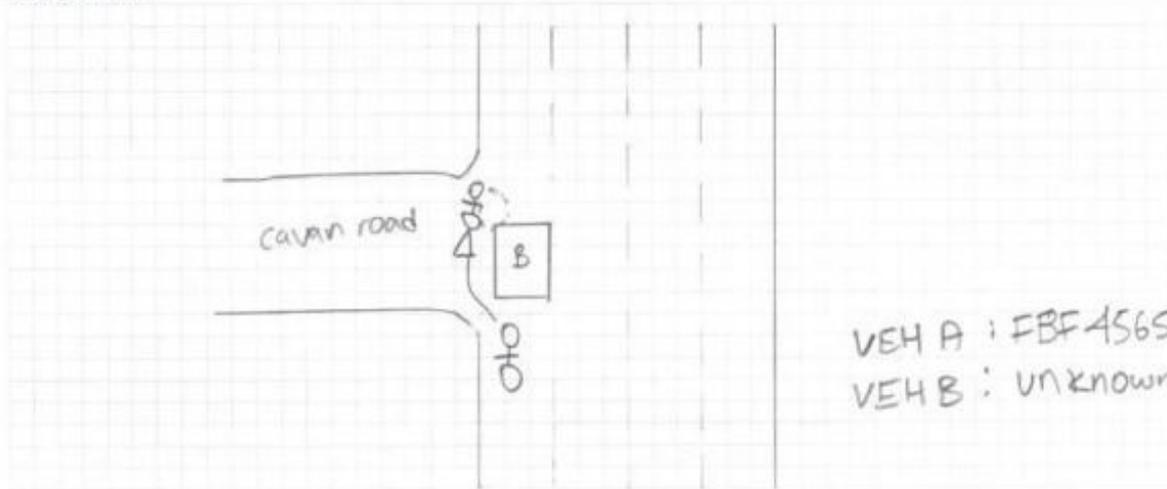
Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 19/02/19  
11:27am

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was riding along the left lane of Lavender St towards Balesfier Rd at approximately 40kmh to 50kmh. As I was approaching Cavan rd junction, Veh B was in front of me, it suddenly slowed down without any signal but still going straight ahead at very slow speed. As I was nearing him, I checked my left and right mirrors and blind spots, there are vehicles approaching on the right and no vehicles coming out from Cavan rd, looking at the car without signal and low speed, I went ahead from the left making space between me and veh B. When I was near the center of the lane before the divider line of Cavan rd, I felt something amiss on the right, so I checked, which to my shock, he turned into Cavan rd which I was hit on the right side by his front left corner and to which I landed near the divider line of Cavan rd.

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: 19/08/19

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

11:47am

**POLICE REPORT**



**SINGAPORE  
POLICE FORCE**



T/20190818/2092

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

1 of 3  
Report No. T/20190818/2092

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 18/08/2019 19:01	Vide Report No.:	Station Diary No.: 34
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Informant's Particulars			
Name of Informant: MAK THNG KONG		Address: APT BLK 337B TAH CHING ROAD #14-59 SINGAPORE 612337	
ID Type / ID No.: NRIC NO / S9001819A		Contact No.: Home/Office:                      Mobile: 98399304	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 29	Date of Birth: 11/01/1990	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: PERSONAL TRAINER		Driving Licence Information: Class: 2B                      Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/08/2019 17:10	Type of Location: T-Junction
Location: Along Road 1 Traveling Toward Road 2 LAVENDER STREET  Lavender Street T-Junction Cavan Rd, near to ABC King.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF4565E	Motorcycle	SUZUKI	DR 125SM M	White	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF4565E	NTUC Income Insurance Co-Operative Limited	5109180793	29/04/2019	28/04/2020

POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190818/2092

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

2 of 3

Report No. T/20190818/2092

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MAK THNG KONG	ID No.	S9001819A
Related Vehicle	FBF4565E (Motorcycle)	Contact No.	98399304
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	11/08/2019	Date Discharge	11/08/2019
No. of Days granted Medical Leave	06	Degree of Injury	Slight
Driver			
Name	CHOW WING CHUEN RICHARD	ID No.	S0374240G
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 11/08/2019 at about 1710hrs, I was travelling along Lavender Street on my motorcycle FBF4565E going towards Jalan Besar, and on my right was a dark coloured car. As there was sufficient space on his left, I then moved to the car's left and rode forwards. Suddenly, the car then immediately made a left turn into my path and collided with the right side of my bike. I then fell and sustained some abrasions on my right arm and right leg and we then exchanged particulars at the scene. I then called for police vide A/20190811/0089. When police arrived, they recorded our particulars. I then waited for the tow truck and took a Grab to SGH. I was then discharged with 6 days of MC. I cannot recall the vehicle number of the car at this point of time. I wish to state that the car did not give a left signal indicator before turning into my path.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190818/2092

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

3 of 3

Report No. T/20190818/2092

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 / Sr Staff Sgt MUHAMMAD ANDI SUFIAN BIN MOHD SHAH	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 18/08/2019 19:01
Officer In Charge Of Case: TP / GIT / SI MOHAMMAD ABDILLAH BIN PALIL Contact No.: 65476246	Classification Of Case:
Authentication Stamp NP168	

Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE



NRIC No. S9001819A

MAK THNG KONG

Birth Date: 11 Jan 1990  
Valid Date: 10 Mar 2019

002910075J

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9001819A



Name  
MAK THNG KONG

麥騰光

Race  
CHINESE

Date of birth  
11-01-1990

Sex  
M

Country of birth  
SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

Class 2B Motorcycles <= 200 cc

EFFECTIVE DATE  
10 Mar 2019

Licence No: S9001819A

NP 428A

NRIC No. S9001819A

Date of issue  
17-10-2007

APT BLK 337B TAN CHING ROAD #14-59  
SINGAPORE 612337

NRIC No: S9001819A Date: 25/04/2008 No: 5978791

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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