

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	28/08/2019 19:12
Date Of Accident	26/08/2019 19:00
Exact Location Of Accident	ALONG JLN BUKIT MERAH TOWARDS KG BAHRU ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD8232G
Insured/Policyholder	
Name Of Registered Owner	WEE TECK HIN
NRIC No	S1431423G
Email Address	WEE3232@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98183745
Alternative Phone No	OTHERS-98183745

Vehicle Particulars

Manufacturer	MAZDA
Model	6-2.5 4-DOOR SEDAN 2.5L SP.6E (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29121620 QMX
Cover Note Number	

Driver

Name of Driver	WEE TECK HIN
NRIC No	S1431423G
Date Of Birth	22/10/1960
Occupation	INDOOR
Date Of Driving Pass	06/05/1982
Driving Experience	37 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98183745
Fax Number	
Contact Number	OTHERS-98183745
Email Address	WEE3232@GMAIL.COM

Address	32 MAS KUNING TERRACE
Postcode	126874
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	NO COLLISION
Weather Conditions	RAINING
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	CLEMENTI NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 427 CLEMENTI AVENUE 3 , POSTCODE: 120427 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7759999 - FAX NO: 67764246
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190826/2186

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH THE POLICE OFFICER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBM4049S
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	UNKNOWN RIDER
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBM4049S
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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:

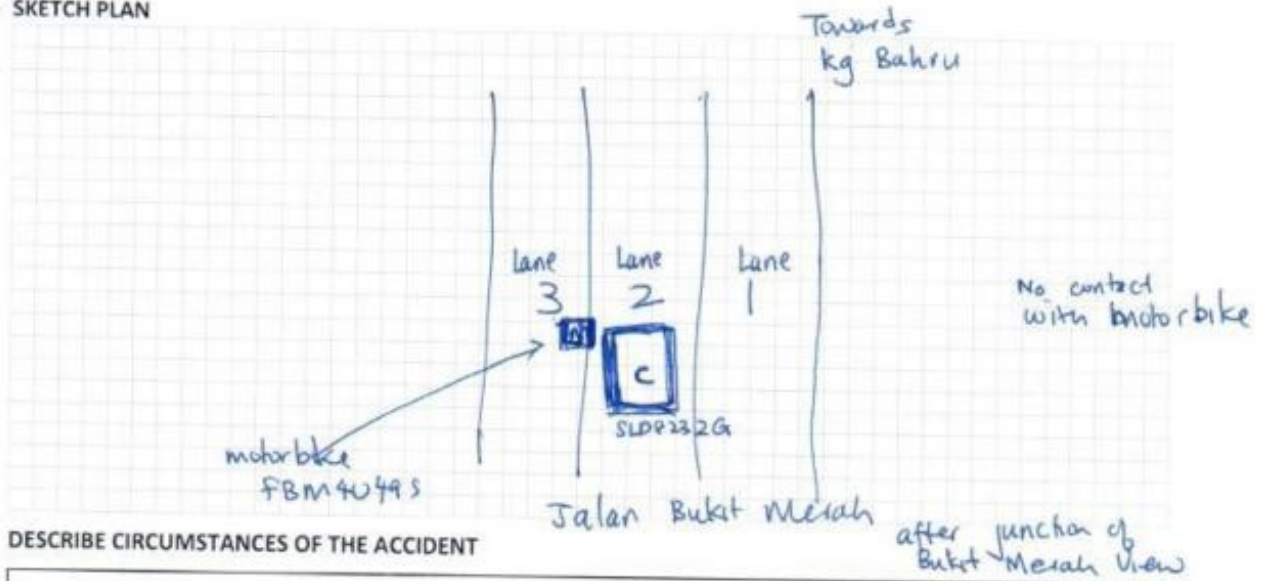
28/8/19

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

See Police Report D/20190826/0087
7/20190826/7186

26/8/19

Note: ① Called MSIG Hotline at 9pm to report accident but was advised not necessary to report IDAC as no contact made with bike and advised to call during office hours

abt 4pm, 27/8/19

② Called motor office claims and seek advice. Told to just make report at IDAC. They noted and ok that report done after 24 hours of accident as

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.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190826/2186

1 of 3

Report No. T/20190826/2186

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/08/2019 20:42		Vide Report No.: D/20190826/0087	Station Diary No.: 27
Informant's Particulars			
Name of Informant: WEE TECK HIN		Address: 32 MAS KUNING TERRACE SINGAPORE 126874	
ID Type / ID No.: NRIC NO / S1431423G		Contact No.: Home/Office: Mobile: 98183745	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 58	Date of Birth: 22/10/1960	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: IT DIRECTOR		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/08/2019 19:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 JALAN BUKIT MERAH KAMPONG BAHRU ROAD Jalan Bukit Merah towards Kampong Bahru Road after the X-junction of Bukit Merah View				
Weather: Drizzling	Road Surface: Wet	Road Speed Limit:		
Traffic Flow: One Way	Traffic Control:	Traffic Volume: Heavy		
Type of Collision: Self-skidded	Anyone conveyed by ambulance: Yes			

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBM4049S	Motorcycle				Slightly Damaged	0
SLD8232G	Car	MAZDA	MAZDA6 4-DOOR SEDAN 2.5L SP.6EAT SR LED	Red	No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190826/2186

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20190826/2186

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLD8232G	MSIG INSURANCE (SINGAPORE) PTE. LTD.	9VPCB1862780	18/05/2019	17/05/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WEE TECK HIN	ID No.	S1431423G
Related Vehicle	SLD8232G (Car)	Contact No.	98183745
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 26/08/2019 at about 1900hrs, I was driving my car (SLD8232G) along the 2nd lane of a 3 lanes traffic. It was drizzling and the road was wet. The traffic volume was heavy.

As the traffic was heavy and my car came to almost to a stop. As the left lane was clear, I wanted to make a lane change to the left most lane, I turned on my left signal light to indicate my intention but I don't think that I did filter out from the 2nd lane. The next thing I realised that a motorcycle has passed my car and skidded. The rider fell on the road. After that, I then slowly moved my car to the left lane to render aid to the rider. There was also passer-bys who came to help. We then called the ambulance and the Police.

The rider could speak to us but was in pain. We did not see any bleeding on the rider. Ambulance came and also the Traffic police officer, SGT Joshua. I related the incident to SGT Joshua and also informed him that I have my in-car camera. I then handed over the SD card to him for him to review.

I wish to state that there was no contact between my car and the motorcycle. According to SGT Joshua, understood that there are minor scratches on the right hand side of the motorcycle. The rider was conveyed to the hospital by the ambulance. I pray that the rider will be okay and no major injuries.

POLICE REPORT



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999



T/20190826/2186

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Report No. T/20190826/2186

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:
D /
Sr Staff Sgt MUHAMMAD NAZRI BIN PARJALI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD
YUSOF
Contact No.: 65476358 / IO Jerry 65476213
Authentication Stamp
NP188

Signature Of Informant:

Date/Time:
26/08/2019 20:42

Classification Of Case:

SINGAPORE
POLICE FORCE
SN 40
SIGNATURE

POLICE REPORT



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: P/20190826/0037

I, Sgt (R) TISOUOI Tuduia
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)
of 10 Ubi Ave 3 (Police Police)
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One blue SD card Samsung 16GB
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

from S14314256, Wee Teck Hin
(Name, NRIC or Passport No. / Rank and No.)
of 32 Mas Kuning Terrace, S(126874)
(Address / Police Station / NPC / NPP)
on 26/8/19 at 1934 hr
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

Received by:

[Signature]
(Signature)
S14314256
(Name, NRIC or Passport No. / Rank and No.)

[Signature]
(Signature)
Sgt (R) TISOUOI
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: RTA @ Jln Bt Merah > 105 Police Rd
photo x Bt Merah View
ID: Jemy 65476213
 Lodge traffic accident report CNP/65
see 20 @ TPA 11am on 22/8/19

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

