

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	10/10/2019 14:17
Date Of Accident	10/10/2019 07:50
Exact Location Of Accident	SERANGOON NORTH AVENUE 1, B/120&121 OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP4951X
Insured/Policyholder	
Name Of Registered Owner	CLYFF TAN LU SHEN
NRIC No	S9744478A
Email Address	CLYFFTLS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87265008
Alternative Phone No	OFFICE-87265008

Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R155
Exact Purpose for which vehicle was being used at time of accident	
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/19-500223 (TPFT)
Cover Note Number	

Driver

Name of Driver	CLYFF TAN LU SHEN
NRIC No	S9744478A
Date Of Birth	10/12/1997
Occupation	OUTDOOR
Date Of Driving Pass	09/04/2019
Driving Experience	0 YEAR AND 6 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-87265008
Fax Number	
Contact Number	OFFICE-87265008
Email Address	CLYFFTLS@GMAIL.COM

Address	BLK 121 SERANGOON NORTH AVENUE 1 #06-191
Postcode	550121
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	2
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	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA7670U
Vehicle Make/Model/Colour	HYUNDAI / I40 1.7L CRDI AT ABS AIRBAG 4DR
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	90732511
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

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:

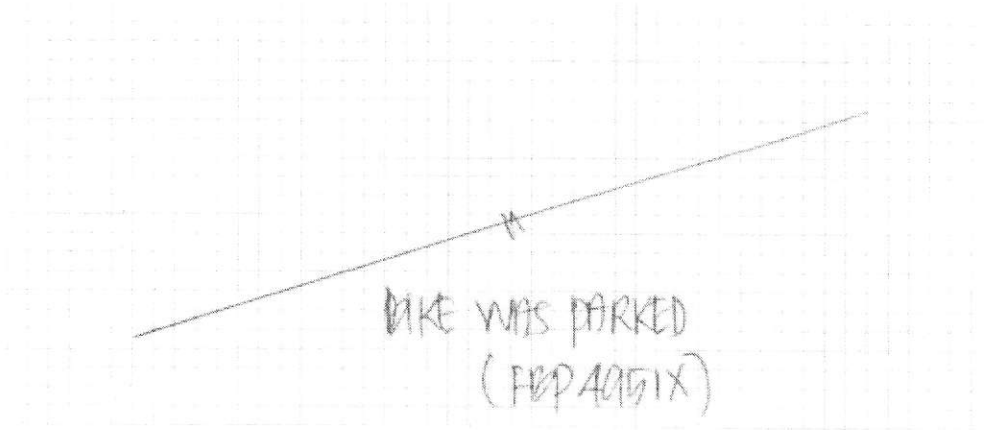
10 OCT 2019

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vac@idac.com.sg
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to
Police Report

The form contains a large, faint, curved line drawn across the grid area, possibly indicating a path or boundary. The text "Refer to Police Report" is handwritten at the top of the form.

DECLARATION

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

Policyholder's Signature 10/10/11
Date & Time 10 OCT 2013

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

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4
Singapore 415933

Tel. 67416697 Fax: 67492305

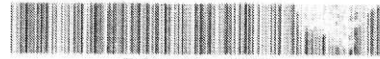
Email: vackb@singnet.com.sg

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

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20191010/2020

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

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Report No. T/20191010/2020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/10/2019 09:06	Video Report No.:	Station Diary No.: 20
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Informant's Particulars

Name of Informant: CLYFF TAN LU SHEN			Address: APT BLK 121 SERANGOON NORTH AVENUE 1 #06-191 SINGAPORE 550121	
ID Type / ID No.: NRIC NO / S9744478A			Contact No.: Home/Office: Mobile: 87265008	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 21	Date of Birth: 10/12/1997	Type of Informant: Vehicle Owner	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: SALES EXECUTIVE		Driving Licence Information: Class: 2B 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/10/2019 07:50	Type of Location: Car Park
Location: Along Road 1 SERANGOON NORTH AVENUE 1 BETWEEN BLK 120 & BLK 121 SERANGOON NORTH AVENUE 1 OPEN CARPARK				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
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
FBP4951X	Motorcycle	YAMAHA	R15	Black	Slightly Damaged	0

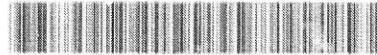
Details of Person Involved

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

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20191010/2020

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

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Report No. T/20191010/2020

CONTINUATION OF REPORT

Vehicle Owner			
Name	CLYFF TAN LU SHEN	ID No.	S9744478A
Related Vehicle	FBP4951X (Motorcycle)	Contact No.	87265008
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B.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 09/10/19 at about 2200hrs, I parked my black colour Yamaha R15 motorcycle reg.FBP4951X, at the open carpark lot 144 between Blk 120 and Blk 121 Serangoon North Avenue 1. At that time, my motorcycle was the only bike at the motorcycle lot. After that, I went home.

On 10/10/19 at about 0750hrs, I went back to my motorcycle and I discovered that my motorcycle was lying on the floor and totally out from the motorcycle lot. I believed that some unknown vehicle had hit and run on my motorcycle. No note was left behind. My motorcycle sustained damages on my clutch lever, my handle bar and my ferrings. There is no CCTV at the open carpark.

Individual Statement



SINGAPORE
POLICE FORCE



T/20191010/2020

Police Station Of Origin
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

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Report No. T/20191010/2020

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: F / Sr Staff Sgt CHER KOK KENG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/10/2019 09:08
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:

Authentication Stamp
NP158