SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number

Fax Number
Contact Number

EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	24/10/2019 11:27
Date Of Accident	05/10/2019 09:10
Exact Location Of Accident	SIN MING MOTOR PARKING LOT NO:338 (COMFORT DELGRO)
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FV6149D
Insured/Policyholder	
Name Of Registered Owner	WEE YI MING
NRIC No	S9714212B
Email Address	WEEYIMING2@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96894832
Alternative Phone No	OTHERS-96894832
Vehicle Particulars	
Manufacturer	HONDA
Model	CB400-399CC
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	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MSD/VMT/19-394632-CA
Cover Note Number	
Driver	
Name of Driver	WEE YI MING
NRIC No	S9714212B
Date Of Birth	30/04/1997
Occupation	OUTDOOR
Date Of Driving Pass	24/01/2019
Driving Experience	0 YEAR AND 8 MONTH

MALE

(LOCAL) +65-96894832

WEEYIMING2@GMAIL.COM

OTHERS-96894832

Address BLK 668A JURONG WEST STREET 64

#01-116

Postcode 641668

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?

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191023/2182

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 FS29Y

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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

FBG2527Z

Page 2 of 24

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

Accident Sketch Plan

SKETCH PLAN

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 interested parties.
- 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:
 - 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:
 - 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: 13/10/1304 Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Person

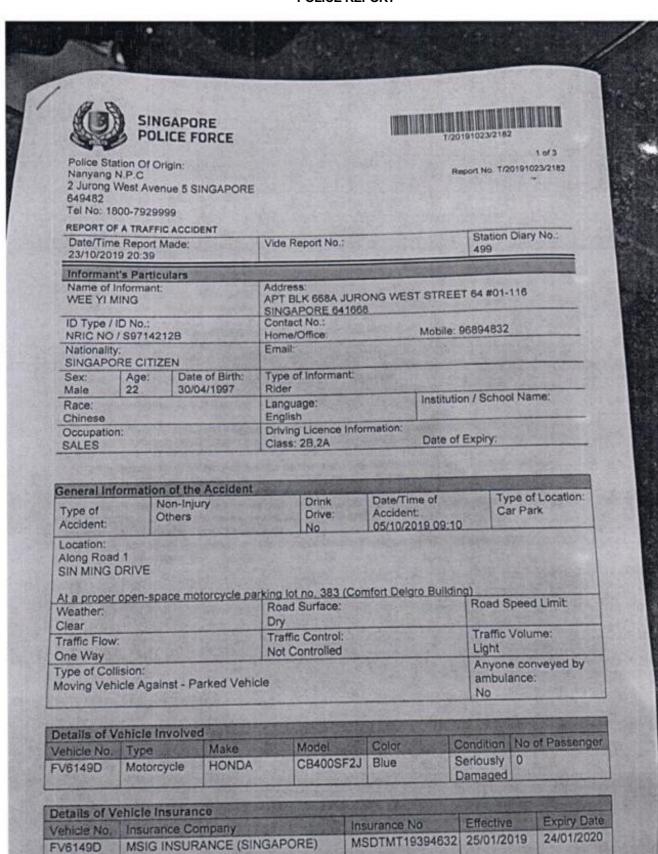
Mame:

NRIC/FIN No.:

Accident Sketch Plan

ETCH PLAN		
	UNKNOWN PRECED	
ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
	Report	
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	Dollar Jala	
	De 10231	
	and lot	
	0801	
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		-
ECLARATION We declare the foregoing parti	iculars are true in every respect.	
W	(N 94/10/2019	
	Driver's Signature Reporting Centre Personnel's Signature	

POLICE REPORT



PTE. LTD.

POLICE REPORT



Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999



2 of 3

Report No. T/20191023/2182

CONTINUATION OF REPORT

Brief Details.

On the 05/10/2019 at around 0800hrs, I had parked my silver colour motorcycle bearing registration no. FV6149D at No. 383 Sin Ming Drive (Comfort Delgro Building) open-space proper motorcycle parking lot. Situation was normal then, I then left to another location.

On the same day, I had glanced at my motorcycle from a distance and it was still at the same motorcycle parking lot.

At around 1615hrs, I returned to the said parking lot and noticed that my right side mirror broke. I further inspect my motorcycle and discovered that there is a large size dent and a leakage on my motorcycle's fuel tank and a notable crack on the tailboard area. There is a CCTV Camera facing the said carpark.

I contacted Comfort Delgro management and they informed me that there were two occasions whereby my motorcycle had toppled on the ground. Occurrence are as follow:

1.) On the 05/10/2019 at around 0912hrs, one motorcycle bearing registration no. FS29Y had parked beside my motorcycle. As the rider got up from his motorcycle, my motorcycle had toppled to the right

2.) On the 05/10/2019 at around 1440hrs, another motorcycle bearing registration no. FBG2527Z, had also parked beside my motorcycle. As the rider got up from his motorcycle, my motorcycle had toppled to the right side.

On both occasion, there parking lot is quite narrow and I believed both rider had collided onto my motorcycle and not one of the rider had left a courtesy note to me with regard to the collision. I was also informed by Comfort Delgro Management that that on a third occasion (timing was not mentioned), my motorcycle had toppled to the right on its own. There was an ongoing event at the nearby vicinity and there were a lot of motorcycle moving in and out from the said parking lot.

The estimated repair cost is not known yet.

I am lodging this report as advised my the Comfort Delgro Management to retrieve the CCTV Footage of both the accidents. That's all.

POLICE REPORT

