

## 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	14/11/2019 13:34
Date Of Accident	13/11/2019 09:15
Exact Location Of Accident	ECP TOWARDS CITY BEFORE MCE/AYE EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP4961S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KWONG KOK ONN, BERNARD
NRIC No	S7812615I
Email Address	KWONG.BERNARD@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94598405
Alternative Phone No	OFFICE-94598405

### Vehicle Particulars

Manufacturer	DUCATI
Model	MONSTER 821
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MC/00639690
Cover Note Number	

### Driver

Name of Driver	KWONG KOK ONN, BERNARD
NRIC No	S7812615I
Date Of Birth	23/04/1978
Occupation	INDOOR
Date Of Driving Pass	12/09/1994
Driving Experience	25 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94598405
Fax Number	
Contact Number	OFFICE-94598405
Email Address	KWONG.BERNARD@GMAIL.COM

Address	BLK 18 MARINE TERRACE #13-94
Postcode	440018
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	COLLISION - CHANGE/CROSS LANE
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	MARINE PARADE NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 300 MARINE PARADE ROAD , <b>POSTCODE:</b> 449296 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4428999 - <b>FAX NO:</b> 62447678
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO TRAFFIC ACCIDENT REPORT NO. T/20191113/2080 AND T/20191113/2169 ATTACHED

#### 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	SKE7210H
Vehicle Make/Model/Colour	MERCEDES BENS / C180 / SILVER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MAVERICK TAN CHIA CHIN
NRIC/Passport Number	S9501261B
Contact Number	98234228
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	KWONG KOK ONN, ERNARD
Approximate Age	41
Injuries Sustain	
Injured person in which vehicle?	FBP4961S
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 18 MARINE TERRACE #13-94
Postcode	440018

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
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: 14/11/19

12.10 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

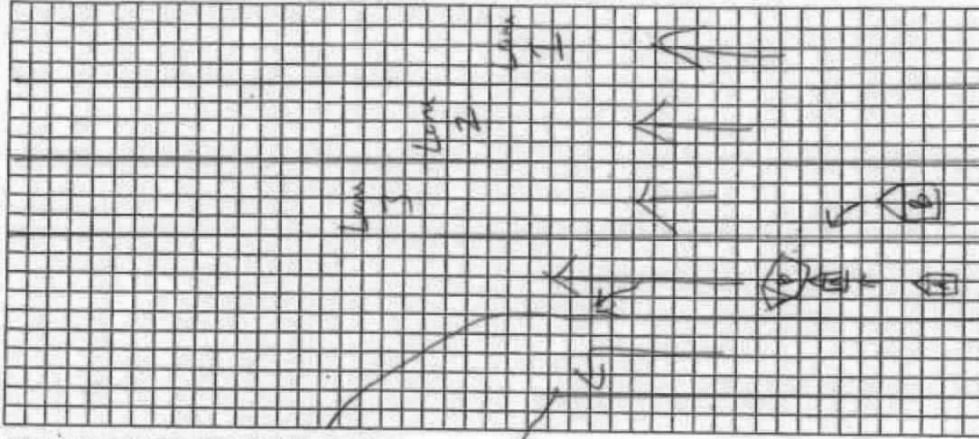
Reporting Centre Personnel's Signature

Name: Tan Choe Wei

NRIC/FIN No.: 97715234R

### Sketch Plan #2

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to Traffic Accident Report No. T/20191113/2080 & T/20191113/2169

Answer -

## DECLARATION

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

Ben

Policyholder's Signature

Date & Time: 14/11/19  
12.10 pm

GIARMC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Yours truly,

Reporting Centre Personnel's Signature

Name: Tan Choo Lok  
NRIC/FIN No.: G17157352

NRIC/FIN No.: 67157352



**SINGAPORE  
POLICE FORCE**



T/20191113/2080

1 of 3

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

Report No. T/20191113/2080

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 13/11/2019 13:25	Vide Report No.:	Station Diary No.: 67
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**Informant's Particulars**

Name of Informant: KWONG KOK ONN, BERNARD			Address: APT BLK 18 MARINE TERRACE #13-94 SINGAPORE 440018		
ID Type / ID No.: NRIC NO / S78126151			Contact No.: Home/Office: Mobile: 94598405		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 23/04/1978	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SENIOR ACCOUNT MANAGER			Driving Licence Information: Class: 2B,2A,2,3		
			Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 13/11/2019 09:15	Type of Location: Straight Road
Location: Along Road 1 EAST COAST PARKWAY				
ECP towards City before MCE/AYE exit				
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
FBP4961S	Motorcycle	DUCATI	MONSTER 821	Red		0
SKE7210H	Car	MERCEDES BENZ	C180	Silver		0

**Details of Vehicle Insurance**

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
FBP4961S	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00639690	18/05/2019	17/05/2020



**SINGAPORE  
POLICE FORCE**



T/20191113/2080

2 of 3

Report No. T/20191113/2080

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	KWONG KOK ONN, BERNARD	ID No.	S7812615I
Related Vehicle	NIL	Contact No.	94598405
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	MAVERICK TAN CHIA CHIN	ID No.	S9501261B
Related Vehicle	NIL	Contact No.	98234228
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 the 13/11/2019 at about 0915hrs, I was riding my motorcycle along ECP towards Rochor exit. When I was nearing the exit to MCE/AYE at 13 1/2km mark, I was on the left lane that was going straight. Suddenly a car from the right cut into my lane as it seemed that the car wanted to exit into MCE at the very last minute. At the same time, the car also braked quite hard to filter left and move in before the divider of the MCE exit. As a result the car side swiped my motorcycle and I fell. The left side of the rear bumper of the car collided with the front tyre of my motorcycle. The driver came out of the vehicle and assisted me. We also exchange particulars before leaving. I sustained some abrasions on my right arm, leg and hip. I also feel some pain on the right side of my torso. I have not went to the doctor yet.

My motorcycle had to be towed away as the rear brake pedal had been chipped off. I rode the motorcycle out from the expressway and let the tow truck to tow it away from my carpark.



**SINGAPORE  
POLICE FORCE**



T/20191113/2080

3 of 3

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

Report No. T/20191113/2080

## 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:

G /

Staff Sgt SYED FAIZ BIN SYED SHAMSHUDIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

13/11/2019 13:25

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:



SINGAPORE  
POLICE FORCE

Authentication Stamp

NP168

SIGNATURE



## Traffic Accident Report Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20191113/2169

1 of 3

Police Station Of Origin:  
Joo Chiat NPP  
267 Onan Road SINGAPORE 424773  
Tel No: 1800-3459999

Report No. T/20191113/2169

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/11/2019 18:48		Vide Report No.: T/20191113/2080		Station Diary No.: 17	
<b>Informant's Particulars</b>					
Name of Informant: KWONG KOK ONN, BERNARD			Address: APT BLK 18 MARINE TERRACE #13-94 SINGAPORE 440018		
ID Type / ID No.: NRIC NO / S78126151			Contact No.: Home/Office: Mobile: 94598405		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 23/04/1978	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SENIOR ACCOUNT MANAGER			Driving Licence Information: Class: Date of Expiry:		

## General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/11/2019 09:15	Type of Location:
Location: Along Road 1 EAST COAST PARKWAY ECP Towards City before MCE/AYE Exit				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

## Details of Person Involved

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



**SINGAPORE  
POLICE FORCE**



T/20191113/2169

2 of 3

Police Station Of Origin:  
Joo Chiat NPP  
267 Onan Road SINGAPORE 424773  
Tel No: 1800-3459999

Report No. T/20191113/2169

## CONTINUATION OF REPORT

<b>Rider</b>			
Name	KWONG KOK ONN, BERNARD		ID No. S78126151
Related Vehicle	NIL		Contact No. 94598405
Hospital/Clinic	RAFFLES HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL 13/11/2019	Date Discharge	NIL 13/11/2019
No. of Days granted Medical Leave	NIL 06	Degree of Injury	NIL

**Brief Details.**

I wished to add on my previous report - T/20191113/2080. I had gone to see doctor after lodging the report and was issued with 6 days MC.



**SINGAPORE  
POLICE FORCE**



T/20191113/2169

Police Station Of Origin:  
Joo Chiat NPP  
267 Onan Road SINGAPORE 424773  
Tel No: 1800-3459999

3 of 3

Report No. T/20191113/2169

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:

G /

Sgt 3 ABDUL MATIN BIN ISMAIL

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

13/11/2019 18:48

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED

MOHD SAID

Contact No.: 65476172

Authentication Stamp

NP168



**SINGAPORE  
POLICE FORCE**

Classification Of Case: