# 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 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

	ACCIDENT STATEMENT				
Date Of Report	21/12/2019 16:20				
Date Of Accident	19/12/2019 22:05				
Exact Location Of Accident	LORONG KISMIS JUNCTION OF ENG KONG RD				
Country/State of Loss	SINGAPORE				
	DETAILS OF OWN VEHICLE				
Vehicle Registration Number	FBN5503K				
Insured/Policyholder					
Name Of Registered Owner	BAN HOCK HIN COMPANY PRIVATE LIMITED				
Co Reg No	1XXXX288K				
Email Address	RAYMOND@BHH.COM.SG				
Mobile Phone No					
Alternative Phone No	OFFICE-62816520				
Vehicle Particulars					
Manufacturer	YAMAHA				
Model	NMAX155 ABS				
Exact Purpose for which vehicle was being used at ime of accident	COMMERCIAL				
Are you claiming under your own insurance policy or repair to your vehicle?	NO				
f No, Please state action to be taken	THIRD PARTY				
/ehicle Category	MOTORCYCLE				
nsurance Company					
Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD				
ype Of Coverage	THIRD PARTY				
Fleet Policy	YES				
Policy Number	AVFMSB0000651901				
Cover Note Number	N.A.				
Driver					
Name of Driver	EH PING LE				
Passport No/FIN	GXXXX585K				
Date Of Birth	09/03/1987				
Occupation	OUTDOOR				
Date Of Driving Pass	01/08/2018				
Driving Experience	1 YEAR AND 4 MONTHS				
Gender	MALE				
Mobile Number	(LOCAL) +65-83025870				
Fax Number					
Contact Number					
EMail Address	NOEMAIL				

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

icle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - HEAD ON COLLISION

NO

1

YES

NO

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] COMMONWEALTH NPP

Was notice of intended Prosecution given?

If Yes, against whom?

# Circumstances of Accident

ON 19/12/2019 AT ABOUT 2205HRS, I WAS HEADING BACK TO MY BASE AT 2 TOH TUCK TERRACE BUKIT TIMAH (CERTIS BASE) ON MY cERTIS BIKE FBN5503K TO REPORT OFF. I WAS AT THE T-JUNCTION OF ENG KONG RD AND LORONG KISMIS. AS THERE WERE TREFIC ON THE MAIN ROAD, I WAITED BY THE STOP LINE OF ENG KONG RD. THERE WAS A TAXI BESIDE MY VEHICLE THAT STOPPED TO ALIGHT A PASSENGER. A CAR BEARING CARPLATE SCY1238H WAS ON LORONG KISMIS AND TURNING RIGHT TO ENG KONG ROAD. HOWEVER, THE DRIVER OF THE CAR SAW THAT THERE WAS A TAXI THAT STOPPED ALONG ENG KONG ROAD, CAUSING AN OBSTRUCTION. THUS SHE TRIED TO OVERTAKE AND CUT PART OF MY LANE ON WHERE I WAS. THUS, HER CAR HIT ONTO MY BIKE. I TRIED TO AVOID A COLLISION HOWEVER TO NO AVAIL. SHE ALIGHTED AND WE EXCHANGED PARTICULARS. THE DRIVER ALSO ADDED THAT SHE IS SORRY THAT SHE DID NOT SEE MY BIKE, AND THUS KNOCKED ONTO ME. SHE ALSO CHECKED IF I AM OKAY. SHE ALSO ADDED THAT SHE COULD NOT SEE ME AS HER VISION IS COVERED. I WISH TO STATE THAT I DID NOT SUSTAIN ANY INJURIES AND HAVE AN IN-VEHICLE CAMERA INSTALLED ON THE BIKE. THE DAMAGES DONE TO MY VEHICLE ARE A BROKEN FRONT MUG GUARD AND FRONT WHEEL MISALIGNMENT. I THEN PUSHED BACK MY BIKE TO CERTIS BASE. THE DAMAGE DONE TO THE OTHER PARTY'S VEHICLE IS A CHIPPED FRONT-BOTTOM PART OF THE DOOR AND SCRATCHES TO THE RIGHT HEADLIGHT. I AM LODGING THIS REPORT AS INSTRUCTED BY MY COMPANY.

### 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 SCY1238H

Vehicle Make/Model/Colour MERCEDES BENZ / E200 EXCLUSIVE (R18 LED)

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TAN KWANG BUOY

SXXXX535D

96303933

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#### Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. 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.
- 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.

VERIFY BY AJAX MARS (ARC) REPORTING OFFICER

MUHAMMAD SUMARDI BIN MOHD AFFANDI
Reporting Centre Personnel's Signature

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

NRIC/FIN No.:

GIARMC SketchPlanForm, V3

KETCH PLAN			
	LOR KSMIS	A FBN 550. B SCY 123	3K
		B SEY 123	148
	8		1000
	Entry May 1	- TAXI STATIONARY	1
	See I		
REFER TO ATTACHED	INCES OF THE ACCIDENT		7
ACTER TO ACTACHED	STATEMENT,		$\exists$
			$\exists$
			-
			-
DECLARATION  We declare the foregoing partic	culars are true in even respect.	VERIFY BY AJAX MARS (ARC) RI	EPORTING OFFI
	B	MUHAMMAD SUMARDI BIN	MOHD AFFANC
licyholder's Signature	Drive Signature If driver is not the policyholder)	Reporting Centre Personnel's Name:	Signature
te & Time:	Date & Time:	NRIC/FIN No.:	2



# SINGAPORE POLICE FORCE

Police Station Of Origin: Commonwealth NPP 111 Commonwealth Crescent (Annex) #01-288A SINGAPORE 140111 Tel No. 1800-4749999

10.00	8155	88.73	AU.	
191301	8.98	(MB) LS	1900	

1.014 Report No. 1720191220/2075

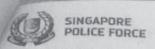
REPORT OF A TRAFFIC ACCIDENT

Station Diary No. 17 Date/Time Report Made: 20/12/2019 14:32 Vide Report No. Informant's Particulars
Name of Informant: Address: C/O CERTIS CISCO SINGAPORE EH PING LE ID Type / ID No.: FIN NO / G2965585K Mobile: 83025870 Contact No. Home/Office: Nationality: MALAYSIAN Email: Date of Birth. 09/03/1987 Sex Age: Type of Informant. Institution / School Name: Male Rider Language: Race Chinese Driving Licence Information: Occupation: Date of Expiry: Class 2B,3C ENFORCEMENT OFFICER

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 19/12/2019 22:0	Type of Location: T-Junction
ENG KONG R LORONG KISM JUNCTION OF Veather:	/IS	AND LORONG KISM Road Surface Dry	MIS	Road Speed Limit:
raffic Flow: Traffic Control: ne Way Not Controlled				Traffic Volume:
pe of Collision	against stopped veh	icle		Anyone conveyed by ambulance:

Details of V	/ehicle Involve	ed	Branch Comp	00000000		
Vehicle No.	AND DESCRIPTION OF THE PARTY OF	Make	Model	Color	Condition	No of Passeng
FBN5503K	Motorcycle	YAMAHA	NMAX155 ABS	White	Slightly Damaged	0
SCY1238H	Car	MERCEDES BENZ	E200 EXCLUSIVE (R18 LED)	Blue	Slightly Damaged	0

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



Station Of Origin 111 Commonwealth Crescent (Annex) #01-288A SINGAPORE 140111 Tel No: 1800-4749999

Report No. 1/20191220/2075

CONTINUATION OF REPORT

Rider	Mind Street Company of the Company o		AND DESCRIPTION OF THE PERSON NAMED IN	NAME OF TAXABLE PARTY.
Name	EH PING LE		ID No.	G2965585K
Related Vehicle	FBN5503K (Motorcycle)		Contact No.	83025870
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class 2B.3C Date of Expiry: NIL
Date Treatment	t NIL D		Discharge NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury NIL	
Name	TAN KWANG BUOY		ID No.	S1837535D
Related Vehicle	SCY1238H (Car)		Contact N	lo. 96303933
			Class of	Class: NIL
lospital/Clinic	NIL		Driving Licence I Expiry D	Date of Expiry: NIL
ate Treatment	NIII	Date Dis	charge   N	HL.
	d Medical Leave NIL	Degree	of Injury   N	NIL .

On 19/12/2019 at about 2205hrs, I was heading back to my base at 2 Toh Tuck Terrace Bukit Timah (Certis Base) on my Certis bike FBN5503K to report off. I was at the T-Junction of Eng Kong Road and Lorong Kismis. As there were traffic on the main road, I waited by the stop line of Eng Kong Road. There was a taxi beside my vehicle that stopped to alight a passenger.

A car bearing carplate SCY1238H, was on Lorong Kismis and is turning right to Eng Kong Road. However, the driver of the car saw that there was a taxi that stopped along Eng Kong Road, causing an obstruction. Thus, she tried to overtake and cut part of my lane on where I was. Thus, her car hit onto my bike. I tried to avoid a collision however to no avail.

She alighted and we exchanged particulars. The driver also added that she is sorry that she did not see my bike, and thus knocked onto me. She also checked if I am okay. She also added that she could not see me as her vision is covered.

I wish to state that I did not sustain any injuries and I have an in-vehicle camera installed on the bike.

The damages done to my vehicle are a broken front mug guard and front wheel misalignment. I then pushed back my bike to Certis Base. The damage done to the other party's vehicle is a chipped from -bottom part of the door and scratches to the right headlight.

I am lodging this report as instructed by my company.

A SINGAP	ORE 140111 (Annex) #01-	TROTOTIZED  REGORDS  CONTINUATION OF REPORT	2078 4 94 4 3. 1/20191220/2078
IMPORTANT: Please a the certificate with your Signature Of Officer ReD / Sgt 2 KIM WILSON	now, please fax a copy to	cle's Insurance Certificate to this re 65474885 stating the report num Signature Of Informant:	eport. If you don't have ther as reference.
Signature Of Interpreter: Not applicable		Date/Time: 20/12/2019 14:32	•
Officer In Charge Of Case TP / GIA / Staff Sgt WONG SIEU LUI		Classification Of Case:	
Contact No.: 65476151	SINGAPORE POLICE FORCE	SN 50	
Authentication Stamp NP168	un un	~	
L	SIGN	ATURE	