

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 | 15/01/2020 15:58 |
| Date Of Accident | 17/12/2019 12:25 |
| Exact Location Of Accident | BALESTIER RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | FBC9460G |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|-----------------------------------|
| Name Of Registered Owner | TECK SOON LEE AUTO SUPPLY PTE LTD |
| Co Reg No | 1XXXXX637W |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-89999999 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | HONDA |
| Model | WAVE 125X A |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL USE |
| 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 | MOTORCYCLE |

Insurance Company

| | |
|---------------------------|--------------------------------------|
| Name of Insurance Company | MSIG INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | NO |
| Policy Number | MSD/VMT/19-503054-WTT |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | CHEW YEW HOCK |
| NRIC No | SXXXX000J |
| Date Of Birth | 11/05/1947 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 12/11/1966 |
| Driving Experience | 53 YEARS AND 1 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90046178 |
| Fax Number | |
| Contact Number | OFFICE-90046178 |
| Email Address | NOEMAIL |

| | |
|---|------------------------------------|
| Address | BLK 116B RIVERVALE DRIVE #15-28 |
| Postcode | 542116 |
| Was driver an employee of the Insured's Company | YES |
| If No, Relationship of the Driver with the Insured | |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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? | |
| 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 | ROCHOR NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-2949999 - FAX NO: 63918583 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - T/20200106/2060.

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 | UNKNOWN |
| Vehicle Make/Model/Colour | |
| 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)

Accident Sketch Plan

SKETCH PLAN

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- 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) 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 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.
- 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 the [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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposed stated, or
 - (ii) For complying with requirements under my regulations, laws or court orders.



Policy holder's signature
Date / time:

周大福
Driver's signature
(if driver is not policy holder)
Date / time:

reporting centre personnel's Signature
Date / time:

Accident Sketch Plan

SKETCH PLAN

SKETCH PLAN

A: FBC94606

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

DECLARATION

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



Policy holder's signature
Date & time:

周有福

Driver's signature
(if driver is not policy holder)
Date & time:

Personnel's Signature

reporting centre personnel's Signature
NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200106/2060

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20200106/2060

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 06/01/2020 12:48 | Vide Report No.: | Station Diary No.: 94 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | | |
|--|------------|------------------------------|---|----------------------------|
| Name of Informant: CHEW YEW HOCK | | | Address: APT BLK 116B RIVERVALE DRIVE #15-28 SINGAPORE 542116 | |
| ID Type / ID No.: NRIC NO / S0721000J | | | Contact No.: Home/Office: Mobile: 90046178 | |
| Nationality: SINGAPORE CITIZEN | | | Email: | |
| Sex: Male | Age: 72 | Date of Birth: 11/05/1947 | Type of Informant: Rider | |
| Race: Chinese | | | Language: | Institution / School Name: |
| Occupation: DELIVERYMAN | | | 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: 17/12/2019 12:25 | Type of Location: Straight Road |
| Location: Along Road 1 BALESTIER ROAD | | | | |
| Along Balestier Road towards Lavender Street at the most second right lane | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: | | Traffic Control: Traffic Light - Working | | Traffic Volume: Heavy |
| 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 |
|-------------|------------|-------|----------------|-------|--------------|-----------------|
| FBC9460G | Motorcycle | HONDA | WAVE 125X A | Blue | No Damage | 0 |

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20200106/2060

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20200106/2060

CONTINUATION OF REPORT

| Rider | | | |
|-----------------------------------|---------------|--|---|
| Name | CHEW YEW HOCK | ID No. | S0721000J |
| Related Vehicle | NIL | Contact No. | 90046178 |
| 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 |

Brief Details.

On 17 Dec 2019 at 1225hrs, I was riding my company's motorcycle bearing licence plate, FBC9460G, along Balestier Road towards Lavender Street at the most right second lane. I then came to a stop in between two cars when the traffic light turns red. I then drove off when the traffic light turns green. While I was riding off, I then accidentally banged onto the car that was travelling on my right side. My right motorcycle's mirror hit onto the car's left mirror.

However, as I see that there are no damages on both of the cars and it was just a slight bang. Both of our mirrors are not broken or dented. I then raise my hand to apologise to the car driver then rode off. I did not notice the car licence plate and the model of the car. I only remember that it was a white in colour car.

I then received a Traffic Police Letter on 31 Dec 2019 (TP/IP/80261/2019). However, the TP Letter stated the motorbike licence plate is FBC4960G, which is different from my motorbike. My boss then made a call to Traffic Police regarding the different license however was told to lodge a report regarding the car accident.

I wish to state that no one was injured during the accident.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200106/2060

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20200106/2060

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:

A /

Sgt 2 YEOW YI LIAN

Signature Of Informant:

周有福

Signature Of Interpreter:

Not applicable

Date/Time:

06/01/2020 12:48

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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