SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.

	ACCIDENT STATEMENT
Date Of Report	06/02/2020 15:28
Date Of Accident	05/02/2020 14:20
Exact Location Of Accident	KALLANG PUDDING ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBL3347T
Insured/Policyholder	
Name Of Registered Owner	GERALD GUNASEKARAN S/O SINGARAVELU
NRIC No	SXXXX810F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86479220
Alternative Phone No	OTHERS-86479220
Vehicle Particulars	
Manufacturer	HONDA
Model	CBF190WH
Exact Purpose for which vehicle was being u ime of accident	ised at
Are you claiming under your own insurance por repair to your vehicle?	policy NO
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	MOTORCYCLE
nsurance Company	
lame of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
ype Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/19-403841-CA
Cover Note Number	
Driver	
lame of Driver	GERALD GUNASEKARAN S/O SINGARAVELU
RIC No	SXXXX810F
ate Of Birth	19/04/1963
occupation	OUTDOOR
ate Of Driving Pass	24/04/1991
Priving Experience	28 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86479220

OTHERS-86479220

NOEMAIL

Address BLK 28 CASSIA CRESCENT #14-32

Postcode 381028

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 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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by NO

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 GEYLANG NEIGHBOURHOOD POLICE CENTRE

YES

NO

NO

2

Police Station Address ROAD: 1 CASSIA LINK , POSTCODE: 397618 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

Was there any audio recorded?

AS PER POLICE REPORT No.T/20200205/2322;

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC153G

Vehicle Make/Model/Colour HYUNDAI / AE IONIQ HEV 1.6 DCT

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

	DETAILS OF INJURED PERSON 1
Name	GERALD GUNASEKARAN S/O SINGARAVELU
Approximate Age	56
Injuries Sustain	
Injured person in which vehicle?	FBL3347T
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 28 CASSIA CRESCENT #14-32
Postcode	391028

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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 ladgment 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)

Lunderstand, 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 insurers) 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")
- 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

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4 #02-02

Singapore 415933

ek 674 16697 Fax. 6749230

Email vackt stylom com sa

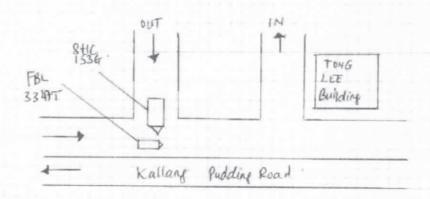
Policyholder's Signature Date & Time

Oriver's Signature (If driver is not the policyholder) Date & Time Reporting Centre Personnel's Signature Name: NRIC/FIN No.

00 LFR 5050

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT



DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

IDAC KAKLBUKIT (VAC)

23 Karti Bukit Ave 4 #02 02 Singapore 415933 Tel: 67416697 Fac 67492305 Email yackbond on own sq

Reporting Centre Personnel's Signature NRIC/FIN No





1 of 3

Report No. T/20200205/2322

Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999

REPORT	OF A TRAFFIC	CACCIDENT		
Date/Time Report Made: 05/02/2020 18:51		Vide Report No.:	Station Diary No. 86	
Informa	nt's Partici	ulars		
Name of Informant: GERALD GUNASEKARAN S/O SINGARAVELU ID Type / ID No.: NRIC NO / S1590810F Nationality:		Address: APT BLK 28 CASSIA CRESCENT #14-32 SINGAPORE 391028 Contact No.: Home/Office: Mobile: 86479220		
	ORE CITIZ	EN	Email:	
Sex: Age: Date of Birth: Male 56 19/04/1963		Type of Informant:		
Race: Indian			Language:	Institution / School Name:
Occupation: Foodpanda Delivery Rider		Driving Licence Informat Class: 2B,2A,3,4,5	tion: Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/02/2020 14:20	Type of Location: Straight Road	
	JDDING ROAD KALLANG PUDDIN	G ROAD			
		Road Surface: Dry		Road Speed Limit:	
		Traffic Control: Not Controlled		Traffic Volume: Light	
Two Way					

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBL3347T	Motorcycle	HONDA	CBF190WH	Red	Slightly Damaged	0
SHC153G	Car	HYUNDAI	AE IONIQ HEV 1.6 DCT	Yellow	Slightly Damaged	0

Details of Vehicle Insurance			
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date





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Report No. T/20200205/2322

Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FBL3347T	MSIG INSURANCE (SINGAPORE) PTE, LTD.	MSDSMT19403841	07/09/2019	06/09/2020	

Details of Perso	n Involved					
Any Pedestrian In	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Rider						
Name	GERALD GUNASEKARAN S/O SINGARAVELU			ID No		S1590810F
Related Vehicle	FBL3347T (Motorcycle)			Conta	ct No.	86479220
Hospital/Clinic	SINGHEALTH POLYCLINICS - GEYLANG			Class Drivin Licend Expiry	g	Class: 2B,2A,3,4,5 Date of Expiry: NIL
Date Treatment	05/02/2020 Date Disc			harge	05/02	2/2020
No. of Days gran	ted Medical Leave	03	Degree of	<u> </u>		t

Brief Details.

On 05/02/2020 at 1420hrs, I was riding straight outside 35 Kallang Pudding Road when suddenly, I saw a taxi exiting from the said location. Upon realizing that he was not stopping, I immediately horned at him to indicate that I was infront of him however to no avail. I was then hit on the left, causing me to fall off my motorcycle. I felt some pain and discomfort on my left leg. I managed to take down the registration number of the said taxi, SHC153G and tried to ask for his particulars however the taxi driver refused to do so and told me to just claim from insurance. I then went to Geylang Polyclinic where I received 3 days MC. That is all.





3 of 3

Report No. T/20200205/2322

Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999

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:	Signature Of Informant:
Sgt 3 MOHAMAD AKMAL BIN MOHD ROSLAN	· & .
Signature Of Interpreter: Not applicable	Date/Time: 05/02/2020 18:51
Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD Contact No.: 65476219	Classification Of Case:
Authentication Stamp NP168 SINGAPORE POLICE FORCE	
SIGNATURE	



MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 2004122126) 4 Shenton Way, # 21-01, SGX Centre2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 msig.com.sg

CERTIFICATE OF INSURANCE

Road Transport Act 1987 (Malaysia), Road Transport (Amendment) Act 2019 (Malaysia)
The Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)
The Motor Vehicles (Third Party Risks and Compensation) Act (CAP. 189 of the Revised Edition) (Republic of Singapore)
The Motor Vehicles (Third Party Risks and Compensation) Rules, 1996 Edition (Republic of Singapore)
Or any Amendment, Act or Acts passed in substitution thereof.

CERTIFICATE NO :

MSD/VMS/19-403841-CA A0074-001/10900

SUM INSURED :

PMV

EXCESS

\$300(FIRE&THEFT) \$600(ENDT 2K)

1. Index mark and Registration Number of Vehicle

FBL3347T

HONDA

184 c.c.

2. Name of Policyholder

GERALD GUNASEKARAN S/O SINGARAVELU

3. Effective date of the Commencement of Insurance for the purposes of the Act

4. Date of Expiry of Insurance

1201AM 07/09/2019

06/09/2020

5. Persons or Classes of Persons entitled to drive

a. The Policyholder.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitation as to Use

Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

7. The Policy does not cover

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1. Use for hire or reward.

2. Use for racing, pace-making, reliability trial or speed-testing.

3. Use for the carriage of goods (other than samples) in connection with any trade or business.

4. Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter, 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof."

> COMMERCIAL AGENCY PTE. LTD. Underwriting Agent

04/09/2019 (JL) CA/CI-03 (05/13)

For MSIG Insurance (Singapore) Pte. Ltd.

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1590810F





GERALD GUNASEKARAN S/O SINGARAVELU

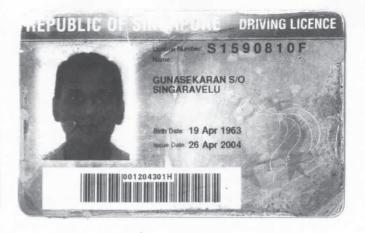


INDIAN Date of birth 19-04-1963

Country/Place of birth SINGAPORE

Sex M

S1590810F



5922134



NRIC No. S1590810F



24-04-2018

APT BLK 28 CASSIA CRESCENT #14-32 SINGAPORE 391028

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2A Class 3

Class 5

Class 2B Motorcycles not exceeding 200 cc

Motorcycles not exceeding 200 cc
Motorcycles between 201 cc and 400 cc
Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms
Heavy Motor Cars and Motor Tractors the
weight of which unladen exceeds 2500 kilograms
Motor Vehicles which are not constructed
themselves to carry any load and the weight

themselves to carry any load and the weight of which unladen exceeds 7250 kilograms

PASS DATE

24 Apr 1991 24 Apr 1991 01 Apr 1985

18 Feb 1991

28 Jul 1998

Licence No: S1590810F

NP 428A