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 <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.

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	ACCIDENT STATEMENT
Date Of Report	09/03/2020 14:41
Date Of Accident	07/03/2020 08:40
Exact Location Of Accident	60 TUAS RD OUTSIDE ST ENGINEERING MARINE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FX2210A
Insured/Policyholder	
Name Of Registered Owner	LOCK CHEE LEONG
NRIC No	SXXXX668G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97704197
Alternative Phone No	OFFICE-97704197
Vehicle Particulars	
Manufacturer	YAMAHA
Model	125Z
Exact Purpose for which vehicle was being used at time of accident	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/19-395451-CA
Cover Note Number	
Driver	

Driver

Name of Driver LOCK CHEE LEONG

NRIC No SXXXX668G

Date Of Birth 14/05/1968

Occupation OUTDOOR

Date Of Driving Pass 29/09/2009

Driving Experience 10 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97704197

Fax Number

Contact Number OFFICE-97704197

EMail Address NOEMAIL

BLK 185 BOON LAY AVE #03-138 Address

Postcode

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

4

NO

NO

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions **CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? YES

Foreign Vehicle Registration Number UNKNOWN (MOTORCYCLE)

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? 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) 0

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name JURONG WEST NEIGHBOURHOOD POLICE CENTRE

NO

YES

ROAD: 700 CORPORATION ROAD, POSTCODE: 649818, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-2689999 - FAX NO: 62672438

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/20200308/2049

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

YN1173H Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 18

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

UNKNOWN

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)

Vehicle Registration Number FBF3744L

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 3

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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 facts may allow insurance companies to repudiate policy liability.
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- Any false reporting may be referred to the Police for investigation.
- 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 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")
- (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

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

GIARMC SkieschPlanForm, V3

Accident Sketch Plan

KETCH PLAN				
		D 2		A = FX 2210A
	के वि	81		B = YN 1173 H
	400			c = Unknown.
	B			D = F8F 3744 L.
	Co	Tuas Rel	Out Side	St Engineering Mar.
SCRIBE CIRCUM	STANCES C	OF THE ACCIDENT		
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Kete	· Y	to Police	e Keps	rt T/20200308/2049
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CLARATION	ning particu	lars are true in every resp	ert	1.1
Caele.		iars are true in every resp	Col.	to to
		Balanta Flancia		
licyholder's Signature te & Time:	6	Driver's Signature (If driver is not the po	olicyholder)	Reporting Centre Personnel's Signature Name:

Date & Time:

GIARMC SketchPlanForm VI

NRIC/FIN No.:

Page 5 of 18





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999 1 of 3 Report No. T/20200308/2049

REPORT OF A TRAFFIC ACCIDENT

	ate/Time Report Made: 8/03/2020 13:50		Vide Report No.: J/20200307/0089	Station Diary No. 129	
Informa	int's Partici	ulars	THE WAR CO. LAND	The state of the last of the l	
	f Informant: CHEE LEON		Address: APT BLK 185 BOON LAY AV 640185		
	/ ID No.: O / S686866	68G	Contact No.: Home/Office: Mobile: 97704197		
National MALAYS			Email:		
Sex: Male	Age: 51	Date of Birth: 14/05/1968	Type of Informant: Vehicle Owner		
Race: Chinese			Language:	Institution / School Name:	
Occupation: MARINE SHIPYARD		D	Driving Licence Information: Class: 2B,3	Date of Expiry:	

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/03/2020 08:40	Type of Location Car Park	
	D - OUTSIDE ST ENGII	NEERING MARINE			
Weather: Clear		Road Surface: Dry	F	Road Speed Limit:	
		Traffic Control:	Т	Traffic Volume: No Traffic	
Traffic Flow: Two Way		Not Controlled	100		

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FX2210A	Motorcycle	YAMAGUCHI	₹125Z	Blue		0
YN1173H	Lorry	MITSUBISHI	FM65FM1R DEA	White		0

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

POLICE REPORT





Police Station Of Origin: Jurong West N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

2 of 3 Report No. T/20200308/2049

CONTINUATION OF REPORT

Vehicle Owner			STATES NAME OF	A	ELIPSON I	
Name	LOCK CHEE LEONG		ID No),	S6868668G	
Related Vehicle	FX2210A (Motorcycle)		Conta	ect No.	97704197	
Hospital/Clinic	NIL		Class Drivin Licen Expin	g	Class: 2B,3 Date of Expiry: NIL	
Date Treatment	NIL	Date Disc	-	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 07/03/2020 at 0800hrs, I parked my motorcycle , FX2210A at a motorcycle lot along 60 Tuas Rd outside ST Engineering Marine. Later at 0000hrs, I went back to my motorcycle and discovered there are damages on it. I also observed a police note stating that there was an RTA involving a lorry , YN1173H vide J/20200307/0089. I was advised to lodge a traffic accident report. I do not know what had happened and I am not sure if there is any CCTV in the area.





Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999 CONTINUATION OF REPORT

3 of 3 Report No. T/20200308/2049

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: J / Sgt 2 SITI KHAIRUNNISA BINTE RAMANAH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 08/03/2020 13:50
Officer In Charge Of Case: TP / GIT / SI VILTON HIA WEE SIANG Contact No.: 65476178	Classification Of Case:
Authentication Stamp SN 12	26





















