

## 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	09/03/2020 14:19
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	FBF3744L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LONG FOO NAM
NRIC No	SXXXX738G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96854407
Alternative Phone No	OFFICE-96854407

### Vehicle Particulars

Manufacturer	YAMAHA
Model	T135
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5065818676-05
Cover Note Number	

### Driver

Name of Driver	LONG FOO NAM
NRIC No	SXXXX738G
Date Of Birth	16/12/1957
Occupation	OUTDOOR
Date Of Driving Pass	03/09/1999
Driving Experience	20 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96854407
Fax Number	
Contact Number	OFFICE-96854407
Email Address	NOEMAIL

Address	BLK 187 BOON LAY AVE #06-72
Postcode	640187
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

#### 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	4
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 700 CORPORATION ROAD , <b>POSTCODE:</b> 649818 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2689999 - <b>FAX NO:</b> 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT T/20200308/2048

#### 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	YN1173H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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 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)

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number FX2210A  
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)

## Accident Sketch Plan

### SKETCH PLAN


#### IMPORTANT NOTICE


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

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

  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Accident Sketch Plan

### SKETCH PLAN

Diagram illustrating the accident scene layout on a grid:

A = FBF 3744 L  
B = YN 1173 H  
C = Unknown  
D = FX 2210 A


Go Tuns Rd outside St Engineering marine.

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Refer to Police Report T/20200308/2048

### 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:

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200308/2048

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

1 of 3

Report No. T/20200308/2048

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/03/2020 13:43	Vide Report No.: J/20200307/0089	Station Diary No.: 121
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### Informant's Particulars

Name of Informant: LONG FOO NAM	Address: APT BLK 187 BOON LAY AVENUE #06-72 SINGAPORE 640187		
ID Type / ID No.: NRIC NO / S2614738G	Contact No.: Home/Office: Mobile: 96854407		
Nationality: MALAYSIAN	Email:		
Sex: Male	Age: 62	Date of Birth: 16/12/1957	Type of Informant: Vehicle Owner
Race: Chinese	Language:		Institution / School Name:
Occupation: MARINE SHIPYARD	Driving Licence Information: Class: 2B,3 Date of Expiry:		

### General Information of the Accident

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
Location: Along Road 1 TUAS ROAD  60 TUAS ROAD - OUTSIDE ST ENGINEERING MARINE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF3744L	Motorcycle	YAMAHA	T135	Blue	Seriously Damaged	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



**SINGAPORE  
POLICE FORCE**



T/20200308/2048

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

2 of 3

Report No. T/20200308/2048

## CONTINUATION OF REPORT

Vehicle Owner			
Name	LONG FOO NAM		ID No. S2614738G
Related Vehicle	FBF3744L (Motorcycle)		Contact No. 96854407
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,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 07/03/2020 at 0800hrs, I parked my motorcycle, FBF3744L 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 REPORT



SINGAPORE  
POLICE FORCE



T/20200308/2048

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

3 of 3

Report No. T/20200308/2048

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:

J/  
Sgt 1 LIM JUNJIE

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
SI VILTON HIA WEE SIANG  
Contact No.: 65476178

Authentication Stamp  
NP168

Singapore Police Force

Signature Of Informant:

Date/Time:  
08/03/2020 13:43

Classification Of Case:

SN 126

Signature:



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

