

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	20/03/2020 08:55
Date Of Accident	18/03/2020 18:25
Exact Location Of Accident	BS-46809-WOODLANDS AVENUE 6-AFTER WOODLANDS MART
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SG6128P
Insured/Policyholder	
Name Of Registered Owner	SMRT BUSES LTD
Co Reg No	1XXXXX292D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

Vehicle Particulars

Manufacturer	MAN
Model	MAN A95 EU6
Exact Purpose for which vehicle was being used at time of accident	
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	BUS

Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-19093203MFBP
Cover Note Number	

Driver

Name of Driver	NGA YOOK LIAN
NRIC No	SXXXX776F
Date Of Birth	01/07/1963
Occupation	OUTDOOR
Date Of Driving Pass	09/05/2005
Driving Experience	14 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address NO ADDRESS

Postcode

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 COLLIDED INTO MOTORCYCLIST

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? YES

Was any injured conveyed to hospital by ambulance? YES

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) 100

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name WOODLANDS EAST N.P.C

Police Station Address ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of Intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Police Report No. T/20200319/2005D I am working as a bus driver at SMRT company. I am assign to bus service 964. The route is from Woodlands Interchange to Woodlands Link area. On 18/3/20 at about 1825hrs, I was driving bus SG6128P along Woodlands Ave 6 going towards Admiralty MRT. At about 1828hrs, I stopped at the bus stop near Blk 770 to alight passengers. While waiting, I felt an impact from the rear. I checked the side mirror and saw a motorcycle behind my bus. I went to make a check and saw the rider was lying on the road with his motorbike, FZ9255P beside him. I spoke to the rider who is male Chinese. He informed that he had collided onto a pedestrian who was crossing the road along Woodlands Ave 6. He further informed that he was unable to react in time as there was a lorry blocking his view. The rider ended up collided onto my bus. I noticed the pedestrian is a maid however I am unsure what happened to her as I did not witness anything. I immediately informed my management about the incident. My bus rear signal light was broken due to the collision. Traffic Police and Paramedic were at scene. The maid was conveyed to hospital for further check. I was advised by the traffic Police to lodge a traffic accident report.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? YES

Remarks/ Reasons: PENDING DOWNLOAD

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FZ9255P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

UNKNOWN MAID

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FZ9255P

Were seat belts worn?

NO

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

UNKNOWN CHINESE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

FZ9255P

Were seat belts worn?

NO

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

SG 6128P

PAZ=100

CAS-62766-18R6V6

BUS/03/20/7017

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. 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 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.:

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Bus stop H6809 - Woodlands Avenue 6
after Woodlands Maff.

after Woodlands Matt.

DECLARATION

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



Policyholder Signature _____
Date & Time: _____

2. an

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



Reporting Center Personnel's Signature
Name: _____
NRIC/File No.: _____



**SINGAPORE
POLICE FORCE**



T/20200319/2005D

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

1 of 3

Report No. T/20200319/2005D

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/03/2020 00:45		Vide Report No.: L/20200318/0121		Station Diary No.: 5012	
Informant's Particulars					
Name of Informant: NGA YOOK LIAN			Address: APT BLK 747 WOODLANDS CIRCLE #11-706 SINGAPORE 730747		
ID Type / ID No.: NRIC NO / S2580776F			Contact No.: Home/Office: Mobile: 97739051		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 56	Date of Birth: 01/07/1963	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Bus driver			Driving Licence Information: Class: 2B, 2A, 3, 4A, 4		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/03/2020 18:25	Type of Location: Straight Road
Location: Along Road 1 WOODLANDS AVENUE 6 Woodlands Ave 6 towards Admiralty MRT near blk 770.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
FZ9255P	Motorcycle				Slightly Damaged	0
SG6128P	Bus/Coach/Minibus				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20200319/2005D

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

2 of 3

Report No. T/20200319/2005D

CONTINUATION OF REPORT

Brief Details.

I am working as a bus driver at SMRT company. I am assign to bus service 964. The route is from Woodlands Interchange to Woodlands Link area.

On 18/3/20 at about 1825hrs, I was driving bus SG6128P along Woodlands Ave 6 going towards Admiralty MRT. At about 1828hrs, I stopped at the bus stop near blk 770 to alight passengers. While waiting, I felt an impact from the rear. I checked the side mirror and saw a motorcycle behind my bus. I went to make a check and saw the rider was lying on the road with his motorbike, FZ9255P beside him. I spoke to the rider who is male Chinese. He informed that he had collided onto a pedestrian who was crossing the road along Woodlands Ave 6. He further informed that he was unable to react in time as there was a lorry blocking his view. The rider ended up collided onto my bus. I noticed the pedestrian is a maid however I am unsure what happened to her as I did not witness anything. I immediately informed my management about the incident. My bus rear signal light was broken due to the collision.

Traffic Police and Paramedic were at scene. The maid was conveyed to hospital for further check. I was advised by the traffic Police to lodge a traffic accident report.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999



T/20200319/2005D

3 of 3

Report No. T/20200319/2005D

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 65474895 stating the report number as reference.

Signature Of Officer Recording The Report:

L /

Sgt 3 EDWARD SIM ZHI CHAO

Signature Of Informant:

Lian

Signature Of Interpreter:
Not applicable

Date/Time:
19/03/2020 00:45

Officer In Charge Of Case:

TP / GIT /

Sgt 3 INTAN WULANDARI BUDDY SANTOSO

Contact No.: 65476256

Classification Of Case:

SN 130

Authentication Stamp
NP168



Signature

Singapore Police Force

