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

atoresaid.				
	ACCIDENT STATEMENT			
Date Of Report	01/06/2020 18:49			
Date Of Accident	30/05/2020 11:10			
Exact Location Of Accident	BUKIT BATOK RD TURN LEFT TO BUKIT BATOK WEST AVE 2			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	FBB3927Y			
Insured/Policyholder				
Name Of Registered Owner	ALORIDE PTE. LTD.			
Co Reg No	2XXXXX994W			
Email Address	TCCHOON@YAHOO.COM.SG			
Mobile Phone No	(LOCAL) +65-83832212			
Alternative Phone No	OFFICE-83832212			
Vehicle Particulars				
Manufacturer	YAMAHA			
Model	SPARK-135CC			
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES			
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD			
Type Of Coverage	THIRD PARTY			
Fleet Policy	NO			
Policy Number	5113531735			
Cover Note Number				
Driver				
Name of Driver	TAN CHIN CHOON			

Name of Driver TAN CHIN CHOON

NRIC No SXXXX368D

Date Of Birth 20/10/1955

Occupation OUTDOOR

Date Of Driving Pass 22/09/1977

Driving Experience 42 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-83832212

Fax Number

Contact Number OTHERS-83832212

EMail Address TCCHOON@YAHOO.COM.SG

BLK 440D BUKIT BATOK WEST AVENUE 8 Address

#03-755

Postcode 654440

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

2

NO

NO

1

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

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? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Police Station Name BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

NO

ROAD: 21 BUKIT BATOK EAST AVE 4, POSTCODE: 659840, COUNTRY:

Police Station Address SINGAPORE

Police Station Contact TEL NO: 1800-6659999 - FAX NO: 66655793

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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 SMD8672H

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

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Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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- 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)

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 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:
 - 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

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Perso

Name:

NRIC/FIN No.:

Accident Sketch Plan

KETCH PLAN				
Burit Bot	1.	A	and the same of th	40 3927Y 5mo 8672H
SCRIBE CIRCUMSTANCES				
JAM BRAKE	AT BROWN 11:10 10 To TUBU TO B CAK SMO 8672 4 J COULD MOT SIDE SWIPE RHAI	BUKIN BATO H AT THE BREAK BA	SUP ROOD.	BATOK THE COR SAID COR
ELARATION TE e declaro fre forsetting partic	ulars are true in every respect.	.06.20	/ who	/2020
yholder's Signature & Time:			eporting Centre Personne's same: RIC/FIN No.:	tractions

POLICE REPORT

Annex D

faultidos.

NOTICE OF REPORTING

This is to confirm that Tan Chin Choon, S1222368D has reported to the Police a traffic accident which occurred on 30/05/2020 at about 1110hrs along Bukit Batok Road turning left to Bukit Batok West Ave 2. The traffic accident does not consist of the below following criteria:

- i) Involvement with Pedestrian/Cyclist
- ii) At this moment, involving parties did not obtain more than 3 days of Medical Leave.
- iii) No Government property/vehicle damaged
- iv) Hit and Run Accident
- v) No foreign vehicle was involved
- vi) Nobody involved in the accident was conveyed by ambulance

Involving the following vehicles:

- V1) FBB 3927Y, (Rider: Tan Chin Choon, S1222368D, HP: 8383 2212)
- V2) SMD 8672H, (Driver: Lin Hui Jun, Vanessa, S8437457A, HP: 9451 0184)
- 2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT T190215 Lim Rong Feng

Date: 30/05/2020

Time: 1900hrs

S/D Ref: 52

Police Post/Unit: Bukit Batok NPC

BUKIT BATCK NPC

21 BUKIT BATOK EAST AVENUE 4 SINGAPORE 859840

TEL: 1800-665 9999

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Accident Photo



Accident Photo



Accident Photo

