

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	27/06/2020 15:14
Date Of Accident	24/06/2020 14:45
Exact Location Of Accident	SIM WAY TWRDS NICOLL HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH6416D
Insured/Policyholder	
Name Of Registered Owner	WONG LIANG DA LUCAS
NRIC No	SXXXX890A
Email Address	LUCASWONG820@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91760270
Alternative Phone No	OTHERS-91760270

Vehicle Particulars

Manufacturer	HONDA
Model	CBR600RR
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5116555648
Cover Note Number	

Driver

Name of Driver	WONG LIANG DA LUCAS
NRIC No	SXXXX890A
Date Of Birth	09/11/1998
Occupation	INDOOR
Date Of Driving Pass	21/02/2017
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91760270
Fax Number	
Contact Number	OTHERS-91760270
E-Mail Address	LUCASWONG820@GMAIL.COM

Address	BLK 185B #21-675 WOODLANDS STREET 13 MARSILING GREENVIEW
Postcode	732185
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	RAINING
Road Surface	WET

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?	NO
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)	2
Passenger 1	NAME: : ELPITIYA BADALGE KRISHANKA GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER POLICE REPORT No.T/20200626/7020;

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	SLC7013J
Vehicle Make/Model/Colour	HONDA / VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	WONG LIANG DA LUCAS
Approximate Age	21
Injuries Sustain	
Injured person in which vehicle?	FBH6416D
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 185B #21-675 WOODLANDS STREET 13 MARSILING GREENVIEW
Postcode	732185

Accident Sketch Plan

SKETCH PLAN

A - FBH 416D

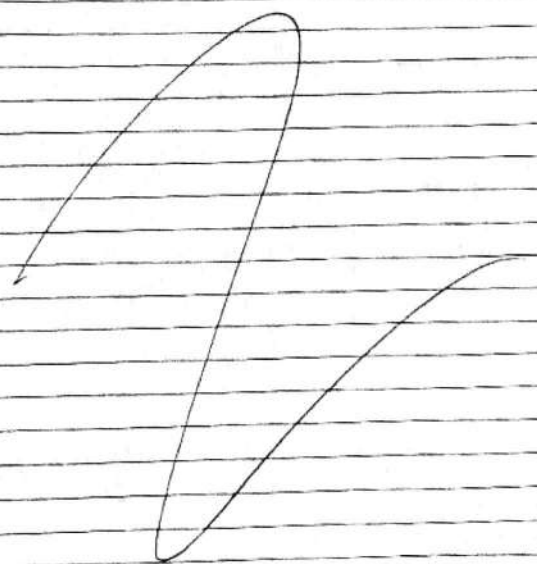
B - GLC 703J

STAY WAY TOWARD NICOL HIGHWAY



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- REFER TO POLICE REPORT -



DECLARATION

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

[Signature]

Policyholder's Signature

Date & Time:

[Signature]

Driver's Signature

(If driver is not the policyholder)

Date & Time:

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4 #02-02

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@idac.com.sg

Reporting Centre Personnel's Signature

Name

UNITEN SG

27 JUL 2020

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 owned 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 making 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/located 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 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;
 - (ii) regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (iii) 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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg
Reporting Centre Personnel's Signature
Name:
ID Card No:

27 JAN 2018



SINGAPORE POLICE FORCE



T/20200626/7018

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20200626/7018

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/06/2020 15:36	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: WONG LIANG DA LUCAS		Address: APT BLK 185B WOODLANDS STREET 13 #21-675 SINGAPORE 732185	
ID Type / ID No.: NRIC NO / S9837890A		Contact No.: Home/Office: Mobile: 91760270	
Nationality: SINGAPORE CITIZEN		Email: lucaswong820@gmail.com	
Sex: Male	Age: 21	Date of Birth: 09/11/1998	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: Packing/Bottling/Labelling machine operator		Driving Licence Information: Class: 2B,2A,2 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/06/2020 14:45	Type of Location: Straight Road
Location: SIMS WAY				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH6416D	Motorcycle	HONDA	CBR600RR	Red	Seriously Damaged	0
SLC7013J	Car				Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH6416D	NTUC Income Insurance Co-Operative Limited	5116555648	05/03/2020	27/01/2021



**SINGAPORE
POLICE FORCE**



T/20200626/7018

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20200626/7018

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	WONG LIANG DA LUCAS	ID No.	S9837890A
Related Vehicle	FBH6416D (Motorcycle)	Contact No.	91760270
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	13	Degree of Injury	Serious

Brief Details.

On 24 June 2020 at around 1445H I was riding my bike(FBH6416D) on Sim way toward Nicol highway on the 3rd lane. Suddenly I felt a impact came from the left side. A vehicle(SLC7013J) over take from my left and collided into me. I was admitted to tan tock Seng hospital for 1 day due to internal bleed in my head. My chest and arms are injure too due to this accident. I was given 13 days mc. Vehicle(SLC7013J) do have incar camera but refuse to disclose the video footage.



**SINGAPORE
POLICE FORCE**



T/20200626/7018

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20200626/7018

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
YEO GEAK ENG CECILIA
Contact No.: 65476404

Authentication Stamp

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
26/06/2020 15:36

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20200626/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20200626/7020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/06/2020 15:49	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: WONG LIANG DA LUCAS		Address: APT BLK 185B WOODLANDS STREET 13 #21-675 SINGAPORE 732185	
ID Type / ID No.: NRIC NO / S9837890A		Contact No.: Home/Office: Mobile: 91760270	
Nationality: SINGAPORE CITIZEN		Email: lucaswong820@gmail.com	
Sex: Male	Age: 21	Date of Birth: 09/11/1998	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: Packing/Bottling/Labelling machine operator		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/06/2020 02:00	Type of Location: Straight Road
Location: SIMS WAY				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH6416D	Motorcycle	HONDA	CBR600RR	Red	Seriously Damaged	0
SLC7013J	Car				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH6416D	NTUC Income Insurance Co-Operative Limited	5116555648	05/03/2020	27/01/2021

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9837890A

Name: WONG LIANG DA LUCAS

Birth Date: 09 Nov 1998

Issue Date: 21 Feb 2017



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9837890A



Name

WONG LIANG DA LUCAS

黄亮达

Race
CHINESE

Date of birth
09-11-1998

Sex
M

S9837890A

Country of birth
SINGAPORE

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

EFFECTIVE DATE

Class 2
Class 2A
Class 2B

Motorcycles > 400 CC
Motorcycles between 201 CC and 400 CC
Motorcycles <= 200 CC

23 Jan 2020
09 Nov 2018
21 Feb 2017

S / No. 9000339645

S9837890A

NP 428A



4989159

NRIC No. S9837890A



Date of issue
30-04-2013

APT 901 1050 WOODLANDS STREET 13 #21-675
SINGAPORE 732115

NRIC No: S9837890A

Date: 01/04/2020



**SINGAPORE
POLICE FORCE**



T/20200626/7020

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20200626/7020

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

Authentication Stamp

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
26/06/2020 15:49

Classification Of Case:

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5116555648

Cover : Third Party

- | | |
|---|-----------------------|
| 1. Index mark and Registration Number of Vehicle | : FBH6416D |
| Chassis Number | : JH2PC408CK500625 |
| 2. Name of Policyholder | : WONG LIANG DA LUCAS |
| 3. Effective Date of Insurance | : 05 Mar 2020 |
| 4. Expiry Date of Insurance | : 27 Jan 2021 |
| 5. Persons or Classes of Persons entitled to drive# | |

(a) Named Driver(s) Only.

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.

6. Limitations as to Use#

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

This Policy does not cover

- (a) Use for hire or reward.
 (b) Use for racing, pace-making, reliability trial or speed-testing.
 (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
 (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: WONG LIANG DA LUCAS
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : DIRECT BUSINESS DEPT (00000600280)
 Date of Issue : 03 Mar 2020 21:58 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive