MVA320055683 / VAC - Kaki Bukit ENTRY DATE & TIME: 30/06/2020 13:16 SUBMITTED BY: Norhaini Ble Abdul Majid

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 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.

	ACCIDENT STATEMENT	
Date Of Report	30/06/2020 13:16	
Date Of Accident	29/06/2020 21:00	
Exact Location Of Accident	PUNGGOL FIELD / PUNGGOL PLACE	
Country/State of Loss	SINGAPORE	

DETAILS OF OWN VEHICLE			
Vehicle Registration Number	FBP6615D	SOUTH THE SERVICE STATES	
Insured/Policyholder			
Name Of Registered Owner	CHUA TIAN KIAT		

NRIC No SXXXX354D
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-81012721
Alternative Phone No OFFICE-81012721

Vehicle Particulars

Manufacturer YAMAHA
Model NMAX155 ABS

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 5109703269-01 TPFT

Cover Note Number

Driver

 Name of Driver
 CHUA TIAN KIAT

 NRIC No
 SXXXX354D

 Date Of Birth
 02/05/1968

 Occupation
 OUTDOOR

 Date Of Driving Pass
 27/08/1987

Driving Experience 32 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81012721

Fax Number

Contact Number OFFICE-81012721

EMail Address NOEMAIL

Address

BLK 274B #08-822 PUNGGOL PLACE

Postcode

822274

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

3

involved in the accident

Was any body injured in the Accident? Was any injured conveyed to hospital by YES

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)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station Police Station Name

PUNGGOL N.P.C

Police Station Address

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH OWNER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBC1836J

Vehicle Make/Model/Colour

TOYOTA/HIACE 3.0 DX M

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 15

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLQ218H

Vehicle Make/Model/Colour

BMW X1 SDRIVE18I AT LED NAV

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 CHUA TIAN KIAT

Approximate Age 52

Injuries Sustain PAIN ON LEFT HAND

Injured person in which vehicle? FBP6615D

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address BLK 274B #08-822 PUNGGOL PLACE

Postcode 822274

Sketch Plan #2

ETCH PLAN	i	8
1	right drift	*
		40
		À
		0 > 3LQ>18H 0 > FEP6615D >GEC 1836J
_ 1,111_		9->FBP6615D
	71.17.1.	3-3GEC 1836T
	++++++++++++++++++++++++++++++++++++++	
	I A A E	>
ESCRIBE CIRCUMSTANCES O	F THE ACCIDENT	·.l
7 1	0 1 -/	0630/202/
refer to pol	Lice Report no T/ 200	0030/
V		
•		
K	, ,	
		1/4
DECLARATION	and the miner respect	IDAC KAKI BUKIT (YAC) 23 Kaki Bukit Ave 4 #02-02
I/We declare the foregoing part	iculars are true in every respect.	Gingenore 419900
X	Kil	- 1 07 14 6097 Fax 6 /4323
14	Driver's Signature	Reporting THE PERSON TO PROBLECOM. BG
Policyholder's Signature Date & Time:	(If driver is not the policyholder)	Name NRIC/SIN No
	Date & Time	
- 1- 1- 11-42 + 11-14	3 0 JUN 2020	

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)

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)
 - (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 daims;
 - (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
- 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 cohected 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

Driver's Signature

lif driver is not the policyholder!

Date & Time 3 0 JUN 2020

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933 Tel: 67416697 Fax: 67492305

Reporting Centre Personnel's Seneture

NRIC/FIN NO





Police Station Of Origin: Punggol N.P.C

21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

1 of 4 Report No. T/20200630/2021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/06/2020 11:04		Vide Report No.:	Station Diary No.: 18	
Informa	nt's Partici	ulars		10. 10. 10. 10. 10. 10. 10. 10. 10. 10.
	Informant: IAN KIAT		Address: APT BLK 274B PUNG 822274	GOL PLACE #08-822 SINGAPORE
ID Type / ID No.: NRIC NO / S6816354D		Contact No.: Home/Office: Mobile: 81012721		
National SINGAP	ity: ORE CITIZ	EN	Email:	100000000000000000000000000000000000000
Sex: Male	Age: 52	Date of Birth: 02/05/1968	Type of Informant: Rider	
Race: Chinese		Language:	Institution / School Name:	
Occupat	ion: ELIVERY		Driving Licence Inform Class: 2B,2A,3	ation: Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 29/06/2020 21:00	Type of Location: X-Junction
Location: Junction of Re PUNGGOL F PUNGGOL P Weather: Clear		Road Surface:		Road Speed Limit:
Traffic Flow: Dual Carriage	e Way	Traffic Control: Traffic Light - Wo	orking	Traffic Volume: Light
Type of Collis	No. of the last of	To Rear		Anyone conveyed by ambulance:

Details of V	ehicle Involve	d			APP IN STOR	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBP6615D	Motorcycle	YAMAHA	NMAX155 ABS	White	Slightly Damaged	0
GBC1836J	Van	TOYOTA		Yellow	Slightly Damaged	0
SLQ218H	Car	BMW		White	Slightly Damaged	0

Details of V	ehicle Insurance	Statistical Control	Web Art Live to	a reference
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





2 of 4

Report No. T/20200630/2021

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

CONTINUATION OF REPORT

Details of V	ehicle Insurance		200 100	7. 1
The second second second second second	Insurance Company	Insurance No	Effective	Expiry Date
FBP6615D	NTUC Income Insurance Co-Operative	5109703269-01	17/05/2020	16/05/2021

Any Pedestrian II	nvolved: No					
No. of Pedestrian			Use of Pe	destriar	Cross	sing: NA
Rider			是是外面是有	0.00	4 6 6	
Name	CHUA TIAN KIAT			ID No.		S6816354D
Related Vehicle	FBP6615D (Motorcycle)		Conta	ct No.	81012721	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	f Injury	Sligh	
Driver		新国的				
Name	YAN YUANYUAN			ID No		G2173557X
Related Vehicle	GBC1836J (Van)			Conta	ict No.	93968567
Hospital/Clinic	NIL		117	Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	charge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

Brief Details.

On the 29th June 2020 at about 9 pm, I was riding my motorcycle along Punggol Field towards Punggol Way. As I was approaching the junction of Punggol Place, I moved into the right most lane and stopped behind vehicle SLQ218H as I wanted to turn right into Punggol Place and the "right-turn" arrow was red in colour. Suddenly, a van GBC1836J hit my motorcycle from the rear causing me to move forward and hit onto the front vehicle SLQ218H. Due to the collision, I fell on my left side together with my motorcycle. My motorcycle box and seat was damaged due to the accident. Both drivers of the vehicles involved alighted and assisted me. We had then exchanged particulars and contact numbers and we did not call for police or ambulance as I was not injured at that point of time. However, I started to feel pain in my left hand and I went to seek medical treatment at Sengkang General Hospital on the same day and was given 3 days medical leave. I would like to state that I have cameras at the front and rear of my motorcycle and I am able to provide the footages of the accident.





3 of 4

Report No. T/20200630/2021

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

CONTINUATION OF REPORT





4 of 4

Report No. T/20200630/2021

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

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:	Signature Of Informant:
Staff Sgt ALZRIN SHAFIQ BIN AHMAD FARMIDI	- 12
Signature Of Interpreter: Not applicable	Date/Time: 30/06/2020 11:04
Officer In Charge Of Case:	Classification Of Case:
SI ANG YI TING, STEPHANIE Contact No.: 65476414	
Authentication Stamp IP168 Signature:	



THE SCHEDULE

Motorcycle Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Insured named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

- 1. any Endorsement specified as operative in the Schedule
- 2. the Conditions and General Exclusions of this Policy, and
- 3. the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.

GST Reg No. M90372806G

Policy Number

: 5109703269-01

The Policyholder

: CHUA TIAN KIAT BLK 274B #08-822 PUNGGOL PLACE

SINGAPORE 822274

Period of Insurance

: 17 May 2020 To 16 May 2021

Sum Insured

: Market Value of Insured Vehicle at Time of Loss

Premium (inclusive GST)

: \$\$276.74

Interest Insured

Cover Type

: Third Party, Fire & Theft

Named Driver (1)

: CHUA TIAN KIAT

Named Driver (2)

: N/A

Make/Model

: YAMAHA/NMAX155

Capacity

: 160cc

Number of Seater

: 2

Registration Number

: FBP6615D

Registration Year

2019

: MH3SG431000011017

Insure with COE

: YES

Chassis Number Excess (Section 1)

: N/A

NCD Entitlement

: 15%

Excess (Section 2)

: N/A

Loyalty Discount

: 5%

Hire Purchase Company

: N/A

Memo A: This policy is extended to include food delivery services.

Endorsement Operative: M2

Agency

: SHERLYN TAN QIAN WEN (00000602287)

Date of Issue

: 18 Apr 2020 00:23 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors

Chief Executive



REPUBLIC OF SINGAPORE IDENTITY CARD NO \$6816354D





CHUA TIAN KIAT



CHINESE Date of birth

Date of birth S 02-05-1968 / Country/Place of birth SINGAPORE 5.0 (6.35.4)

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

PASS DATE

Class 2B Motorcycles not exceeding 200 cc 27 Aug 1987
Class 3 Motorcycles between 201 cc and 400 cc 27 Aug 1987
Motor Cars and Motor Tractors the weight of which unleden does not exceed 2500 kilograms

Licence No: S68183SAD

4

6263226



BIC No. SER162EAD



Date of issue

16-08-2019

APT BLK 274B PUNGGOL PLACE

#08-822 SINGAPORE 822274