

## 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             | 19/08/2020 15:32                |
| Date Of Accident           | 17/08/2020 12:20                |
| Exact Location Of Accident | BARTLEY RD TWDS BARTLEY RD EAST |
| Country/State of Loss      | SINGAPORE                       |

### DETAILS OF OWN VEHICLE

|                             |                               |
|-----------------------------|-------------------------------|
| Vehicle Registration Number | FBJ181J                       |
| <b>Insured/Policyholder</b> |                               |
| Name Of Registered Owner    | TAN TAI PHONG                 |
| NRIC No                     | S0021744A                     |
| Email Address               | EQUATOR.BROTHERHOOD@GMAIL.COM |
| Mobile Phone No             | (LOCAL) +65-91913788          |
| Alternative Phone No        | OFFICE-91913788               |

### Vehicle Particulars

|  |             |
|--|-------------|
| Manufacturer   | YAMAHA      |
| Model  | JUPITER     |
| 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 | SOMPO INSURANCE SINGAPORE PTE. LTD. |
| Type Of Coverage          | THIRD PARTY                         |
| Fleet Policy              | NO                                  |
| Policy Number             | D19MTMC01009794                     |
| Cover Note Number         |                                     |

### Driver

|                      |                               |
|----------------------|-------------------------------|
| Name of Driver       | TAN TAI PHONG                 |
| NRIC No              | S0021744A                     |
| Date Of Birth        | 15/09/1954                    |
| Occupation           | INDOOR                        |
| Date Of Driving Pass | 14/08/1979                    |
| Driving Experience   | 41 YEARS AND 0 MONTHS         |
| Gender               | MALE                          |
| Mobile Number        | (LOCAL) +65-91913788          |
| Fax Number           |                               |
| Contact Number       | OFFICE-91913788               |
| EEmail Address       | EQUATOR.BROTHERHOOD@GMAIL.COM |

|   |                               |
|---|-------------------------------|
| Address   | BLK 17 MARSILING LANE #07-229 |
| Postcode  | 730017                        |
| 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   | COLLISION - HEAD TO REAR |
| 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?  | 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?  | NO |
| If Yes, Please state which Police Station |    |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom?                     |    |

#### Circumstances of Accident

ON THE STATED TIME AND DATE, I WAS TRAVELLING AT BARTLEY RD TOWARDS BARTLEY RD EAST ON THE FIRST LANE. AS I WAS TRAVELLING PASS A TRAFFIC JUNCTION, I WISH TO STATE THE LIGHT WAS GREEN. SUDDENLY, VEHICLE B TURN RIGHT FROM HIS LANE AS HE WAS TOO FAST, I COULD NOT BRAKE IN TIME AND COLLIDED ONTO HIS LEFT REAR BUMPER PORTION. I FELL FROM MY BIKE.

#### 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         | SGH6916T         |
| Vehicle Make/Model/Colour           |                  |
| Details Of Properties               | VEHICLE B        |
| Vehicle Category                    | PRIVATE CAR      |
| Name of Driver                      | JOHARI BIN MOKIN |
| NRIC/Passport Number                | S1161793Z        |
| Contact Number                      |                  |
| Address                             |                  |
| Postcode                            |                  |
| Insurance Company Name              |                  |
| Nature Of Damage                    |                  |
| No. Of Passenger (Including Driver) |                  |

#### DETAILS OF INJURED PERSON 1

Name TAN TAI PHONG

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBJ181J

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SKETCH PLAN

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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.

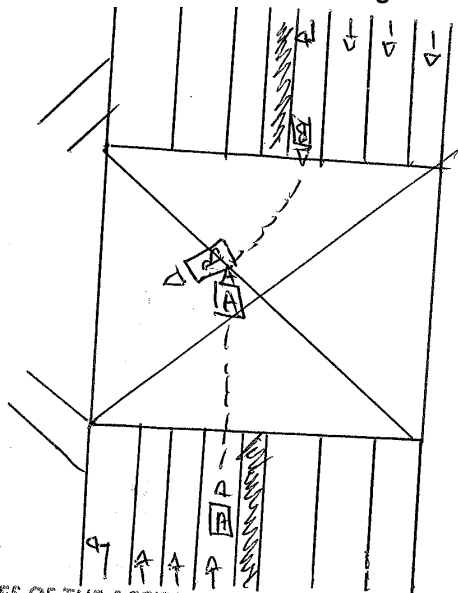
Tan  
Policyholder's Signature  
Date & Time:

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

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

# Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE STATED TIME & DATE I WAS TRAVELLING  
AT BARTLEY RD TOWARDS BARTLEY RD EAST ON THE 1ST LANE  
AS I WAS TRAVELLING PASS A TRAFFIC JUNCTION, I WISH TO STATE  
THE LIGHT WAS GREEN, SUDDENLY VEH B TURN RIGHT  
FROM HIS LANE AS HE WAS TOO FAST I <sup>COULD</sup> NOT BRAKE  
IN TIME I COLLIDED INTO HIS LEFT REAR PASSENGER PORTION,  
I FELL FROM MY BIKE.

## DECLARATION

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

Tan  
Policyholder's Signature  
Date & Time:

19/8/20

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

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

FBI (S) J

DOB: 17(08)20

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0021744A



Name  
TAN TAI PHONG



陈 大 鹏  
Race  
CHINESE

Date of Birth 15-09-1954 Sex M  
Country of Birth  
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S0021744A  
Name:  
TAN TAI PHONG



Birth Date: 15 Sep 1954  
Issue Date: 01 Oct 2003

000879274B





FBI LAIS

DOB: 12/08/20

0282502



NRIC No S0021744A



Blood Group Date of issue  
O+ 14-03-1992

APT BLK 17 MARSILING LANE #07-229  
SINGAPORE 730017  
NRIC No: S0021744A Date: 04-03-2004 No: 4894755

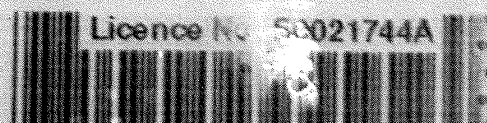
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

|          |   | PASS DATE   |
|----------|---|-------------|
| Class 2  | Motorcycles > 400 CC  | 14 Aug 1979 |
| Class 2A | Motorcycles between 201 CC and 400 CC   | 14 Aug 1979 |
| Class 2B | Motorcycles =< 200 CC   | 14 Aug 1979 |
| Class 3  | Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver, and motor tractors/vehicles =< 2500 kg | 02 Feb 1980 |

S0021744A

S / No. 9000298242

NP 428A





Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/08 Singapore Land Tower, Singapore 048823  
Tel: 6461 6555 | Fax: 6221 3302 | Website: www.sompo.com.sg  
Co. Reg. No.: 190005490E | GST Reg. No.: M200903106

# 1

### 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)**  
**MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)**

Cert No./Policy No. : D19MTMC01009794  
Insured : TAN TAI PHONG  
Motor Vehicle (Regn No.) : FBJ181J  
Cover : Third Party  
Policy Commencement Date : 10 DECEMBER 2019 00:00  
Policy Expiry Date : 09 DECEMBER 2020 23:59  
Maximum Liability (Section I) : Third Party  
Excess\* : NIL  
Named Driver 1 : TAN TAI PHONG  
HIRE PURCHASE OWNER : YEW HENG CREDIT ENTERPRISE PTE LTD

\* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive\*  
TAN TAI PHONG

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 278) has not been cancelled at the time of the accident, loss or damage.

#### Limitations As To Use

Use only for social, domestic and pleasure purposes and  
(a) by the Insured in person in connection with his business or profession or  
(b) in connection with the Insured's business or profession

The Policy does not cover

- (i) Use for hire or reward
- (ii) Use for racing pacemaking, reliability trial or speed-testing
- (iii) Use for the carriage of goods (other than samples) in connection with any trade or business
- (iv) Use for any purpose in connection with the Motor Trade

#### Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

For list of Accident Reporting Centres, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: (65) 6461 6555.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Transport Act, 1987 (Malaysia); and (2) the policy terms, conditions and exceptions of the Motorcycle Policy (Ref: MCY-MTMC.02)

Sompo Insurance Singapore Pte. Ltd.

*[Signature]*

Authorised Signatory

Date/Time of Issue : 03 DECEMBER 2019 11:18

#### IMPORTANT NOTICE

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11E07901 & ENSURE PTE. LTD. (MOTORCYCLE) CI Code: MY3 R4DZSW2J4BYTMKAJ



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

