

## 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	25/08/2020 16:18
Date Of Accident	18/08/2020 07:15
Exact Location Of Accident	ALONG TELOK BLANGAH ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FP3421T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE KAR WENG
NRIC No	SXXXX734Z
Email Address	RYANLEEORIGINAL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93888535
Alternative Phone No	OTHERS-93888535

### Vehicle Particulars

Manufacturer	HONDA
Model	CBR900 RRR-893CC (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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
Fleet Policy	NO
Policy Number	0088268343-16
Cover Note Number	

### Driver

Name of Driver	LEE KAR WENG
NRIC No	SXXXX734Z
Date Of Birth	25/10/1975
Occupation	INDOOR
Date Of Driving Pass	21/09/1999
Driving Experience	20 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93888535
Fax Number	
Contact Number	OTHERS-93888535
Email Address	RYANLEEORIGINAL@GMAIL.COM

Address	62 HAVELOCK ROAD #03-17
Postcode	169659
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?	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)	1

#### 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 - SINGAPORE CITY
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200825/7022

#### 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 Witness 1

Name	MR HAZRI
Phone Number	84680822
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EH701J
Vehicle Make/Model/Colour	HYUNDAI TUCSON
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SEAH HOW PUEY
NRIC/Passport Number	SXXXX218F

Contact Number	81185706
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

#### DETAILS OF INJURED PERSON 1

Name	LEE KAR WENG
Approximate Age	
Injuries Sustain	SERIOUS INJURY
Injured person in which vehicle?	FP3421T
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

## Accident Sketch Plan

### 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:

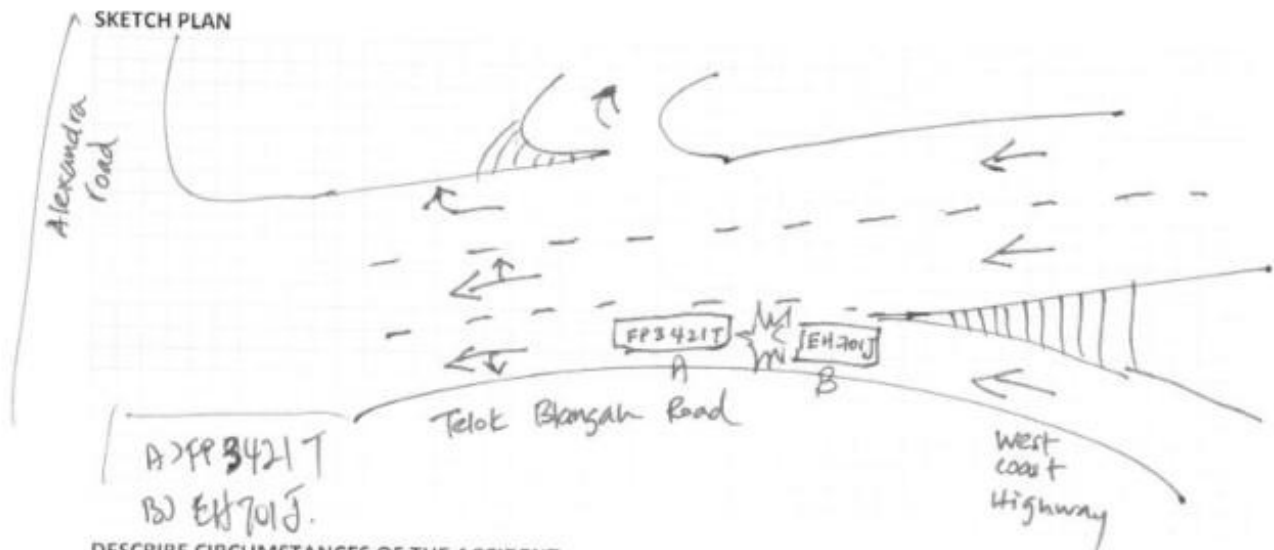
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

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.:

# Accident Sketch Plan



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER to Police Report 1/20200825/2022

## DECLARATION

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

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.:

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200825/7022

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

1 of 4

Report No. T/20200825/7022

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/08/2020 13:17	Vide Report No.: D/20200818/0029	Station Diary No.:
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### Informant's Particulars

Name of Informant: LEE KAR WENG			Address: 62 HAVELOCK ROAD #03-17 SINGAPORE 169659	
ID Type / ID No.: NRIC NO / S7532734Z			Contact No.: Home/Office: Mobile: 93888535	
Nationality: SINGAPORE CITIZEN			Email: RYAN7818@GMAIL.COM	
Sex: Male	Age: 44	Date of Birth: 25/10/1975	Type of Informant: Rider	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Real estate agent			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

### General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/08/2020 07:15	Type of Location: Straight Road
Location:  TELOK BLANGAH ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
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	Conditio	No of
EH701J	Car	HYUNDAI	Tucson	Brown	Seriously Damaged	0
FP3421T	Motorcycle	HONDA	CBR900RR	Black	Seriously Damaged	0

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200825/7022

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

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Report No. T/20200825/7022

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FP3421T	NTUC Income Insurance Co-Operative Limited	0088268343-16	31/05/2020	30/05/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	SEAH HOW PUEY		ID No.	S1747218F
Related Vehicle	EH701J (Car)		Contact No.	81185706
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Rider				
Name	LEE KAR WENG		ID No.	S7532734Z
Related Vehicle	FP3421T (Motorcycle)		Contact No.	93888535
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL		Class of Driving Licence & Expiry	Class: 2B,2A,2,3 Date of Expiry: NIL
Date	18/08/2020		Date	20/08/2020
No. of Days granted Medical Leave		30	Degree of	Serious

### Brief Details.

Dear Sir/Mdm

On 18th August 2020 at 715am, I, Lee Kar Weng of NRIC S7532734Z, was riding my motorbike, Honda CBR900 FP3421T along West Coast Highway. That morning was sunny with clear visibility. I exited the ramp to the Alexandra road direction. As I approached downwards to the end of the ramp, I slowed down to about 10-15km/hr on Telok Blangah road. I signalled right with the intention to change lane but the traffic was really heavy on the right and it was difficult to do so. I decided to stay in lane and speed up instead.

Unfortunately, before I could do that, I heard a thunderous loud bang. There was no braking sound and no honk. I flew up in the air and landed by the road side, seriously injured. I was hit by Hyundai Tucson EH701J directly from the rear. The car was driven by Mr Seah How Puey, S1747218F. That impact caused my motorbike to skid approximately 50 meters away.

## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200825/7022

Police Station Of Origin:  
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Report No. T/20200825/7022

### CONTINUATION OF REPORT

Mr Seah rushed over and said "I'm very sorry, I slept. How are you?"

Here are reference for an eye witness and others:-

Errant Driver: Mr Seah How Puey  
NRIC: S1747218F  
Car: Hyundai Tucson - EH701J  
Mobile No: 81185706

Victim Motorbike Rider: Mr Lee Kar Weng  
NRIC: S7532734Z  
Motorbike: Honda CBR900 - FP3421T  
Mobile No: 93888535

Witness: Deliveroo Rider, Mr Hazri  
Mobile: 84680822

Helper: Cyclist, Joshua Chan  
Mobile: 90720507



## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200825/7022

Police Station Of Origin:  
Traffic Police  
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Report No. T/20200825/7022

### CONTINUATION OF REPORT

#### Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPB /  
MUHAMMAD AFIQ BIN RAHMAT  
Contact No.: 65476171

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:  
25/08/2020 13:17

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



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