

## 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	26/08/2020 15:18
Date Of Accident	25/08/2020 23:45
Exact Location Of Accident	ALONG BRADDELL ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK5450U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YAP LYE HOCK JACKIE (YE LAIFU)
NRIC No	SXXXX043A
Email Address	JACKY.750@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91912411
Alternative Phone No	OTHERS-91912411

### Vehicle Particulars

Manufacturer	SUZUKI
Model	UH200A BURGMAN-200CC ABS
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	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	5115471536
Cover Note Number	

### Driver

Name of Driver	YAP LYE HOCK JACKIE (YE LAIFU)
NRIC No	SXXXX043A
Date Of Birth	23/06/1976
Occupation	OUTDOOR
Date Of Driving Pass	20/08/1998
Driving Experience	22 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91912411
Fax Number	
Contact Number	OTHERS-91912411
EEmail Address	JACKY.750@HOTMAIL.COM

Address	BLK 138 BISHAN STREET 12 #07-466
Postcode	570138
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 20 BISHAN STREET 23 , <b>POSTCODE:</b> 579757 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-5529999 - <b>FAX NO:</b> 65561905
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200826/2003

#### 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	GW7532G
Vehicle Make/Model/Colour	TOYOTA LITEACE
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	YAP LYE HOCK JACKIE (YE LAIFU)
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBK5450U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

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#### **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.

Q 26/8/2020  
1519  
Policyholder's Signature  
Date & Time:

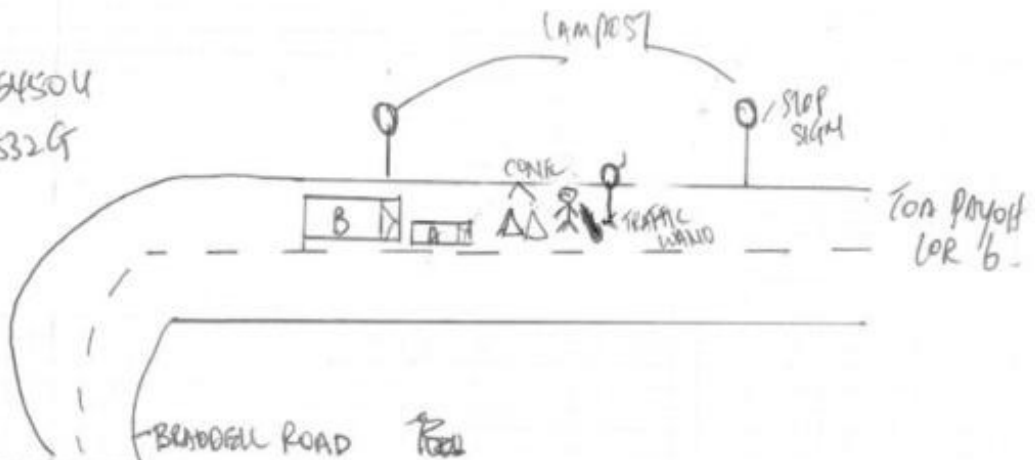
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

26/8/2020  
Reporting Centre Personnel's Signature  
Name: *Rashid Vithan*  
NRIC/FIN No.:

## Accident Sketch Plan

### SKETCH PLAN

A) FBK 54504  
B) GW 7532G



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT 7/2020826/2003

## 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: *Rosa*  
NRIC/FIN No.:

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200826/2003

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

1 of 3

Report No: T/20200826/2003

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 26/08/2020 02:37		Video Report No. E/20200825/0147		Station Diary No. 12	
<b>Informant's Particulars</b>					
Name of Informant: YAP LYE HOCK JACKIE			Address: APT BLK 138 BISHAN STREET 12 #07-466 SINGAPORE 570138		
ID Type / ID No.: NRIC NO / S7618043A			Contact No.: Home/Office: Mobile: 91912411		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 44	Date of Birth: 23/06/1978	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: UNEMPLOYED			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:		

## General Information of the Accident

Type of Accident: Non-Injury	Attended by Police	Drink Drive: Yes	Date/Time of Accident: 25/08/2020 23:45	Type of Location: Bend
Location:  BRADDELL ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Controlled by Others e.g. Workmen		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK5450U	Motorcycle	SUZUKI	UH200AL5 BURGMAN 200 ABS	Silver	Slightly Damaged	0
GW7532G	Van	TOYOTA	LITEACE 5DR	Black		0

## Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200826/2003

2 of 3

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

Report No: T/20200826/2003

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK5450U	NTUC Income Insurance Co-Operative Limited	5115471535	10/01/2020	09/01/2021

### Brief Details.

On 25/08/2020 at about 2345hrs, I was riding my motorcycle FBK5450U along Braddell Rd heading towards Toa Payoh Lor 6 direction. I noticed from my side mirror that a van, GW7532G was driving about 3 car lengths behind me taking the same route. As I was negotiating the bend, I barely noticed some safety cones and a traffic controller ahead of me. The traffic controller was holding onto a traffic wand however there was no visible light emitting from it. As the road was very dark, I slowly rode towards Toa Payoh direction. Suddenly, the traffic controller lowered his traffic wand, signaling for me to stop. As such, I applied my brakes and stopped my motorcycle.

After my motorcycle came to a stop, I felt an impact from the rear. I lost my balance and my motorcycle fell on the ground. After the impact, the driver of the van alighted and approached me to apologize. As I was speaking with him, I noticed that he reeked strongly of alcohol as such contacted police for assistance. Another vehicle passing by also came to provide their assistance to us. Subsequently TP officers came to scene. I wish to state that I am suffering from some injuries on my right ankle area however I have yet to see a doctor.

I wish to state that the main cause of the accident lies with the construction company in charge of the road works at the area. As they did not have any blinkers or lights at the area where they were working and the traffic controller was not visible. The traffic controller was positioned at a dark area between the 2 nearest lamp posts. This is a hazard to other road users and also poses as a threat to the traffic controller's personal safety. I was advised by the TP officers to lodge a report about the matter and was given a case card.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200825/2003

Police Station Of Origin:  
Bishan N.P.C  
20 Bishan Street 23 SINGAPORE 579757  
Tel No: 1800-5529999

3 of 3

Report No: T/20200825/2003

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:  
E /  
Sgt 2 PUA JIAN YAN, JEREMIAH

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Staff Sgt NUR ADELINA BINTE MOHAMMAD  
FUAT  
SINGAPORE  
Contact No: 65476066 SN 061

Authentication Stamp  
NP105

SIGNATURE

Signature Of Informant:

Date/Time:  
28/08/2020 02:37

Classification Of Case:



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





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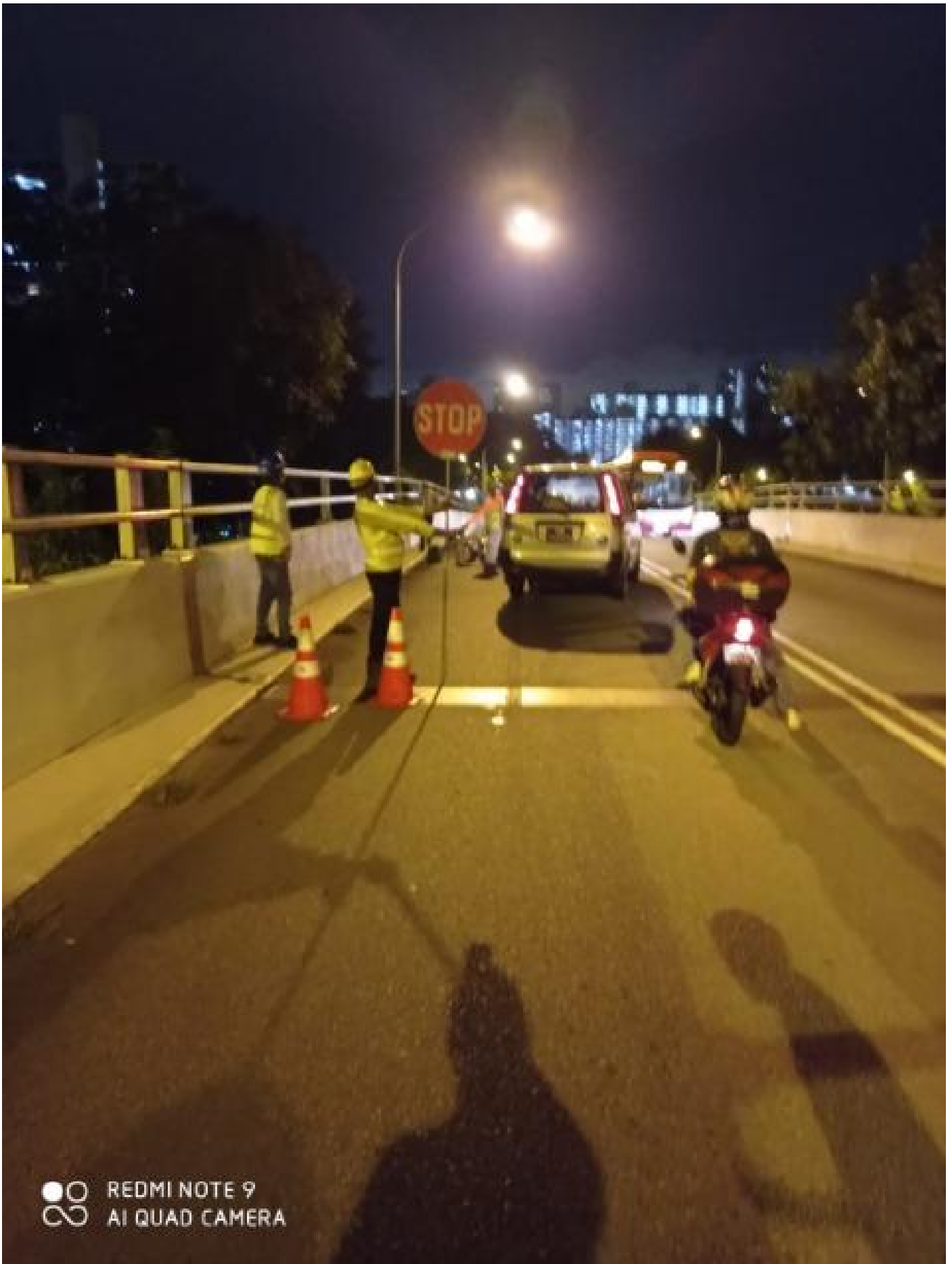




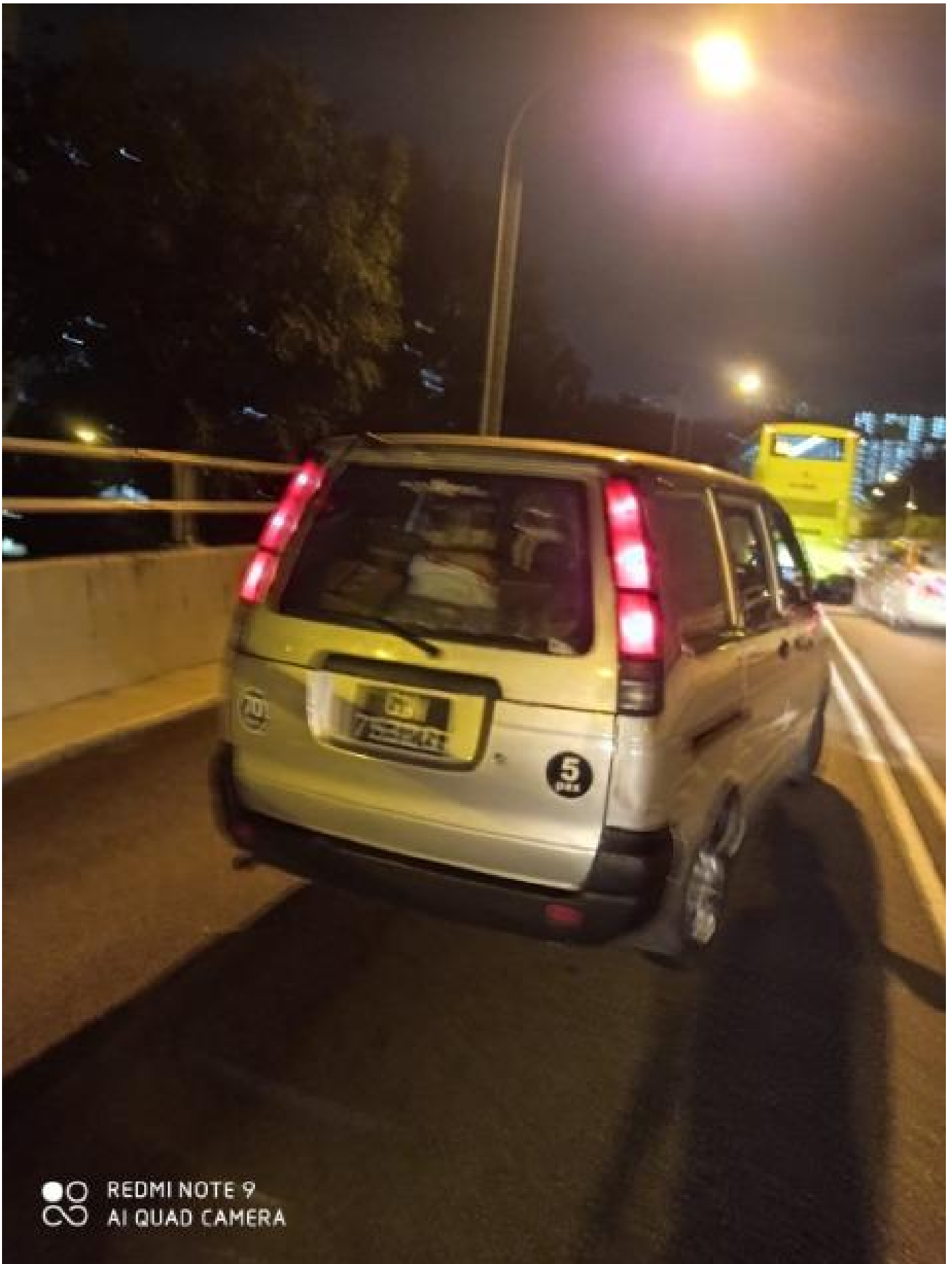
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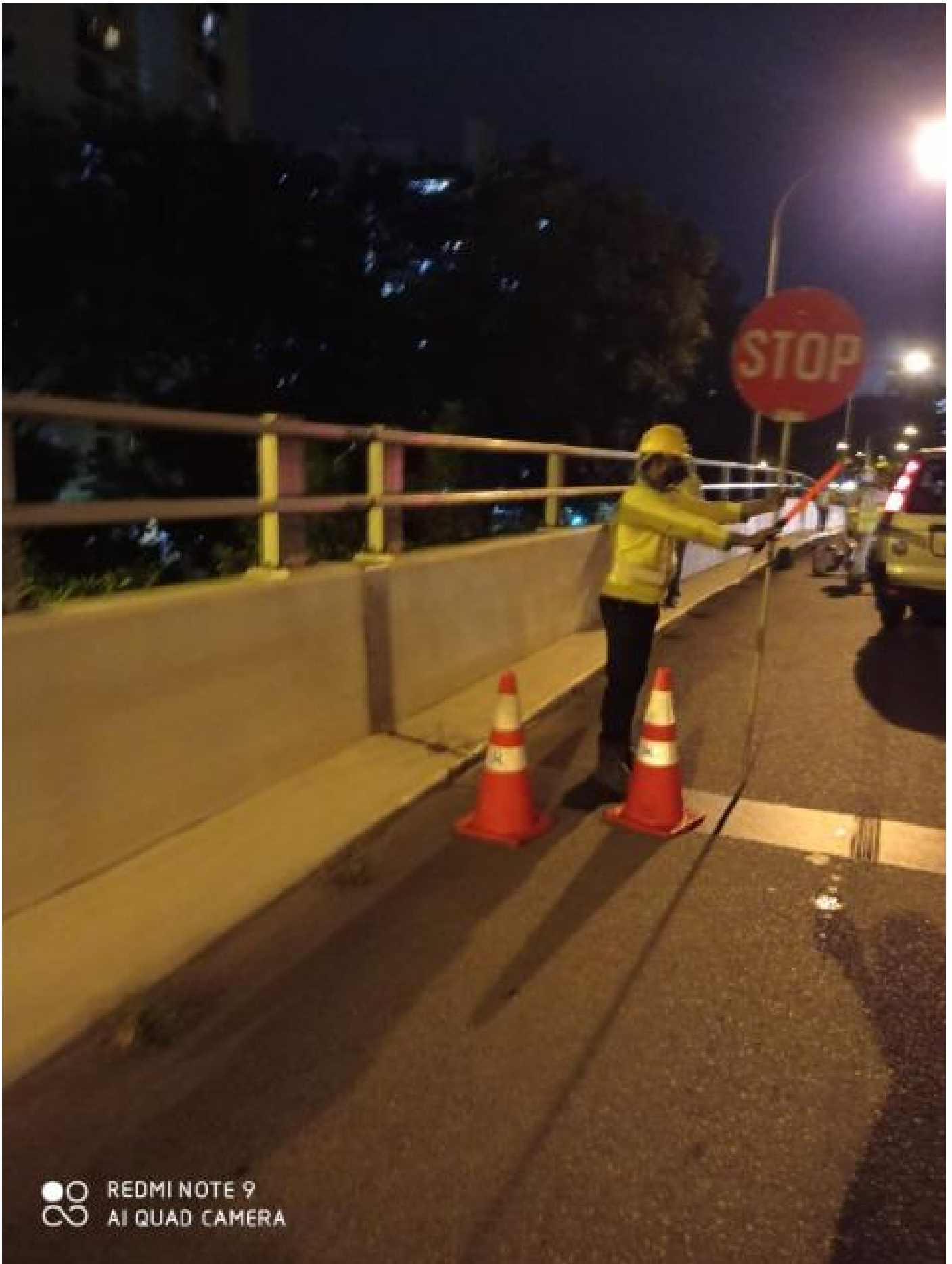


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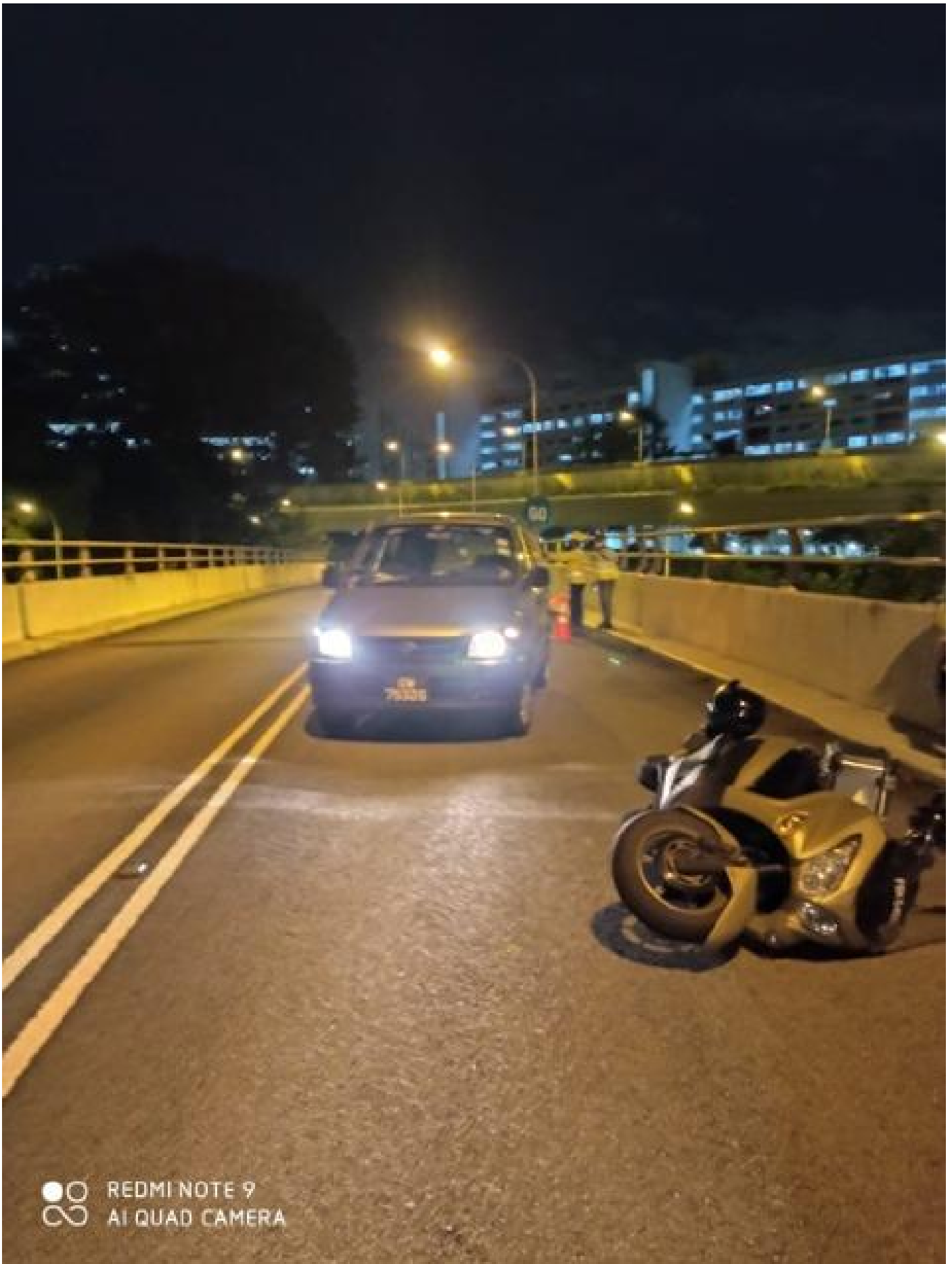
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Accident Photo



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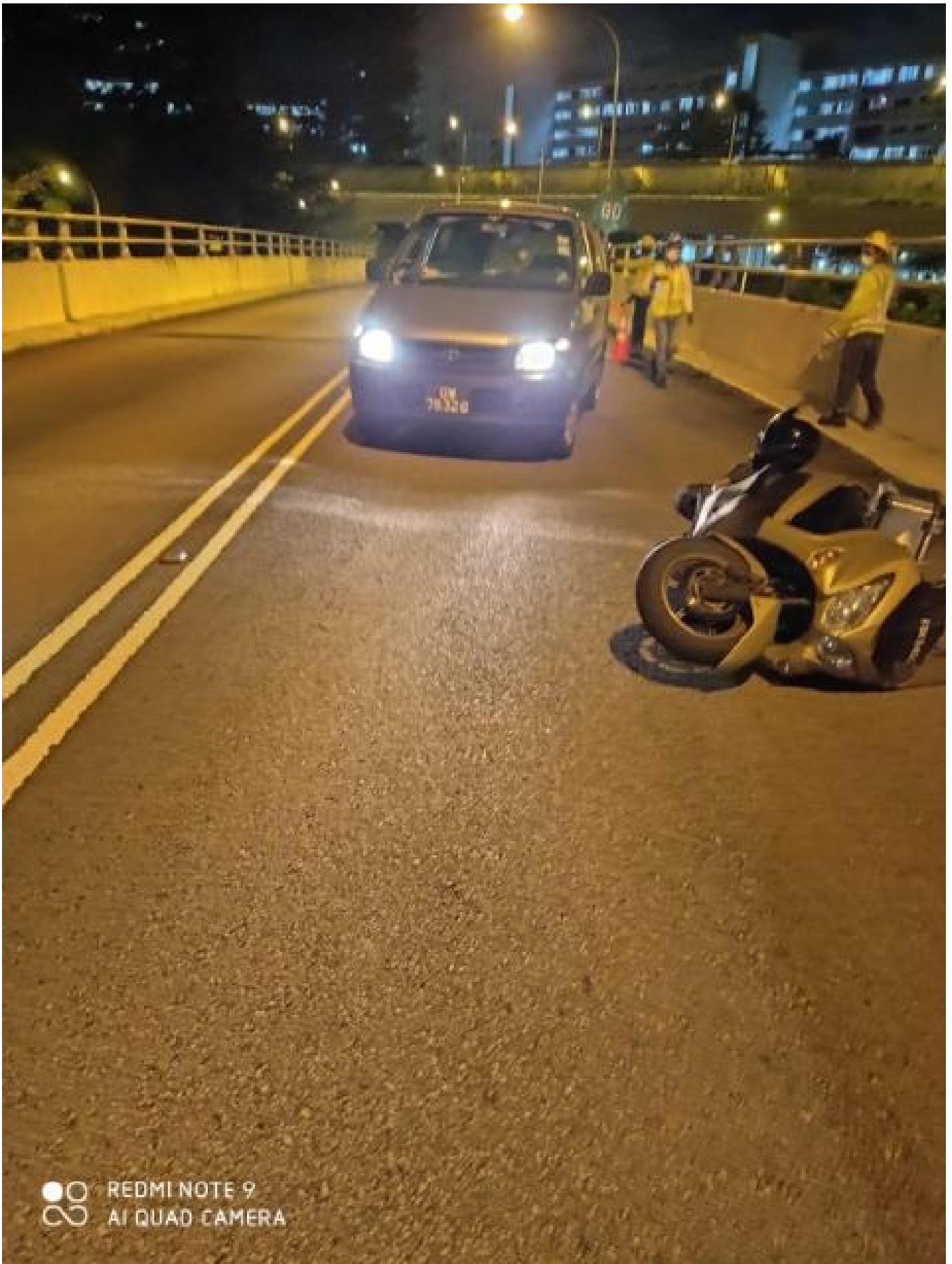


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Accident Photo



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