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Owner / Driver: (Tel:	•)	
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 wiful 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 ladgement 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 oforesaid.

The state of the s	ACCIDENT STATEMENT	The state of the
Date Of Report	01/09/2020 15:00	
Date Of Accident	28/08/2020 13:15	
Exact Location Of Accident	ALONG SERANGOON LINK	
Country/State of Loss	SINGAPORE	
A CONTRACTOR OF THE PARTY OF TH	DETAILS OF OWN VEHICLE	25年1月1日日日日日本
Vehicle Registration Number	FBH3165Y	
Institute of Particular Academic		

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBH3165Y	
Insured/Policyholder		
Name Of Registered Owner	LIM KWANG SENG	
NRIC No	SXXXX070C	
Email Address	NOEMAIL	

Mobile Phone No. (LOCAL) +65-84184039 Alternative Phone No OTHERS-84184039

Vehicle Particulars

Manufacturer YAMAHA

Model JUPITER MX-134CC HC

Exact Purpose for which vehicle was being used at WORKING PURPOSES time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

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 5118217392

Cover Note Number

Driver

Name of Driver LIM KWANG SENG

NRIC No SXXXX070C Date Of Birth 14/07/1964 Occupation OUTDOOR Date Of Driving Pass 23/03/1983

Driving Experience 37 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84184039

Fax Number

Contact Number OTHERS-84184039

EMail Address NOEMAIL Address

BLK 318A ANCHORVALE LINK

#04-243

Postcode

541318

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

OWNER

General Information of the Accident

Type Of Accident

COLLISION - U-TURN

Weather Conditions

CLEAR

Road Surface

ambulance?

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle) involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

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)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

SENGKANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE . POSTCODE:

545025 , COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800 - 3438999 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200828/2115

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 Vehicle Make/Model/Colour

SMQ4561C

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

D'SILVA WILFRED GILBERT

NRIC/Passport Number

SXXXX822C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

LIM KWANG SENG

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBH3165Y

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- The 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.
- 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:
 - 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:
 - 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)

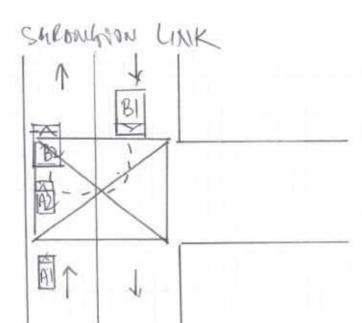
Date & Time:

Reporting Centre Personn

Name:

NRIC/FIN No.:

SKET	CH	DI	AN



A) 48 H 3657 B) SMQ 4561C

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DECLARATION

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

1/9/20

Policyholder's Signature Date & Time: Driver's Signature (if driver is not the policyholder) Date & Time: Reporting Centre Personppl's Signature

NRIC/FIN No.:





1 of 3

Report No. T/20200828/2115

Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

Tel No: 1800-343 8999

REPORT OF A TRAFFIC ACCIDENT

28/08/2	ne Report 020 20:06		Vide Report No.: F/20200828/0097	Station Diary No.			
Informa	nt's Partic	ulars		84			
Name o LIM KW	f Informant: ANG SENC		Address: APT BLK 318A ANCHOR 541318	VALE LINK #04-243 SINGAPORE			
ID Type / ID No.: NRIC NO / \$1670070C			Contact No.:				
	Nationality: SINGAPORE CITIZEN		Email: Mobile: 84184039				
Sex: Male	Age: 56	Date of Birth: 14/07/1964	Type of Informant:				
Race: Chinese	Race:		Language: Institution / School Name:				
Occupati Motorcyc	on: le delivery	man	Driving Licence Informatio Class: 2B,3				

Type of Accident:	Injury Attended by Police		Date/Time of Accident:	Type of Location Straight Road
Location: SERANGOON	LINK	No.	28/08/2020 13:15	5
Weather:				
		Road Surface:		Road Speed Limit:
Clear Traffic Flow: Two Way Type of Collisi		Road Surface: Dry Traffic Control: Not Controlled		Road Speed Limit: Traffic Volume: Heavy

e	Make	Model	0.		
orogolo			Color	Condition	No of Passenge
orcycle	YAMAHA	The second secon	Purple	Slightly	1
		IVIX (FIC)		Damaged	
				Slightly	1
	orcycle		MX (HC)	MX (HC)	MX (HC) Purple Slightly Damaged

Vehicle No.	Insurance Company	I was a second state of the second state of th		
	- Company	Insurance No	Effective	Expiry Date
111111111111111111111111111111111111111	NTUC Income Insurance Co-Operative Limited	5118217392	13/07/2020	12/07/2021





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

2 of 3 Report No. T/20200828/2115

Tel No: 1800-343 8999

CONTINUATION OF REPORT

Any Pedestrian	involved					
No. of Pedestria	ans Injured: NIL					
Rider	and the state of t	Use of F	edestri	an Cros	ssing: NA	
Name	LIM KWANG SENG				31,101	
	EM KWANG SENG		IDA	Vo.	S1670070C	
Related Vehicle	FRH3165V/M-4		Contact No.		310700700	
	FBH3165Y (Motorcycle)				8/19/020	
Hospital/Clinic	TAN TOOK STUDIES				84184039	
	TAN TOCK SENG HOSPITAL		Class of		Class: 2B,3	
			Drivi		Date of Expiry: NIL	
			Licence &		- ato of Expiry, MIL	
Date Treatment	28/08/2020		Expi	ry Date		
No. of Days gran	tod Marilland	Date Dis	charge	28/08	3/2020	
Driver	ited Medical Leave 03	Degree o	f Injury	Sligh		
Name	D'SILVA WILLERES				THE RESERVE	
	D'SILVA WILFRED GILBERT		ID No).	S8803822C	
Related Vehicle	SMQ4561C (Car)		32 1150		000030220	
	OMQ4561C (Car)		Conta	act No.	NIL	
lospital/Clinic	NIL				IVIL	
	1.77%		Class	of	Class: NIL	
			Drivin	g	Date of Expiry: NIL	
			Licen	ce &	Date of Expiry, MIL	
Date Treatment	NIL	II-see	Expiry	Date		
lo, of Days grant	ed Medical Leave NIL	Date Disc Degree of	harge	NIL		
3.01.11				NIL		

On the 28/08/2020 at about 1315hrs, I was riding my motorcycle bearing the registration plate FBH3165Y. I had just exited NEX shopping mall loading and unloading bay. While I was travelling straight, I noticed one car bearing the registration plate number SMQ4561C, suddenly made a u-turn in front of me. I quickly stepped on my brake however, was unable to avoid colliding to the left rear of the said car. The collision had caused me to lose balance and fall. I did not manage to check on my motorcycle properly however. I noticed that my side mirror and front mud guard and right side of my motorcycle fairing was damaged. The left rear of the car sustained some dents and scratches. Some passerby helped me up and pulled my motorcycle up. I exchanged particulars with the driver and subsequently he left. When I tried to walk, I felt pain on right toe, as such, I called for ambulance. The traffic police and ambulance came and I was conveyed to Tan Tock Seng Hospital by the ambulance. I sustain some cuts and abrasion on my right toes. Tan Tock Seng Hospital gave me MC from 28/08/2020 to 30/08/2020.





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

3 of 3 Report No. T/20200828/2115

Tel No: 1800-343 8999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

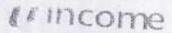
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: F / Staff Sgt NUR NADHIRAH BINTE HASHIM	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/08/2020 20:06
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
Sr Staff Sgt NOOR HIDAYAH BINTE ABDULLAH Contact No.: 65476251	
Authentication Stamp	is allow of

Claim Handling Accident MT/1102144									
Price No.	STREET,	Valvacia No.		#19+3115F		637 Rec	pistration No.		
Cartificos No.						- CONT.			
Principlicat Name	LIM KWANG SENG					Patraho	ide: NAIC	30879019C	
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Contact No. (Mostly)	94284129	Sentent No. (ortoxy				No. (Forma)		
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Contact No.[Mobile]	94384035	Contact No.(5	Mirecy.				hii (Home)	W	
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Modification History									
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100	NAC BURTL MERAH DOG NG NATIONAL ASSESSMENT CENTRE BEAVIOR	Photos	Nerrosi	History 2020-9-3
學	NAC_GLN25_HERAH_U00076) RATIONAL ADSESSMENT CENTRE SEMUICO B (BLN27 MERAH)) on U3 Sep 2020 LA L7	Photos	Normal	Photos JU2G-9-3
际	NAC_HURIT_MIRAH_HUGF76(NATHUNAL ASSESSMENT CERTAK DERVICE S (BLIKET MIRAH)) on D2 Sep 2020 14:17	Modes	Normal	Photograph 30 20 46-3
でできる。	AAC, SURIT, MERAN, AUDITH' NATIONAL ASSESSMENT CENTHE SURVICE S (BUVIT MERAN) IN US SEE 2020 14:20	Philips	Norma	Floring 2020-0-8
送	NAC BONT MENAN BOUNDS NATIONAL ASSESSMENT CENTRE SERVICE S (BORT MUNAN) IN 03 Sec 2020 (4:20	Strains.	Normal	Phone 2520-4-5
SAL SAL	NAC, NUNST, MERANT, NOCKTIC MATICHAN, ASSESSMENT CENTRE LERVICE E (RUNT) MERANT) un 01 SID 2020 14-10	Photos	Samuel .	Photos 2020-ti-3
3X	NAC_BURIT_MERAH_BOOK NJ NR HDNAL ASSESSMENT CONTRE HEAVED 3 (HJRAT) N(HARI) NN 03 Sep 2020 14:20	Photos	(10)(104)	Protes 2020-4-9
8	NAC_BURIT_MERAH_BOGFAL ANTIDRAL ASSESSMENT CENTRE SPRVIC B (BURIT MERANC) on 0.1 Sep (6.5) 14-30	Photos	Normal	Protes 2020-9-3
是基本	NEC BURTT MERAN, KURUMI NATIONAL AGGESSMENT CENTRE SERVICES (BURTT MERAN) on (12 Sep 2020 2012)	Photos.	Numbel	Fhoma 3020-9-3
	NAC_BURIT_MERAH, 836676/ NATIONAL 665668HR09T CENTRE SERVICE S (BURIT HERAM)) IN US SHE 2620 14:20	Proper	(Notimal)	Hensis 2025-9-3
200	NAC_BURLT_MERCH_BOOGSE NATIONAL ASSESSMENT CENTRE SERVICE B (BURLT MERCH) (), or C0 Sep. 3620-14-20	Photos	Normal	maning 2020 + 3
	NAC, MINIT, HERAH, BURG No. NATEURAL ADDRESSMENT CENTRE SERVIC 5 (BURG) MERAH (1 on D3 Sez) 2028 14-20	Photos	Statemas	Philim 2020+2
	NAC HINET MEAN ROOCTS! NATIONAL ADDESCRIPT CHARE SPRING \$ (BUSIT MEAN)); IN D2 Gap 252 B 14-20	Fritters	National	Printing 2020-0-3
200	NAC BURIT WERAN, NODETH NATIONAL ASSESSMENT CENTRE SURVICE S (BURIT MEANIT ON DE Sage 2010) 14:70	Profes.	Normal	Photos 2020-9-2
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ROME TRANSPORT AND THE REAL PARTY.

HUAL CHARGING CARDACTAL ACT ACT COLORAGES AT

MOTOR VEHICLES POURD MARTY RESCRIBERTS, 1058 (MATAYEA) Certificate Number 511821/202

1. Notes mark and Report at our Sologies of Welling Ehrsse Number

Name of Policypolder 3. Effective Date of Impurance

4 Expity Date of Proposition

5 Persons or Classes of Persons entered to 40 brok

(a) Name of Driver(s) Only.

Provided that the person driving is permitted in accordance with the iscensing or other laws or regulations to drive the Motor Vehicle or has teven so permitted and is not disqualified by order of a Court of law or by years or of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to User

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's hormess or profession. The Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pare making, reliability trial or speed-testing

(d) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) the 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 Tramport Act, 1987 (Malaysia), are not to be included under these

EXCESS (SECTION 1) N/A EXCESS (SECTION 2) N/A INSURE WITH CIDE N/A NAMED DRIVER (1) LIM KWANG SENG 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)

ASSURE PTF. 1TD (00000572842) Acency

Date of Bue. 13 Jul 2020 16:23 hrs

FOR NTUE INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive