

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	22/10/2020 18:03
Date Of Accident	21/10/2020 14:45
Exact Location Of Accident	JUNCTION OF CAIRNHILL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH2024C
Insured/Policyholder	
Name Of Registered Owner	SHERMIN MERCEDES KOH
NRIC No	SXXXX856Z
Email Address	XDETOX32@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96189091
Alternative Phone No	OTHERS-96189091

Vehicle Particulars

Manufacturer	YAMAHA
Model	FINO 115 CVT
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNMC2020-00001372
Cover Note Number	

Driver

Name of Driver	SHERMIN MERCEDES KOH
NRIC No	SXXXX856Z
Date Of Birth	23/10/1987
Occupation	INDOOR
Date Of Driving Pass	26/12/2012
Driving Experience	7 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96189091
Fax Number	
Contact Number	OTHERS-96189091
EEmail Address	XDETOX32@GMAIL.COM

Address	BLK 628 HOUGANG AVENUE 8 #08-96
Postcode	530628
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	SIDE SWIPE
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	ORCHARD NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 KILLINEY ROAD , POSTCODE: 239572 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7359999 - FAX NO: 67331934
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201021/2089

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	UNKNOWN
Vehicle Make/Model/Colour	AUDI Q5
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 SHERMIN MERCEDES KOH

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? FBH2024C

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.



 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

10/22/2020

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 SINGAPORE POLICE FORCE		 100201022099 1 of 3 Report No: 1/2020102102380				
Police Station Of Origin: Orchard N.P.C. 51 Kalliney Road SINGAPORE 239572 Tel No: 1800-7359999						
REPORT OF A TRAFFIC ACCIDENT						
Date/Time Report Made: 21/10/2020 16:42	Video Report No.	Station Diary No. 50				
Informant's Particulars						
Name of Informant: SHERMIN MERCEDES KOH		Address: APT BLK 626 HOUGANG AVENUE B #05-96 SINGAPORE 530628				
ID Type / ID No. NRIC NO / S8737856Z	Contact No. Home/Office	Mobile: 96189091				
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Female	Age: 32	Date of Birth: 23/11/1987				
Type of Informant: Rider						
Race: Chinese	Language:	Institution / School Name:				
Occupation: FITNESS INSTRUCTOR	Driving Licence Information: Class: 2B, 3A Date of Expiry:					
General Information of the Accident						
Type of Accident:	Injury: Hit and Run	Drink Drive: No				
		Date/Time of Accident: 21/10/2020 14:45				
Location: ORCHARD ROAD		Type of Location: X-Junction				
Weather: Clear	Road Surface: Dry	Road Speed Limit:				
Traffic Flow: Dual Carriage Way	Traffic Control: Traffic Light - Working	Traffic Volume: Heavy				
Type of Collision: Between Moving Vehicles - Head To Side		Anyone conveyed by ambulance: No				
Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passengers
FBH2024C	Motorcycle	YAMAHA	FINO 115 CVT	White	Slightly Damaged	0
Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry		
FBH2024C	FWD Singapore Pte. Ltd	PNMC2020-00001372	04/04/2020	03/04/		

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POLICE REPORT

10/22/2020

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T/20201021/20569

Report No: T/20201021/20569

Police Station
Orchard N.P.C
51 Killiney Road
Tel No: 1800-7359999

SINGAPORE POLICE FORCE

CONTINUATION OF REPORT

Details of Person Involved		Use of Pedestrian Crossing: NA	
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Rider		ID No.	S8737856Z
Name	SHERMIN MERCEDES KOH	Contact No.	96189091
Related Vehicle	NIL		
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.
I am the above mentioned person residing at the above mentioned address. On 21/10/2020 at about 1445hrs, I was riding my motorbike (FBH2024C) along Cairnhill Road towards Grange Road. I was waiting for the traffic light at the junction of Cairnhill Road, Orchard Road & Grange Road. I was at the front of the road waiting at the third lane from the left. The said lane had a left turn & go straight arrow. I was sharing the lane with a dark coloured car Audi Q5 which was on my right. When the traffic light turned green, I wanted to go straight and starting riding off but the said vehicle turned left in front of me. The said vehicle's left side hit the front of my motorbike. I fell on the road but the said vehicle didn't stop and continued along Orchard Road. There were several passers by and drivers who came to help me. I didn't managed to take down the said vehicle's number but I believe it is "SM750607". I suffered abrasion on my thigh and shin area and also feel pain on my back and neck. I went to a nearby clinic to get the abrasions cleaned. I have yet to get my back and neck checked at the hospital. I do not have any cam recording. I was in shock and didn't ask the people who helped me if they had any footage of the accident. There were some damages to the left side of my motorbike, my left side mirror and the left handle bar. My phone screen was also cracked in the accident.

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POLICE REPORT

10/22/2020

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20201021

 **SINGAPORE POLICE FORCE**

Police Station Of Origin
Orchard N.P.C
51 Killyney Road SINGAPORE 239972
Tel No. 1800-7359999

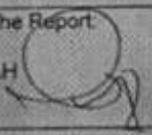
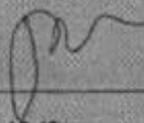

T/20201021/2069

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Report No. T/20201021/2069

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 3 KESAVA RAJ S/O SUPAIAH 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 21/10/2020 18:42
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt NEO ZHI YUAN Contact No. 65476079	Classification Of Case: SR 172
Authentication Stamp NP168 	

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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

