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 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 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	1
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 Date Of Report
 29/10/2020 12:47

 Date Of Accident
 23/10/2020 08:30

Exact Location Of Accident 12A BUROH CRESCENT GALAXY YARD

Country/State of Loss SINGAPORE

EDETAILS OF OWN VEHICLE

Vehicle Registration Number FBD5857S

Insured/Policyholder

Name Of Registered Owner KARTHIKOSORO NANTHAN S/O G HONCHONDRO

NRIC No SXXXX577F

Email Address KARTHIKOSORO@GMAIL.COM

Mobile Phone No (LOCAL) +65-88944169
Alternative Phone No OTHERS-88944169

Vehicle Particulars

Manufacturer YAMAHA Model 135LC

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 FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 5117341853

Cover Note Number

Driver

Name of Driver KARTHIKOSORO NANTHAN S/O G HONCHONDRO

 NRIC No
 SXXXX577F

 Date Of Birth
 19/01/1968

 Occupation
 OUTDOOR

 Date Of Driving Pass
 22/03/1996

Driving Experience 24 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-88944169

Fax Number

Contact Number OTHERS-88944169

EMail Address KARTHIKOSORO@GMAIL.COM

Address 124 PIONEER ROAD

Postcode 639584

Was driver an employee of the Insured's Company

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 COLLIDED INTO PARKED VEHICLE

4

NO

NO

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name JURONG NPP

ROAD: 158 YUNG LOH ROAD #01-58, POSTCODE: 610158, COUNTRY: Police Station Address

SINGAPORE

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: VIDEO BY THIRD PARTY VEHICLE

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number XD1171C

Vehicle Make/Model/Colour PRIME MOVER

Details Of Properties FRONT

Vehicle Category COMMERCIAL VEHICLE

Name of Driver ANTHONY

NRIC/Passport Number

Contact Number 97534350

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number FBH3707J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver NA

NRIC/Passport Number

Contact Number NA

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

BIDETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number FBN2160K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver NA

NRIC/Passport Number

Contact Number NA

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 7. By the rodgment 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:

- 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)
 - (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 discinsure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail backages); and/or
 - (v) cumplying 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 losurers' 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
- 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.

Paricyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

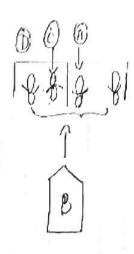
Date & Time:

Reporting Cantre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



- (B) FBD 5887S (B) XD1171C (C) FBH 3707 J (D) FBN 2160k

DESCRIBE	CIRCUMST	ANCES OF	THEA	CCIDENT
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	Refa	Refer Police	Refer Police Reput	Refer Police Regard

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

Policyholder's Signature

29 110/200

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Central Personnel's Signature

Norne:

NRIC/FIN No.:

P claim -



J/20201026/2101

motorsurvey@sompo.com.sg

1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Jurong NPP 158 Yung Loh Road #01-58 SINGAPORE 610158

Tel No: 1800-2659999

全国度的人有限公司26/2101 全国度的人有限公司26/2101 KIM K PTC PTE LTD Blk 27A, Jurong Ponting ad, #01-19, Singapore 619101 Tel: 6265 0226 / 6265 0358 Fax: 6265 2588

Date/Time Report Made	Vide Re	port No.		Station Diary No.
26/10/2020 18:17	J/20201026/2081			56
Name Of Informant	Address	3		
KARTHIKOSORO NANTHAN S/O G	3 JLN P	ERAK 1 TM	IN SRI SKUDAI 8	1300 JOHORE
HONCHONDRO	BAHRU	MALAYSIA	V	
ID Type / ID No.	Contact	No.		
NRIC NO / S6860577F	Home/C	Office	Mobile	
			88944169	
Nationality MALAYSIAN	Email A	ddress		
Occupation	Sex	Age	Date of Birth	Race
PRIME MOVER DRIVER	Male	52	19/01/1968	Indian
Institution/School Name	Langua			
Date/Time Of Incident	Location Of Incident			
23/10/2020 08:30	12A BUROH CRESCENT TEMPORARY SITE OFFICE			
	SINGAPORE 627548			
	GALAXY YARD			

Brief details.

On the 23/10/2020 at about 0530hrs, I parked my motorbike FBD5857S at the open area of 12A Buroh Crescent, motorbikes designated lots before proceeding for work.

On the same day at about 0830hrs, my supervisor informed me that my bike had been knocked over by the company's prime mover(XD1171C). I was also informed that, the driver of the said prime mover;

Signature Of Officer Recording The Report:	Signature Of Informant:
J / Sgt 3 TAN GUAN POH	tit
Signature Of Interpreter: Not applicable	Date/Time: 26/10/2020 18:17
Officer In-Charge Of Case: J / Bukit Panjang N.P.C / Sgt 2 MUHAMMAD DANIAL ISKANDAR BIN MOHAMED SALIM Contact No.: 63167364	Classification Of Case:
Authentication Stamp	

Signature:

(XDIIFIC)

金国摩罗私人有限公司 KIM KOCK MOTOR PTE LTD Blk 27A, Jurong Port Road, #01-19,





2 of 1

POLICE REPORT (NP299)

CONTINUATION OF REPORT全国摩Report No有個2000到/2101 KIM KOC)TC PTE LTD

Blk 27/\, Juro.ig Port Fread, #01-19, Singapore 619101

Tel: 6265 0226 / 6265 0358 Fax: 6265 2588

Anthony, HP:97534350 had parked the vehicle and forgot to engage the hand brake, thereafter he left the vehicle and the prime mover then rolled forward and started to collide onto the rows of motorbike, including mine.

I then went over to take a look and discovered that there are 02 motorbikes (FBN2160K and FBH3707J) underneath the said prime mover and my bike was lying down on the floor, on the right side of the said prime mover.

Due to the accident, my bike's cover set, bike seat, registration plate number, mud guard, bike box, bike box bracket shield, foot rest, bike absorber and center bar was damaged.

No one was injured during the incident. I was informed by the workshop that all the repair costs might be around SGD\$1000/- or more.

I am lodging this report for insurance claims.

Authentication Stamp

金国摩哆私人有限公司 KIM KOCK MOTOR PTE LTD Blk 27A, Jurong Port Road, #01-19,

Singapore 619101 Tel: 6265 0226 / 6265 0358 Fax: 6265 2588

1 1	
Signature Of Officer Recording The Report:	Signature Of Informant:
J / Sgt 3 TAN GUAN POH	Et .
Signature Of Interpreter: Not applicable	Date/Time: 26/10/2020 18:17
Officer In-Charge Of Case: J / Bukit Panjang N.P.C / Sgt 2 MUHAMMAD DANIAL ISKANDAR BIN MOHAMED SALIM Contact No.: 63167364	Classification Of Case: