

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 Submission 14/12/2020 16:11 (SGT)
Date of Accident 11/12/2020 16:30 (SGT)
Exact Location of Accident Boon Lay Way, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBK8729Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN CHUN HOW
NRIC No SXXXX964F
Email Address civic_how@hotmail.com
Mobile Phone No (Phone) +65-98211157
Alternative Phone No +65-98211157

VEHICLE PARTICULARS

Manufacturer Suzuki
Model Gsx-s1000
Variant -
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 - Claiming third party
Vehicle Category Motorcycle

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number 5111094097-01
Cover Note Number -

DRIVER

Name of Driver TAN CHUN HOW
NRIC No SXXXX964F
Date Of Birth 27/04/1980
Occupation Indoor

| | |
|--|-----------------------------------|
| Date Of Driving Pass | 02/04/2019 |
| Driving experience | 1 YEAR AND 8 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-98211157 |
| Alt. Phone Number | +65-98211157 |
| Email Address | civic_how@hotmail.com |
| Address | BLK 385 BUKIT BATOK WEST AVENUE 5 |
| Address complement | #22-340 |
| Postcode | 650385 |
| Is the driver the policyholder? | Yes |
| If No, Relationship of the Driver with the Insured | - |
| Does Driver Own Other Vehicles? | No |
| Vehicle Registration Number of Other Vehicle Owned by Driver | - |
| Insurance Company of Other Vehicle Owned by Driver | - |

GENERAL INFORMATION OF THE ACCIDENT

| | |
|--------------------------|-------------------------------|
| Type of Accident | Collision - Change/cross lane |
| Weather Conditions | Clear |
| Road Surface | Dry |

OTHER INFORMATION

| | |
|---|-----|
| Was any foreign vehicle involved in the accident? | No |
| Number of vehicles involved in the accident | 2 |
| Was anybody injured in the Accident? | Yes |
| Was any injured conveyed to hospital by ambulance? | No |
| Was any other material or property damaged? | Yes |
| Number of Passengers (Including Driver) | 1 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

DETAILS OF POLICE ACTION

| | |
|---|--|
| Was the accident reported to the police? | Yes |
| Police Station Name | Hong Kah North Neighbourhood Police Post |
| Police Station Phone No | (Phone) +65-18005679999 |
| Alt. Police Station Phone No | (Fax) +65-65652508 |
| Police Station Address | Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20201211/2135

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 | SH8782G |
| Vehicle Manufacturer | Hyundai |
| Vehicle Model | I40 |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Taxi |
| Name of Driver | TAN HOCK WENG FRANCIS |
| NRIC No | SXXXXX642G |

| | |
|---|----------------------|
| Contact Number | (Phone) +65-93916697 |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | - |

INJURED PERSONS DETAILS

INJURED 1

| | |
|---|---------------|
| Name of injured person | TAN CHUN HOW |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | SLIGHT INJURY |
| Injured person in which vehicle? | FBK8729Y |
| Were seat belts worn? | - |
| Was this injured conveyed to hospital by ambulance? | No |

SKETCH PLAN

IMPORTANT NOTICE

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5. **Any false reporting may be referred to the Police for investigation.**
6. 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.
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.
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.

| | | |
|---|--|---|
| <p>14/12/2020</p> <p>Policyholder's Signature / Date & Time 12.55 HRS</p> | <p>Driver's Signature (if driver is not the policyholder) / Date & Time ALONG BOON LAY WAY</p> | <p>Witnessed by Reporting Centre Personnel 14/12/2020</p> |
| <p>Sketch Plan</p> | | |

Describe Circumstances of the Accident

REFR TO POLICE (REPORT) 1/20201211/2135

We declare the foregoing particulars are true in every respect.

We declare the foregoing particulars are true in every respect.

per 14/12/2020

OneCare Clinic Bukit Gombak MRT
802 Bukit Batok West Avenue 5 #01-16 Singapore 659083
Tel: 62568472 | Fax: 62506502 | Email:
gombakmrt@onecaremedical.com.sg

MEDICAL CERTIFICATE

This is to certify that **TAN CHUN HOW (S8069964F)** is under treatment by me.

Unfit For Duty

Outpatient Leave: 5 Days From 11-12-2020 To 15-12-2020

Certified By:
Locum

Certificate No: MC/728040

Date of Visit: 11-12-2020

Date of Issue: 11-12-2020

Note:

This certificate is not valid for absence from court.
This certificate is electronically generated. No signature is required.

 OneCare Clinic Bukit Gombak MRT Pte Ltd
802 Bukit Batok West Avenue 5 #01-16 TEL: 6256 8472
Bukit Gombak MRT Station FAX: 6250 6502
Singapore 659083











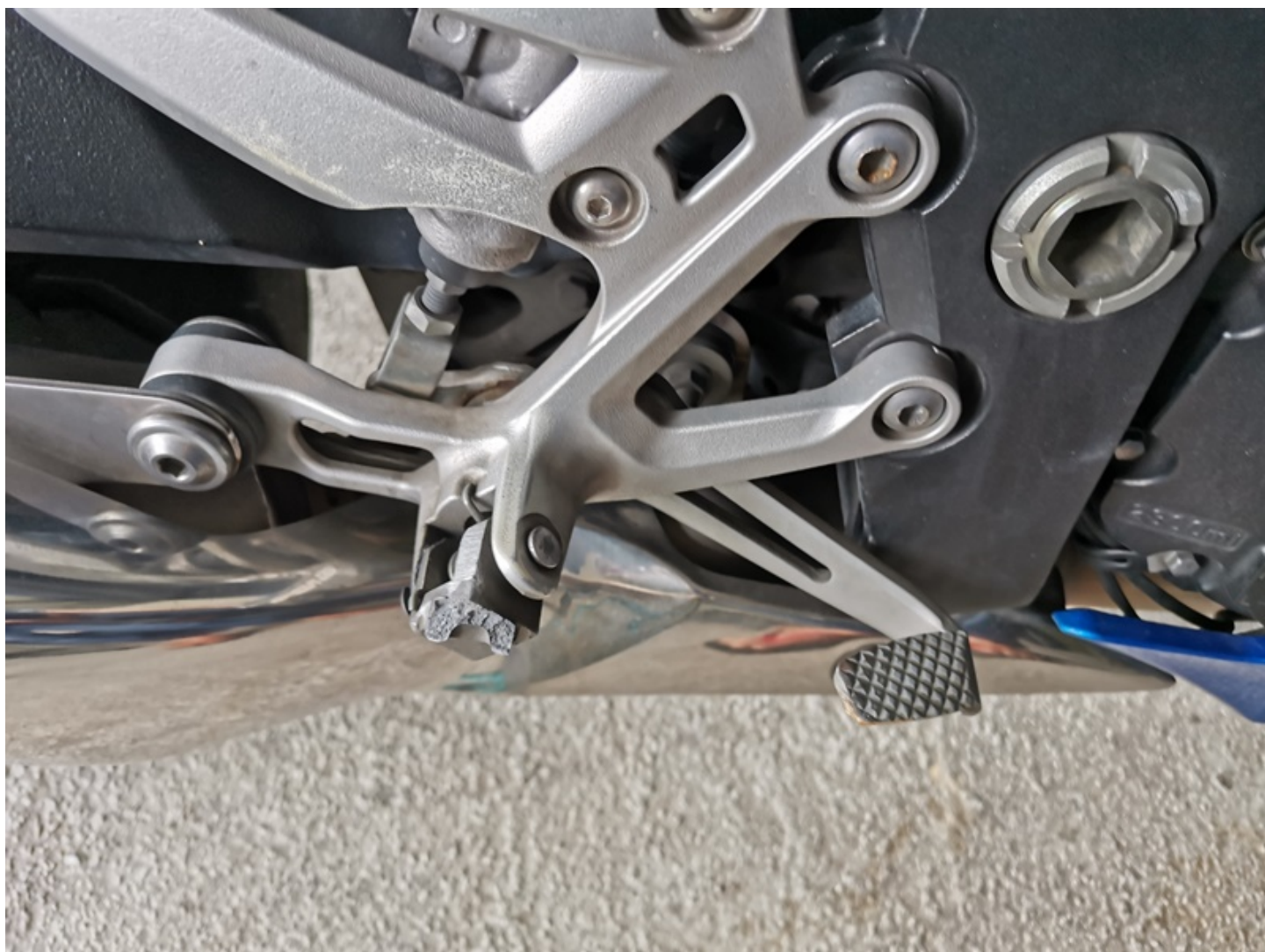


























**SINGAPORE
POLICE FORCE**



1/20201211/2135

1 of 3

Report No. T/20201211/2135

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-6679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/12/2020 21:28 Vide Report No.: Station Diary No.: 36

| Informant's Particulars | | | |
|--|------------|---|-----------------------------|
| Name of Informant: TAN CHUN HOW | | Address: APT BLK 385 BUKIT BATOK WEST AVENUE 5 #22-340 SINGAPORE 650385 | |
| ID Type / ID No.: NRIC NO / S8069964F | | Contact No.: Home/Office: Mobile: 98211157 | |
| Nationality: MALAYSIAN | | Email: | |
| Sex: Male | Age: 40 | Date of Birth: 27/04/1980 | Type of Informant: Rider |
| Race: Chinese | | Language: | Institution / School Name: |
| Occupation: CERTIS CISCO | | Driving Licence Information: Class: 2B, 2A, 2, 3 | Date of Expiry: |

| General Information of the Accident | | | | |
|--|------------------|-----------------------|--|---|
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 11/12/2020 16:30 | Type of Location: STRAIGHT ROAD TOWARDS JURONG TOWN HALL, NEAR A BUS STOP |
| Location: BOON LAY WAY | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: One Way | | Traffic Control: | Traffic Volume: Moderate | |
| 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 |
| FBK8729Y | Motorcycle | SUZUKI | GSX-S1000AL6 | Blue | Slightly Damaged |
| SH8782G | TAXI | | | | Slightly Damaged |
| No of Passenger | | | | | |
| | | | | | 0 |
| | | | | | 1 |



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999



T/20201211/2135

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Report No. T/20201211/2135

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|------------------------------|--|---------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No. | Effective | Expiry Date |
| FBK8729Y | NTUC Income Insurance Co-Operative Limited | 5111094097-01 | 11/09/2020 | 10/09/2021 |

| Details of Person Involved | | | | |
|-----------------------------------|-------------------------|--------------------------------|--|--|
| Any Pedestrian Involved: No | | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | | |
| Rider | | | | |
| Name | TAN CHUN HOW | | ID No. | S8069964F |
| Related Vehicle | FBK8729Y (Motorcycle) | | Contact No. | 98211157 |
| Hospital/Clinic | ONECARE CLINIC BOON LAY | | Class of Driving Licence & Expiry Date | Class: 2B, 2A, 2, 3 Date of Expiry: NIL |
| Date Treatment | 11/12/2020 | Date Discharge | NIL | |
| No. of Days granted Medical Leave | 05 | Degree of Injury | Slight | |
| Driver | | | | |
| Name | TAN HOCK WENG FRANCIS | | ID No. | S1293642G |
| Related Vehicle | NIL | | Contact No. | 93916697 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL | |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL | |

Brief Details.

On 11/12/2020 at about 1630hrs, I was riding my motorcycle (registration number: FBK8729Y) along Boon Lay Way towards Jurong Town Hall along lane 3. When I was near to a bus stop, which I do not remember the bus stop number, a taxi (registration number: SH8782G) driving on lane 2 suddenly made a left signal and immediately changed to lane 3. As it was too sudden, I didn't manage to stop in time and the taxi's left side hit onto my motorcycle.

Due to the impact, I skidded and suffer abrasions on my left elbow, left shoulder and left leg. I had went to OneCare Clinic Bukit Gombak and was given 5 days MC from 11/12/2020 till 15/12/2020.

**SINGAPORE
POLICE FORCE**

T/20201211/2135

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Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

Report No. T/20201211/2135

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:
J /
Sgt 2 MUHAMMAD MUJAHID BIN SAMSUDIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
11/12/2020 21:28

Officer In Charge Of Case:
TP / AEIT /
SI MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

Classification Of Case:

Authentication Stamp
NP165



Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408665

AMENDMENT

NP 168 No. : T/20201211/2135 Name : TAN CHUN HOW
Accident Date/Time : 11/12/2020/1630hrs Address : Blk 385 Bukit Batok West
Vehicle(s) Involved : FBK8739Y Avenue 5 #22-340
SH8782G NRIC No : S8069964F
Tel No : 98211157
Date : 12/12/2020

Dear Sir / Madam
Accident involving FBK8739Y and SH8782G
along Boon Lay Way towards Jurong Townhall Road on 11/12/2020 at 1630 hours

With reference to the above, I have on 11/12/2020 (date) 2128 hours (time) make a
police report at Hong Kah North NPP (Police Station/NPP/NPC)
In NP 168 - T/20201211/2135

On 12/12/2020 (date), 1650 hours (time) at Hong Kah North NPP
(Police Station/NPP/NPC), I make the following amendments to the above report;
The taxi driver changed lane to lane 3 to drop off passenger. Due to the impact, I skidded and
suffered abrasions on my right elbow, right shoulder and right leg. I wish to state that point of
Time, there was a bus (Service number: 180) behind my motorcycle. There is a camera on the
bus which can assist in the investigation.

Yours Faithfully,

(Signature)

FOR OFFICIAL USE

If a police officer recorded these amendments, please complete the following.

Name / Rank No : SSSgt Ashraf
Date and Time : 12/12/2020 at 1905hrs
Station Dairy No : 21
Signature :

HONG KAH NORTH NPP
BLK 370 BUKIT BATOK STREET 31
SINGAPORE 650370
TEL: 1800-567 5666