

# 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 ..... 22/12/2020 16:54 (SGT)  
Date of Accident ..... 07/12/2020 08:55 (SGT)  
Exact Location of Accident ..... Upper Changi Rd N, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... FBR5419A

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TAN SHIH HAN  
NRIC No ..... SXXXX607E  
Email Address ..... HANFRM@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-98274806  
Alternative Phone No ..... +65-98274806

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Cb400x  
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 ..... ThirdParty  
Fleet Policy ..... No  
Policy Number ..... 5118428902  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TAN SHIH HAN  
NRIC No ..... SXXXX607E  
Date Of Birth ..... 02/01/1985  
Occupation ..... Indoor

Date Of Driving Pass .....	30/12/2010
Driving experience .....	10 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-98274806
Alt. Phone Number .....	+65-98274806
Email Address .....	HANFRM@GMAIL.COM
Address .....	BLK 53 CHAI CHEE ST #10-348
Address complement .....	-
Postcode .....	460053
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 .....	Side Swipe
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? .....	Yes
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 .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201215/7017

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SGX3843E
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-

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 SHIH HAN
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BODY
Injured person in which vehicle? .....	FBR5419A
Were seat belts worn? .....	No
Was this injured conveyed to hospital by ambulance? .....	Yes

# **SKETCH PLAN**

## **IMPORTANT NOTICE**

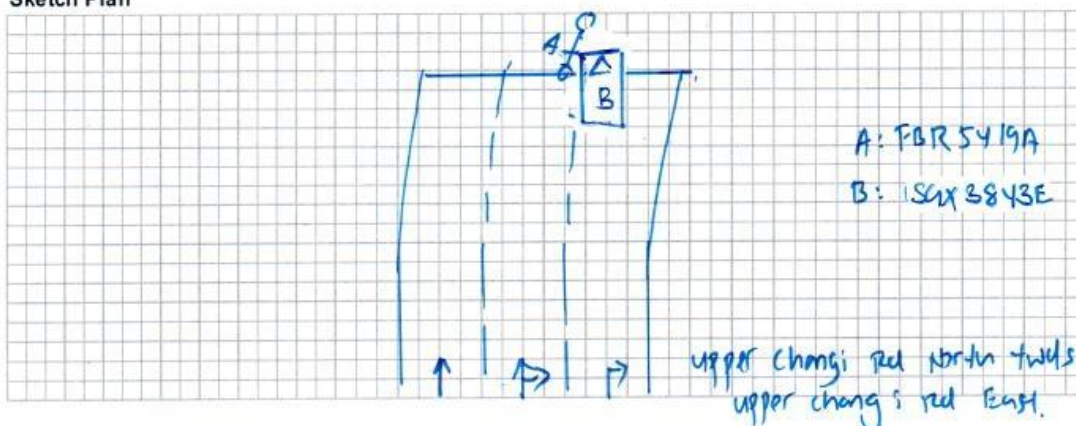
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**  
I understand, 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.

Policyholder's Signature / Date & Time

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

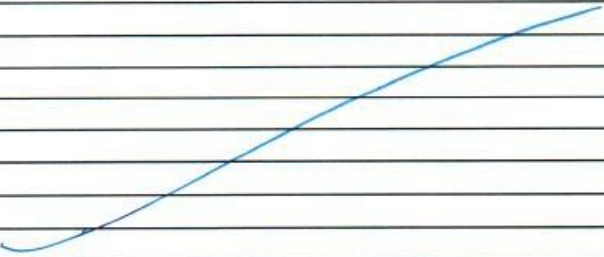
Witnessed by Reporting Centre Personnel

## **Sketch Plan**



**Describe Circumstances of the Accident**

Refer to police report - 1/20/2017/ #017.



**Declaration**

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



Witnessed by Reporting Centre Personnel













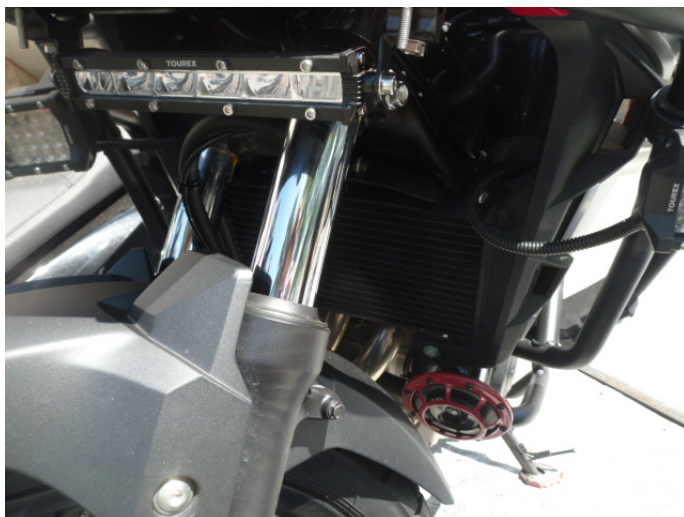














**SINGAPORE  
POLICE FORCE**



T/20201215/7017

1 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20201215/7017

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/12/2020 13:33		Vide Report No.: E/20201207/0039		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN SHIH HAN			Address: 53 CHAI CHEE STREET #10-348 SINGAPORE 460053		
ID Type / ID No.: NRIC NO / S8501607E			Contact No.: Home/Office: Mobile: 98274806		
Nationality: SINGAPORE CITIZEN			Email: hanfrm@gmail.com		
Sex: Male	Age: 35	Date of Birth: 02/01/1985	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Facilities Manager			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/12/2020 08:55	Type of Location: X-Junction
Location:  UPPER CHANGI ROAD NORTH				
Weather: Sunny		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBR5419A	Motorcycle	HONDA	CB400XA	Red		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBR5419A	NTUC Income Insurance Co-Operative Limited	5118428902	03/08/2020	02/08/2021



**SINGAPORE  
POLICE FORCE**



T/20201215/7017

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20201215/7017

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	TAN SHIH HAN	ID No.	S8501607E
Related Vehicle	FBR5419A (Motorcycle)	Contact No.	98274806
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 2B,2A,3 Date of Expiry: NIL
Date	07/12/2020	Date	15/12/2020
No. of Days granted Medical Leave	08	Degree of	Serious

**Brief Details.**

On 7th December 2020, at 0855hrs my motorcycle (FBR5419A) had a collision with a blue Toyota Vios. I was unable to exchange particulars with the driver. The incident took place at Upper Changi flyover, turning right from Upper Changi Road North towards Upper Changi Road East. I was travelling on the second lane (straight or right turn) approaching the above mentioned junction. While making a right turn, the blue Toyota Vios on the first lane made what seemed to be straight/wide turning which resulted in this unfortunate accident.

I wish to state that at this point of time, I was not lane splitting and was riding within the speed limit of the road. I was conscious and conveyed via ambulance to CGH. The impact caused a 3cm laceration on my left heel, multiple fractures to my left ankle which require operations, abrasion and bruises to my hip. The 128GB micro SD card from my onboard dash camera was handed over to a traffic police officer (SS T140119). As of submission of this report, I am still warded in the hospital. Date of discharge and number of days of MC are based on today's date, 15/12/2020 and 8 days (MC) since 07/12/2020 when admitted to the hospital.



**SINGAPORE  
POLICE FORCE**



T/20201215/7017

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20201215/7017

**CONTINUATION OF REPORT**Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
INTAN WULANDARI BUDDY SANTOSO  
Contact No.: 65476256

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
15/12/2020 13:33

Classification Of Case: