SB0F21180001 / Ban Hock Hin Co Pte Ltd
ENTRY DATE & TIME: 08/01/2021 13:42 (SGT)
SUBMITTED BY: Tan Chok Lok
VERSION: 1 (08/01/2021 13:42 (SGT))

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

Date of Submission	08/01/2021 13:42 (SGT)
Date of Accident	08/01/2021 09:15 (SGT)
Exact Location of Accident	Choa Chu Kang Ave 7, Singapore
Additional Location Information	812B Choa Chu Kang Ave 7 S(681812)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FR2944Y

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM SHENG CAI GLENN
NRIC No	SXXXX115G
Email Address	LIMSCGLENN@GMAIL.COM
Mobile Phone No	(Phone) +65-98268779
Alternative Phone No	(Home) +65-98268779

VEHICLE PARTICULARS

Manufacturer	Harley Davidson
Model	FXDX
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	Direct Asia
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	MC/00496668/02
Cover Note Number	-

DRIVER

Name of Driver	LIM SHENG CAI GLENN
NRIC No	SXXXX115G
Date Of Birth	24/02/1990
Occupation	Indoor

Date Of Driving Pass	11/05/2009
Driving experience	11 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98268779
Alt. Phone Number	(Home) +65-98268779
Email Address	LIMSCGLENN@GMAIL.COM
Address	NO
Address complement	-
Postcode	-
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	Collided into Parked Vehicle
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?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ACCIDENT STATEMENT IN THE SKETCH PLAN ATTACHED

ATTACHMENT(S)

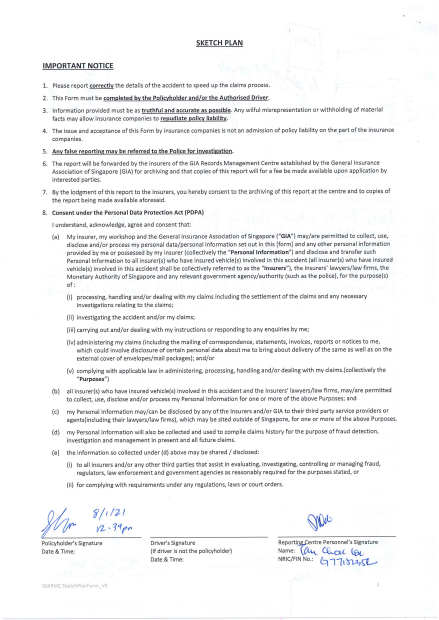
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB9781K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	MOHD NIZAM BIN YAZET
Passport No/FIN	GXXXX594W
Contact Number	(Phone) +65-85032772
Address	-
Address complement	-
Postcode	-

Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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.

8/1/21
12-39pm

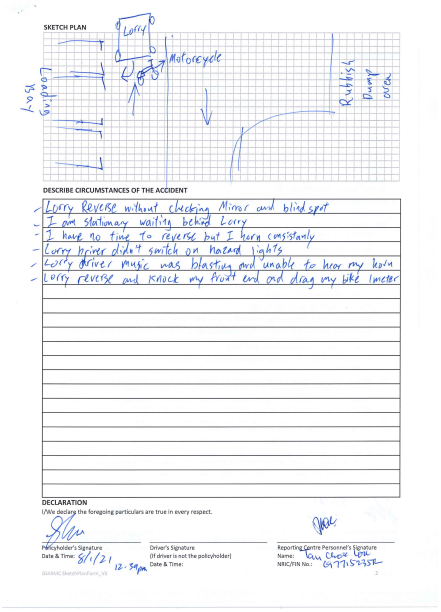
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

GIARSNC SketchPlanForm_V9

SKETCH PLAN #2



SKETCH PLAN

Lorry
Motorcycle
Lorry
Rubbish Dump area

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Lorry Reverse without checking Mirror and blind spot
I am Stationary waiting behind Lorry
I have no time to reverse but I turn consstantly
Lorry driver didn't switch on Hazard lights
Lorry driver music was blasting and unable to hear my horn
Lorry reverse and knock my front end and drag my bike 1meter

DECLARATION

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

Policyholder's Signature
Date & Time: 8/1/21 12:54pm

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

Reporting Centre Personnel's Signature
Name: Yau Chee Yok
NRIC/FIN No.: S7715235E

IMAGES

IMAGES #2

IMAGES #3

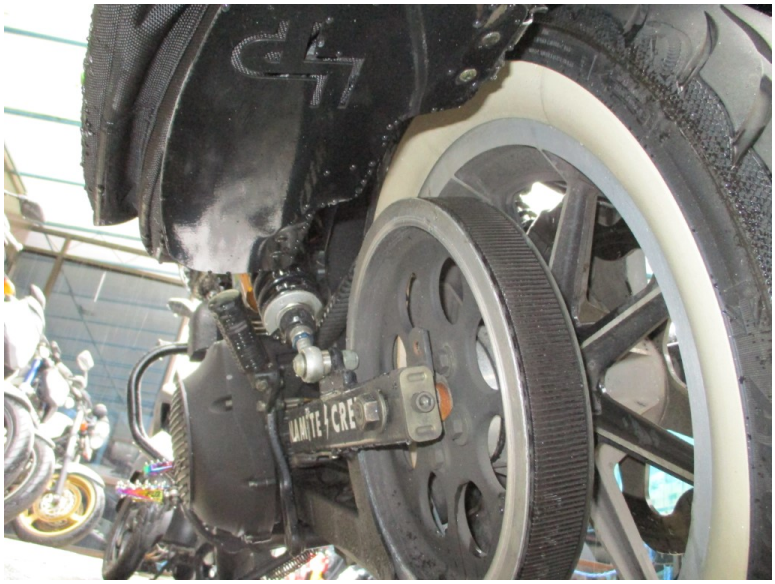
IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8



IMAGES #9

IMAGES #10

IMAGES #11

IMAGES #12

IMAGES #13