SA1E211J0005 / Abwin Service Pte Ltd ENTRY DATE & TIME: 19/01/2021 17:02 (SGT) SUBMITTED BY: Gerine Cheng VERSION: 1 (19/01/2021 17:02 (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.

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   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 19/01/2021 17:02 (SGT) Date of Accident 15/01/2021 20:30 (SGT) Exact Location of Accident Lincoln Rd, Singapore Additional Location Information JUNCTION OF LINCOLN ROAD X WEE NAM ROAD Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Motorcycle

Vehicle Registration Number FBB6054X

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NURUL HAQ S/O SHAIK MOHAMED NRIC No. SXXXX610C Email Address romianelson@gmail.com Mobile Phone No (Phone) +65-84993110 Alternative Phone No (Home) +65-84993110

#### VEHICLE PARTICULARS

Manufacturer Yamaha Model T135 Variant Exact purpose for which vehicle was being used at time of accident Employment

Vehicle Category

Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party

## INSURANCE COMPANY

Name of Insurance Company NTUC Type of Coverage ThirdParty Fleet Policy Policy Number 5117526427 Cover Note Number

#### DRIVER

Name of Driver **NELSON GUNALAN** NRIC No SXXXX994J Date Of Birth 31/10/1982 Occupation Outdoor

Date Of Driving Pass 24/09/2009 Driving experience 11 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-84993110 Alt. Phone Number Email Address romianelson@gmail.com Address **BLK 3 GEORGE'S ROAD** Address complement #03-69 Postcode 320003 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Friend Does Driver Own Other Vehicles? Nο 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 - Head on collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Rochor Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002949999 Alt. Police Station Phone No (Fax) +65-63918583 Police Station Address 11 Kampong Kapor Road Singapore 208678 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? No Was there any video captured by Car Camera? No Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** 3G

Vehicle Registration Number	SHA23830
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	Taxi
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)	1

# INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	NELSON GUNALAN
Address	BLK 3 GEORGE'S ROAD
Address Complement	#03-69
Post Code	320003
Approximate Age Years Old	-
Injuries Sustained	5 DAYS MEDICAL LEAVE
Injured person in which vehicle?	FBB6054X
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes



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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyhølder's Signature / Date &

Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

TINCOIN Road. LINCOLU ROAD

WEE HAM ROND

A - FBB605HX

B- SHA 2383G

Scanned with CamScanner

	Refer to	POLTCE	Report				
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Policyholder's Signature / Date & Time

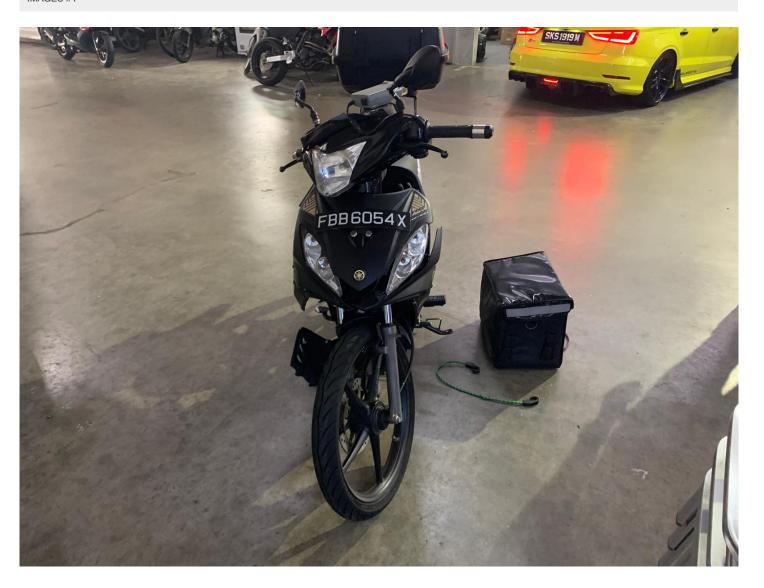
Driver's Signature (If driver is not the policyholder) / Date & Time

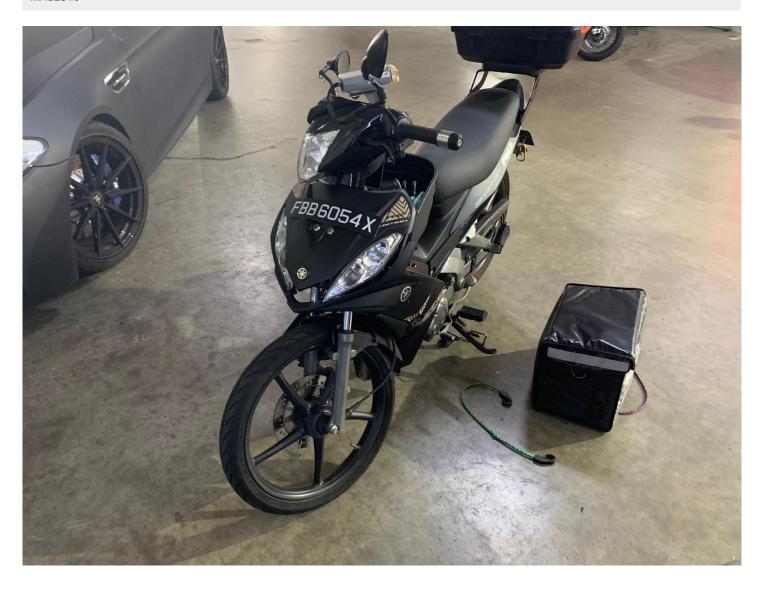
Witnessed by Reporting Centre Personnel

















Police Station Of Origin:

Rochor N.P.C

11 Kampong Kapor Road SINGAPORE

208678

Tel No: 1800-2949999

Report No. T/20210118/2170

REPORT OF A TRAFFIC ACCIDENT

Station Diary No.: Date/Time Report Made: Vide Report No .: 18/01/2021 23:36 135 E/20210115/0161 Informant's Particulars Name of Informant: Address: **NELSON GUNALAN** APT BLK 3 ST. GEORGE'S ROAD #03-69 SINGAPORE 320003 ID Type / ID No .: Contact No.: NRIC NO / S8237994J Mobile: 84993110 Home/Office: Nationality: Email: SINGAPORE CITIZEN Sex: Age: Date of Birth: Type of Informant: Male 38 31/10/1982 Rider Race: Language: Institution / School Name: Indian Occupation: Driving Licence Information: FOOD DELIVERY RIDER Class: 2B,3 Date of Expiry:

Type of Accident:	Conveyed By Ambula	nce Drink Drive: No	Date/Time of Accident: 15/01/2021 20:30	Type of Location: T-Junction
Lincoln Ro. Weather:		Road Surface:		Road Speed Limit:
Traffic Flow: Dual Carriage		Traffic Control: Not Controlled		Traffic Volume: No Traffic
	on:			Anyone conveyed by

Details of V	ehicle Involve	ed				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBB6054X	Motorcycle	YAMAHA	T135	Black	Seriously Damaged	
SHA2383G	Car	HYUNDAI	AE IONIQ HEV FL 1.6 DCT	Blue	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20210118/2170

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 2 of 3 Report No. T/20210118/2170

Tel No: 1800-2949999

CONTINUATION OF REPORT

Rider						
Name	NELSON GUNALAN			ID No.		S8237994J
Related Vehicle	FBB6054X (Motorcycle)			Conta	ct No.	84993110
Hospital/Clinic	TAN TOCK SENG HOSPITAL			Class Drivin Licent Expiry	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	15/01/2021		Date Disc	charge	16/01	1/2021
No. of Days granted Medical Leave 05			Degree o		Sligh	

#### Brief Details.

On the above mentioned date, time and location, I was travelling along Lincoln Road, sending my order, when at the Junction of Lincoln Road x Wee Naim Road, a taxi suddenly turned towards Wee Naim Road and I did not manage to stop in time and I collided onto the left front part of the vehicle's bonnet. In which it resulted to damaged fairing, bent fork, broken chassis and it rendered my motorcycle unusable. I was also attended by police and also conveyed to Tay Tock Seng Hospital due to bruises on both legs and pain on my back. I also received 5 days of MC from the hospital. My motorcycle is also towed away to a repair workshop and I am lodging this report for insurance purposes.



#### Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5117526427

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder 3. Effective Date of Insurance

4. Expiry Date of Insurance

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Cover : Third Party

: NURUL HAQ S/O SHAIK MOHAMED

: FBB6054X

: 5YP205776

: 27 Jun 2020

: 26 Jun 2021

- (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. This Policy does not cover
  - (a) Use for hire or reward.
  - (b) Use for racing, pace-making, reliability trial or speed-testing.
  - (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
  - (d) Use for any purpose in connection with the Motor Trade.
  - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**EXCESS (SECTION 1)** 

**EXCESS (SECTION 2)** 

INSURE WITH COF

NAMED DRIVER (1)

NAMED DRIVER (2)

HIRE PURCHASE COMPANY

SUM INSURED

N/A

N/A N/A

NURUL HAQ S/O SHAIK MOHAMED

**NELSON GUNALAN** 

YEW HENG CREDIT ENTERPRISE PTE LTD

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency

: PEOPLES INSURANCE AGENCY PTE LTD (00000614852)

Date of Issue

: 21 May 2020 18:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive