

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	21/01/2021 13:27 (SGT)
Date of Accident	16/01/2021 11:20 (SGT)
Exact Location of Accident	Bedok North Ave 1, Singapore
Additional Location Information	BEDOK NORTH AVENUE 1 TOWARDS NEW UPPER CHANGI ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF3952C
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	BERNARD TAY JIA WEI
NRIC No	SXXXX962F
Email Address	BERNARDTAY@OUTLOOK.SG
Mobile Phone No	(Phone) +65-97380866
Alternative Phone No	(Office) +65-97380866

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Cbf150
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	Etiqua
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	MA012365
Cover Note Number	-

DRIVER

Name of Driver	BERNARD TAY JIA WEI
NRIC No	SXXXX962F
Date Of Birth	12/10/1995

Occupation	Indoor
Date Of Driving Pass	04/04/2018
Driving experience	2 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97380866
Alt. Phone Number	(Office) +65-97380866
Email Address	BERNARDTAY@OUTLOOK.SG
Address	BLK 425 PASIR RIS DRIVE 6 #10-79
Address complement	-
Postcode	S510425
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

PLEASE REFER TO POLICE REPORT 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	GBF6993P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	BERNARD TAY JIA WEI
Address	BLK 425 PASIR RIS DRIVE 6 #10-79
Address Complement	-
Post Code	S510425
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBF3952C
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

IMPORTANT NOTICE

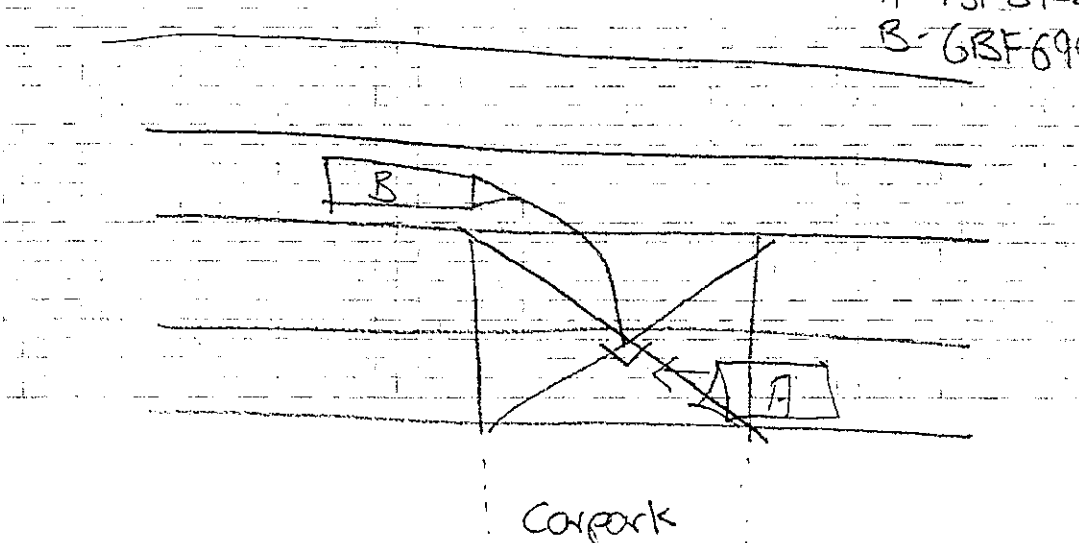
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



21/01/2021
A - FB 3952C
B - GRF 6993P

Describe Circumstances of the Accident

Please Refer to Police Report - attached.

Insurance Co.	Zig's	
Vehicle No.	78F 2912C	Date of Accident 16/01/2021
<input type="checkbox"/> Reporting Only <input type="checkbox"/> Own Damage Claim <input checked="" type="checkbox"/> Third Party Claim		

Declaration

I/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
 21/01/2021
 12:05PM



SINGAPORE POLICE FORCE



T/20210117/7088

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

1 of 3

Report No. T/20210117/7088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/01/2021 22:44		Vide Report No.:		Station Diary No.:	
Informant Particulars					
Name of Informant: BERNARD TAY JIA WEI			Address: 425 PASIR RIS DRIVE 6 #10-79 SINGAPORE 510425		
ID Type / ID No.: NRIC NO / S9536962F			Contact No.: Home/Office: Mobile: 97380866		
Nationality: SINGAPORE CITIZEN			Email: bernardtay@outlook.sg		
Sex: Male	Age: 25	Date of Birth: 12/10/1995	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Dispatch rider			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 16/01/2021 11:20	Type of Location: Straight Road
Location: BEDOK NORTH AVENUE 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 30 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		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	Condition	No of
FBF3952C	Motorcycle	HONDA	CBF150	Black	Seriously Damaged	0
GBF6993P	Car			Silver	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210117/7088

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

2 of 3

Report No. T/20210117/7088

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
FBF3952C	ETIQA INSURANCE BERHAD	MA012365	22/12/2020	21/12/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	BERNARD TAY JIA WEI	ID No.	S9536962F
Related Vehicle	FBF3952C (Motorcycle)	Contact No.	97380866
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,2,3 Date of Expiry: NIL
Date	17/01/2021	Date	17/01/2021
No. of Days granted Medical Leave	05	Degree of	Serious

Brief Details.

On the 16/01/2021 at 1120am while I was proceeding to Bedok Mall to pick up a food order, I met with an accident with van (GBF 6994 P). I am riding a Honda CBF150 FBF3952C The road I was traveling on was Bedok North Avenue 1 towards new upper Changi Road. I was riding on the left lane and was traveling at less than 40km/h. the right lane had a long waiting line. As the left lane was clear, When I approach a yellow box however, a van suddenly made an abrupt right turn without checking from the opposing lane resulting in me colliding head on with the van's left side. The van had no vision of the left lane but still made the turn into the car park. My helmet hit his passenger window and my motorcycle collided with his side door. I was thrown towards the van and landed on the right side of my vehicle. There were many kind passerby who rushed over and helped me lift the bike off my right foot as it was pinned under the motorcycle. I have one picture of the accident.

I was conveyed by ambulance to CGH and I was x rayed and doctor gave 3 days medics leave. On the 17th I still felt pain on my back and neck and the right side of my shoulder and foot so I visited intemedical 24 hours clinic for a further check up. Doctor then gave me an additional 5 days mc. I wish to state that this police report is amended from my previous police report.



**SINGAPORE
POLICE FORCE**



T/20210117/7088

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

3 of 3

Report No. T/20210117/7088

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:
17/01/2021 22:44

Classification Of Case:

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

CERTIFICATE No. MA012365

- | | | |
|----------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------|
| 1. Index Mark and Registration Number of Vehicle | FBF3952C | |
| 2. Name of Policyholder | BERNARD TAY JIA WEI | |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act | 22/12/2020 | Engine No.: KC11E2014629
Chassis No.: LALKC11A6A3347977
Excess: Third Party S\$0.00 |
| 4. Date of Expiry of Insurance | 21/12/2021 | |

5. Persons or Class of Persons entitled to drive

(A) THE INSURED

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.

6. Limitations as to use
USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.
THE POLICY DOES NOT COVER:
(i) USE FOR HIRE OR REWARD.
(ii) USE FOR RACING, PACE MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(iii) TRANSPORTING GOODS FLAMMABLES, CORROSIVE OR EXPLOSIVE IN NATURE.
(iv) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the General Insurance Association Of Singapore (GIA) / Life Insurance Association Singapore (LIA) / SDIC websites (www.gia.org.sg / www.lia.org.sg / www.sdic.org.sg).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV for the Road Transport Act, 1987 (Malaysia).

For and on behalf of **Etiqa Insurance Pte. Ltd.**
Approved Insurer


Authorised Signature

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9536962F



Name

BERNARD TAY JIA WEI

郑佳伟

Race

CHINESE

Date of birth

12-10-1995

Sex

M

Country of birth

SINGAPORE

S9536962F

REPUBLIC OF SINGAPORE DRIVING LICENCE



BERNARD TAY JIA WEI

Date: 12 Oct 1995

Date: 09 Jul 2015



002449451F



4533691



NRIC No. S9536962F

Date of issue

24-02-2010

Address

APT BLK 425 PASIR RIS DRIVE 6
#10-79
SINGAPORE 510425

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 2A	Motorcycles between 201 CC and 400 CC	03 Jun 2019
Class 2B	Motorcycles ≤ 200 CC	04 Apr 2018
Class 3	Motor cars ≤ 3000 kg with ≤ 7 passengers, exclusive of the driver; and motor tractors/vehicles ≤ 2500 kg	09 Jul 2015

S9536962F

S / No.9000329176

NP 428A

Licence No: S9536962F