

SS21211D0008 / STA Inspection Pte Ltd[575627]
ENTRY DATE & TIME: 14/01/2021 13:33 (SGT)
SUBMITTED BY: Mohamad Farez Bin Jalli
VERSION: 1 (14/01/2021 13:33 (SGT))

Your NCD will be affected due to late reporting

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report promptly 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	14/01/2021 13:33 (SGT)
Date of Accident	09/01/2021 20:30 (SGT)
Exact Location of Accident	932 Hougang Ave 9, Singapore 532932
Additional Location Information	932B HOUGANG AVE 9, BESIDE MULTI STOREY CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA6566R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE JIANG YAO
NRIC No	SXXXX369D
Email Address	christoff_lee@hotmail.com
Mobile Phone No	(Phone) +65-91856144
Alternative Phone No	+65-91856144

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Cb400
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	5120584424
Cover Note Number	-

DRIVER

Name of Driver	LEE JIANG YAO
NRIC No	SXXXX369D
Date Of Birth	28/10/1993
Occupation	Indoor



Date Of Driving Pass	17/12/2020
Driving experience	1 MONTH
Gender	Male
Mobile Number	(Phone) +65-91856144
Alt. Phone Number	+65-91856144
Email Address	christoff_lee@hotmail.com
Address	BLK 932A HOUGANG AVENUE 9 #16-84
Address complement	-
Postcode	531932
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	Raining
Road Surface	Wet

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 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

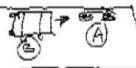
Vehicle Registration Number	SMQ52G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-90036023
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

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

SKETCH PLAN

SKETCH PLAN

OK 9225



(A) PEABES66R.
(B) B946526

multi story carpark

(Chapman Ave 9)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on Chapm Ave at approx 2000 9/1/21.
I came alongside the other car and before my vehicle say
to lane a hole on my bike he then told me he was
reversing and accidentally hit my bike... causing my bike
to fall

DECLARATION

I/We declare that the foregoing statements are true to the best of my/our knowledge

[Signature]
Witness Signature
Date: 9/1/21

[Signature]
Driver Signature
Date: 9/1/21

[Signature]
Accident Date: 9/1/21

of

Now

- Now

Now

04

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WARRANT TO ACT

In the matter of an accident involving _____ (my/our vehicle) and _____
_____ (other vehicles)
on _____ along _____

I/We, _____ (NRIC / Passport No / Co
Registration No) _____ of _____

Singapore _____ (Tel No) _____ hereby, authorize and
appoint you, _____ Advocates & Solicitors to act for me/us, to
conduct all necessary searches and to receive all proceeds of the settlement monies pertaining to the
above accident.

(Applicable for minors)

And/or on behalf of my (Relationship) _____ (Name) _____
_____ (Date of Birth) _____



Signature or Right Thumb Print of

Company chop (if applicable)

Name:

Date:

WARRANT TO ACT
PERSONAL INJURY CLAIM

In the matter of an accident on _____ involving _____
(own vehicle) & _____ (other vehicles)
along _____

I, _____ (Age) _____
(NRIC / Passport No) _____ of _____
_____ Singapore _____
(Occupation) _____ (Tel No) _____ hereby,
authorize and appoint you, _____ Advocates and Solicitors to act
for me, to conduct all necessary searches and to receive all proceeds of the settlement monies
pertaining to the above accident.

I hereby authorize you to pay to yourselves all legal fees comprising of the Party & Party costs
(claimed from and payable by the Third Party) and Solicitor & Client costs (payable by me). In the
event that there is any dispute of the agreed costs, I agree that the same will be taxed by the Court.

I hereby also give you my consent to collect, use, disclose and process my personal data for the
purpose of processing, handling and/or dealing of my claim and complying with applicable laws.
This may include disclosing and sharing my personal data with third party organisations, insurers,
professional advisers and any relevant authorities.

(Applicable for minors)

And/or on behalf of my (Relationship) _____ (Name) _____
_____ (Date of Birth) _____



Signature/Right Thumb Print of

Name:

Date:

AUTHORITY

In the matter of an accident involving _____ (my/our vehicle) and _____
_____ (other vehicles) on
_____ along _____

I/We, _____ (NRIC / Passport No / Co
Registration No) _____ of _____

Singapore _____ (Tel No) _____ hereby, authorize you,
_____ Advocate & Solicitors:

- (1) To collect, use, disclose and process my personal data for the purpose of processing, handling and/or dealing of my claim and complying with applicable laws. This may include disclosing and sharing my personal data with third party organisations, insurers, professional advisers and any relevant authorities.
- (2) To pursue/commence legal proceedings in my/our name(s) and to take instructions from my/our repairers whom I/we have appointed as my/our agents in respect of my/our claim(s).
- (3) To pay to yourselves all Party and Party costs you may at any time receive in connection with the above matter and confirm that there will be no need to pay the same into the Client's Account with your Bankers.
- (4) To release all proceeds of settlement monies received by you (after deducting your legal costs) to my/our repairer, MOTOPLEX PTE LTD in settlement of my outstanding bill/account with them.
- (5) To keep my/our agents informed as and when necessary. I/We only wished to be informed of my/our case when there are major developments.
- (6) To release the loss of use claim to me/us or to use it to offset any balance for the cost of repairs to my repairer, if the claim for cost of repair is not settled in full.



Signature or Right Thumb Print of

Company chop (if applicable)

Name:

Date:



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 : 5120584424

Cover : Third Party

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : FBA6566R |
| Chassis Number | : JH2NC39996M200125 |
| 2. Name of Policyholder | : LEE JIANG YAO |
| 3. Effective Date of Insurance | : 09 Jan 2021 |
| 4. Expiry Date of Insurance | : 08 Jan 2022 |
| 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.

6. Limitations as to Use#

- (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.

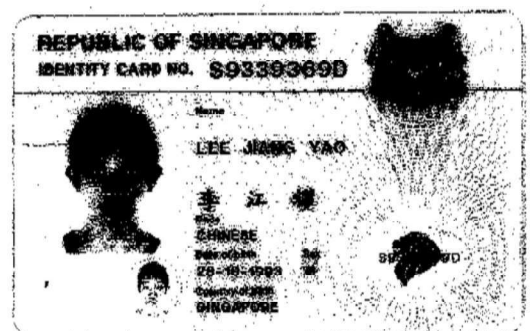
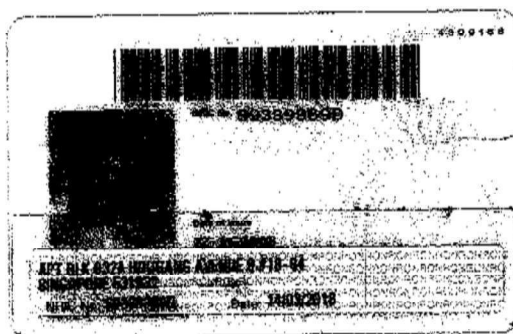
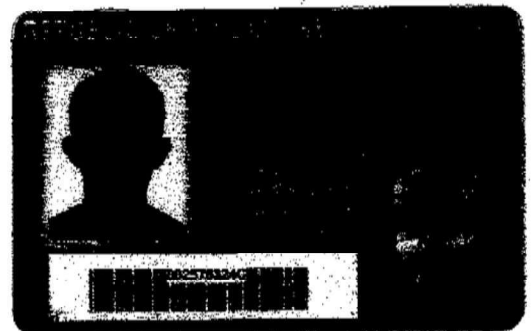
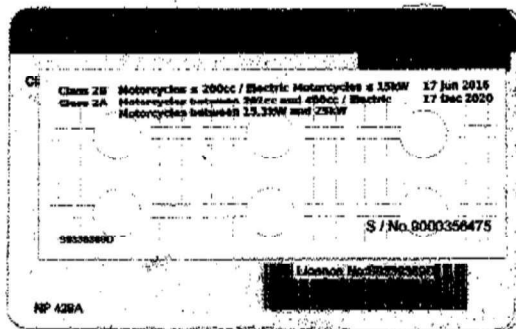
EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: LEE JIANG YAO
NAMED DRIVER (2)	: HO JING WEI LEONARD
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : DIRECT BUSINESS DEPT (00000600280)
Date of Issue : 08 Jan 2021 20:43 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive



Vehicle Registration Details

Vehicle No. FBA6566R	Make/ Model HONDA/CB400	Vehicle Scheme -
Current Propellant Petrol	Chassis No. JH2NC39996M200125	Vehicle Type Passenger Motorcycle /Autocycle/Moped

Owner's Details

Owner Name:

LEE JIANG YAO

Owner ID Type:

Singapore NRIC

NRIC/Passport/Company Cert No.:

59339369D

Registered Address

**APT BLK 932A HOUGANG AVENUE 9 #16-
84 SINGAPORE 531932**

Mailing Address:

-

Birth Date

-

Registration Details

Previous Vehicle No.:

-

Effective Date of Ownership:

11 Jan 2021

Original Registration Date:

07 Jul 2006

Registration Date:

07 Jul 2006

No. of Transfers:

7

IU Label No.:

715485240

Vehicle Specifications

Engine No.:

NC23E3100140

Chassis No.:

JH2NC39996M200125

Year of Manufacture:

2006

Primary Colour:

Grey

Secondary Colour:

Passenger Capacity:

-	1
Engine Capacity / Power Rating :	Maximum Power Output:
399 cc / -	-
Max Unladen Weight:	Maximum Laden Weight:
190 kg	329 kg
Vehicle Attachment 1:	Vehicle Attachment 2:
No Attachment	-
Vehicle Attachment 3:	
-	

Additional Registration Fee (ARF) and COE Information

Open Market Value:	Additional Registration Fee Rate:
\$6,644.00	15.00 %
Actual ARF Paid:	Vehicle Lifespan Expiry Date:
\$997.00	No Lifespan
OPC Cash Rebate Eligibility:	QP during COE Bidding Exercise:
No	\$900.00
COE No.:	COE Expiry Date:
2006080106000022Z	06 Jul 2026
COE Category:	COE Registration Category:
D - Motorcycle	D - Motorcycle
Quota Premium (QP) / Prevailing Quota Premium :	PQP Paid
\$900.00 / -	\$6,369.00
QP (Regn Cat):	
\$900.00	

PARF Rebate Details

PARF Eligibility:	PARF Eligibility Expiry Date:
No	-
Minimum PARF Benefit:	
-	

Vehicle Emissions Details

CO2 Emission:

-
CO Emission:

HC Emission:

-
NOx Emission:

-
PM Emission:

-
Message:

To renew the COE, the Prevailing Quota Premium payable is that of Category D.

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