

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 15/03/2021 10:49 (SGT)
Date of Accident 12/03/2021 21:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information UPPER SERANGOON ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBQ9181M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ROSET LIMOUSINE SERVICES PTE. LTD.
Company Reg No 200406722Z
Email Address charlesleong96@gmail.com
Mobile Phone No (Phone) +65-96969982
Alternative Phone No +65-96969982

VEHICLE PARTICULARS

Manufacturer Yamaha
Model Jupiter z1
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
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 Axa
Type of Coverage ThirdPartyFireTheft
Fleet Policy Yes
Policy Number -
Cover Note Number -

DRIVER

Name of Driver LEONG POH HOONG
NRIC No S1343320H
Date Of Birth 16/11/1959
Occupation Outdoor

| | |
|--|---|
| Date Of Driving Pass | 20/03/1986 |
| Driving experience | 35 YEARS |
| Gender | Male |
| Mobile Number | (Phone) +65-96969982 |
| Alt. Phone Number | - |
| Email Address | charlesleong96@gmail.com |
| Address | 208C PUNGGOL PLACE #13-932 SPORE 823208 |
| Address complement | - |
| Postcode | - |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Hirer |
| 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 | Collision - Head to Rear |
| 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? | Yes |
| Police Station Name | Punggol Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18006049999 |
| Alt. Police Station Phone No | (Fax) +65-64468015 |
| Police Station Address | Blk 21A Tebing Lane Singapore 828837 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN/POLICE REPORT

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 | SHA8751M |
| 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) -

SKETCH PLAN

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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

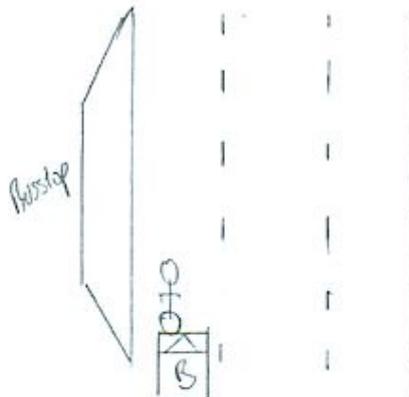
[Handwritten Signature]

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

[Handwritten Signature]

Witnessed by Reporting Centre Personnel

Sketch Plan



A: FBQ9181M
B: SHA8751M










**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999



T/20210312/2125

1 of 3

Report No. T/20210312/2125

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
12/03/2021 23:10

Vide Report No.:

Station Diary No.:
66

Informant's Particulars

| | | | | | |
|--|------------|------------------------------|--|--|----------------------------|
| Name of Informant: LEONG POH HOONG | | | Address: APT BLK 208C PUNGGOL PLACE #13-932 SINGAPORE 823208 | | |
| ID Type / ID No.: NRIC NO / S1343320H | | | Contact No.: Home/Office: Mobile: 96969982 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 61 | Date of Birth: 16/11/1959 | Type of Informant: Rider | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: Delivery Rider | | | Driving Licence Information: Class: | | Date of Expiry: |

General Information of the Accident

| | | | |
|--|----------------------|--|-------------------------------------|
| Type of Accident: Non-Injury Others | Drink Drive: No | Date/Time of Accident: 12/03/2021 21:40 | Type of Location: Straight Road |
| Location: UPPER SERANGOON ROAD | | | |
| Weather: Clear | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Traffic Volume: Heavy |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------------|------|-------|-------|------------------|-----------------|
| FBQ9181M | Motorcycle | | | | Slightly Damaged | 0 |
| SHA8751M | Car | | | | | 0 |



**SINGAPORE
POLICE FORCE**



T/20210312/2125

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

2 of 3
Report No. T/20210312/2125

CONTINUATION OF REPORT

Brief Details.

On the above date, time and location (near bustop 63029 opposite The Helping Hand), I was riding my rental motorcycle FBQ9181M along lane 3. I was travelling to the left (near to roadside) of a taxi SHA8751M and had overtaken it when a bus in front of me slowed down. I slowed down as well and suddenly I felt an impact from my rear. I do not remember if I had moved back into the middle of lane 3 but the vehicle that knocked onto my rear is the said taxi.

I stopped my motorcycle at the roadside and the taxi stopped in front of me. The driver alighted and both of us took photographs. I asked him how he wants to settle this and he says this is a small matter. I asked for some reimbursement but he refused and told me to go make a police report. The taxi driver left without providing me his particulars.

I am lodging this report as my license plate is dented and this is a rental motorcycle.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999



T/20210312/2125

3 of 3

Report No. T/20210312/2125

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

| | |
|--|--------------------------------|
| Signature Of Officer Recording The Report: F / Staff Sgt FARHAN BIN ABU | Signature Of Informant: |
| Signature Of Interpreter: Not applicable | Date/Time: 12/03/2021 23:10 |
| Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151 | Classification Of Case: |
| Authentication Stamp NP168 SN 158 SIGNATURE | |

AXA INSURANCE PTE LTD
 8 Shenton Way, #24-01
 AXA Tower, Singapore 068811
 Customer Centre #01-21
 Tel:1800 8804888 Fax:-
 Website:www.axa.com.sg
 GST Registration Number: 199903512M
 customer.care@axa.com.sg



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. | : VFX/P2300235 | Account No. : 00104 |
| Coverage | : Third Party Fire & Theft Only | |
| Sum Insured | : Market Value At The Time Of Loss | |
| Name of Policy Holder | : ROSET LIMOUSINE SERVICES PTE LTD | |
| Vehicle Registration No. | : FBQ9181M | |
| Period of Insurance | : From 20/06/2020 To 19/06/2021 (Both Dates Inclusive) | |
| PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE* | | |
| Any other person provided he is in the Policyholder's employ and is driving on their order or with their permission 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. | | |
| LIMITATIONS AS TO USE* | | |
| (a) Use only for the Policyholder's business or profession (b) Use for social, domestic, and pleasure purposes by the Policyholder The Policy does not cover use for the carriage of passengers for hire or reward, racing, pace-making, reliability trial or speed testing | | |
| (13) | | |
| EXCESS : | | |
| Sect II - Any Rider | : SGD 500.00 | |
| * 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. | | |

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).

AXA INSURANCE PTE LTD


 Authorized Signature

Issued by - SGOGOWT on 12/06/2020

IMPORTANT :

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189).

FOR INDIVIDUAL CUSTOMERS : Cover Under the policy is valid only upon the payment of the full premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS : Please refer to the Premium Warranty Clause on the policy