

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 23/03/2021 15:37 (SGT)
Date of Accident 08/03/2021 08:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information KJE(TUAS)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBD8362H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HEERAN RAJ S/O P GUNASAGER
NRIC No SXXXX237C
Email Address HEERANRAJ24@GMAIL.COM
Mobile Phone No (Phone) +65-81387429
Alternative Phone No +65-81387429

VEHICLE PARTICULARS

Manufacturer Honda
Model Cbr600rr
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 - Reporting only
Vehicle Category Motorcycle
Transmission Manual
CC 599

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 5111145491-01
Cover Note Number -

DRIVER

Name of Driver HEERAN RAJ S/O P GUNASAGER
NRIC No SXXXX237C

Date Of Birth	24/08/1995
Occupation	Outdoor
Date Of Driving Pass	29/06/2019
Driving experience	1 YEAR AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81387429
Alt. Phone Number	+65-81387429
Email Address	HEERANRAJ24@GMAIL.COM
Address	BLK 371 WOODLANDS AVE 1
Address complement	#02-829
Postcode	730371
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	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:J/20210308/7021 & T/20210318/2246

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	FBB2839A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle

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	HEERAN RAJ S/O P GUNASAGER
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	FBD8362H
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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.

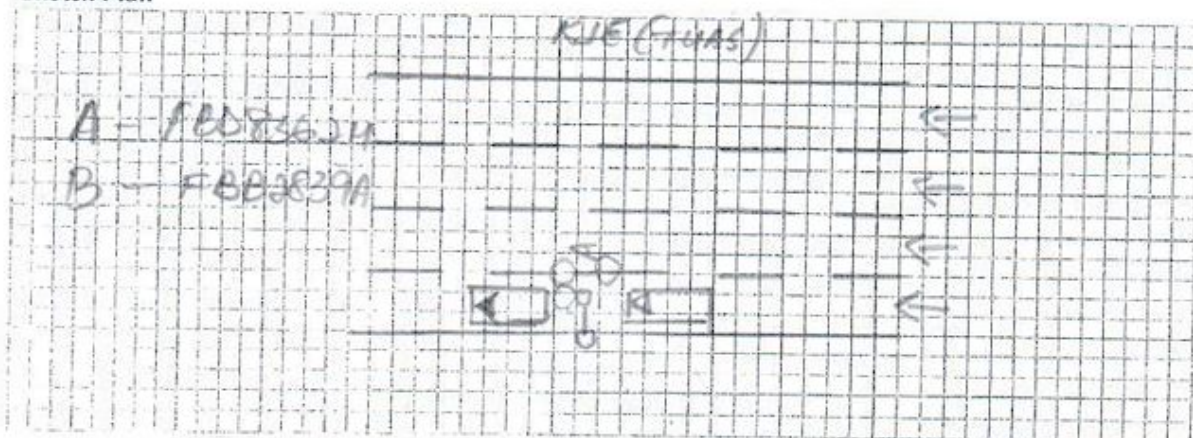
(collectively the "Purposes")

- (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.

Paul 19/03/21
Policyholder's Signature / Date & Time

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

afym 23/03/21
Witnessed by Reporting Centre Personnel

Sketch Plan

Declaration

Policyholder's Signature / Date &
Time

Witnessed by Reporting Centre
Personnel

1 of 2

Report No. J/20210308/7021

Date/Time Report Made 08/03/2021 12:46	Vide Report No.		Station Diary No.
Name Of Informant HEERAN RAJ S/O P GUNASAGER	Address 371 WOODLANDS AVENUE 1 #02-829 SINGAPORE 730371		
ID Type / ID No. NRIC NO / S9531237C	Contact No. Home/Office: Mobile: 81387429		
Nationality SINGAPORE CITIZEN	Email Address HEERANRAJ24@GMAIL.COM		
Occupation Aeronautical engineering technician	Sex Male	Age 25	Date of Birth 24/08/1995
Institution/School Name	Race Indian		
Date/Time Of Incident 08/03/2021 07:50 - 08/03/2021 08:30	Language English		
	Location Of Incident CHOA CHU KANG WAY		

I was travelling along KJE(TUAS). There was a traffic jam on the highway. I was making my way to the last lane to take the Brickland road exit. Another motorbike rider entered the lane abruptly and I immediately sounded my horn. The rider stopped his vehicle right in front of me upon noticing my motorbike. It was too late for me to avoid his vehicle and I collided into the right side of his motorbike and skidded down the lane.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Not applicable	Date/Time: 08/03/2021 12:46
Signature Of Interpreter: Not applicable	Classification Of Case:
Officer In-Charge Of Case:	

 Accident report **SN09213N000C**



T/20210318/2246

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Report No. T/20210318/2246

Continuation of CSF For NP168

Rider			
Name	Unknown Rider		ID No. NIL
Related Vehicle	FBB2839A (Motorcycle)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Rider			
Name	Heeran Raj S/O P. Gunasegar		ID No. S9531237C
Related Vehicle	FBD8362H (Motorcycle)		Contact No. 81387429
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	08/03/2021	Date Discharge	08/03/2021
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Facts.

On 08/03/2021 I lodge a online Traffic Accident report reference report number T/20210308/7021, however at that point of time I don't have the other vehicle's registration number. However on 16/03/2021, I then managed to obtained the number of the other vehicle involved in the accident as (FBB2839A) from the Traffic Police. The in charge case from Traffic Police is IO Thabagesh Jeyathesh.

The exact location of the accident will be after Choa Chu Kang Flyover before Brickland exit, along KJE towards Tuas.

I am lodging this report with the details of the other vehicle (FBB2839A) as to facilitate my Insurance claim and my repair claims through the workshop. That's all.





















**SINGAPORE
POLICE FORCE**



J/20210308/7021

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POLICE REPORT (NP299)

Report No. J/20210308/7021

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 08/03/2021 12:46	Vide Report No.	Station Diary No.
Name Of Informant HEERAN RAJ S/O P GUNASAGER	Address 371 WOODLANDS AVENUE 1 #02-829 SINGAPORE 730371	
ID Type / ID No. NRIC NO / S9531237C	Contact No. Home/Office:	Mobile: 81387429
Nationality SINGAPORE CITIZEN	Email Address HEERANRAJ24@GMAIL.COM	
Occupation Aeronautical engineering technician	Sex Male	Age 25
Institution/School Name	Date of Birth 24/08/1995	Race Indian
Date/Time Of Incident 08/03/2021 07:50 - 08/03/2021 08:30	Location Of Incident CHOA CHU KANG WAY	

Brief details.

I was travelling along KJE(TUAS). There was a traffic jam on the highway. I was making my way to the last lane to take the Brickland road exit. Another motorbike rider entered the lane abruptly and I immediately sounded my horn. The rider stopped his vehicle right in front of me upon noticing my motorbike. It was too late for me to avoid his vehicle and I collided into the right side of his motorbike and skidded down the lane.

Subjects Involved

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/03/2021 12:46
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



T/20210318/2246

1 of 3

Report No. T/20210318/2246

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No T/20210308/7021

Report Number T/20210318/2246

Vide Report Number T/20210308/7021

Date/Time of Report Made 18/03/2021 17:52

Place Report Lodged Traffic Police

Type of Informant Rider

Name of Informant Heeran Raj S/O P. Gunasegar

ID Type / ID No. NRIC NO / S9531237C

Home/Office

Mobile 81387429

Email

Type of Accident Injury / Conveyed By Ambulance

Drink Drive No

Anyone conveyed by ambulance No

Date/Time of Accident 08/03/2021 07:50

Accident Location CHOA CHU KANG WAY

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBB2839A	Motorcycle					0
FBD8362H	Motorcycle	HONDA	CBR600RR PC40E	Red	Slightly Damaged	0

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



T/20210318/2246

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Report No. T/20210318/2246

Continuation of CSF For NP168

Rider			
Name	Unknown Rider		ID No. NIL
Related Vehicle	FBB2839A (Motorcycle)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Rider			
Name	Heeran Raj S/O P. Gunasegar		ID No. S9531237C
Related Vehicle	FBD8362H (Motorcycle)		Contact No. 81387429
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	08/03/2021	Date Discharge	08/03/2021
No. of Days granted Medical Leave	03	Degree of Injury	Slight

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T/20210318/2246

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Report No. T/20210318/2246

Continuation of CSF For NP168**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.

Case Sensitivity	No
Officer-In-Charge of Case	TP / GIT / THABAGESH JEYATHESH
Classification of Case	1) INJURY / CONVEYED BY AMBULANCE

WOODLAND DISTRICT
POLICE OFFICE
SINGAPORE 738022
TEL: 1800 222 2222

[Signature]
SIRAMESH
18/03/2021

HEECOW RAS
S95512376

[Signature]