

# 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 ..... 12/04/2021 17:28 (SGT)  
Date of Accident ..... 11/04/2021 15:30 (SGT)  
Exact Location of Accident ..... Havelock Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKL121R

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... RICHARD TAN PICK LONG  
NRIC No ..... SXXXX040Z  
Email Address ..... RICHARDT@ARINAHOGAN.COM  
Mobile Phone No ..... (Phone) +65-82882233  
Alternative Phone No ..... +65-82882233

### VEHICLE PARTICULARS

Manufacturer ..... BMW  
Model ..... 740li  
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 ..... Private car  
Transmission ..... Auto  
CC ..... 3000

### INSURANCE COMPANY

Name of Insurance Company ..... Tokio Marine Insurance Singapore Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 20-MT101800-R02  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... RICHARD TAN PICK LONG  
NRIC No ..... SXXXX040Z

Date Of Birth .....	29/05/1962
Occupation .....	Outdoor
Date Of Driving Pass .....	01/10/1980
Driving experience .....	40 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-82882233
Alt. Phone Number .....	+65-82882233
Email Address .....	RICHARDT@ARINAHOGAN.COM
Address .....	550 HAVELOCK RD #09-03
Address complement .....	-
Postcode .....	169638
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? .....	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 .....	Bukit Batok Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18006659999
Alt. Police Station Phone No .....	(Fax) +65-64252661
Police Station Address .....	21 Bukit Batok East Ave 4 Singapore 659840
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210412/2067

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	TP TOOK THE MEMORY CARD
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	FBA254E
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) .....	-

# 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.

<p>Policyholder's Signature / Date &amp; Time</p> <p><i>[Signature]</i></p>	<p>Driver's Signature (if driver is not the policyholder) / Date &amp; Time</p> <p><i>[Signature]</i></p>	<p>Witnessed by Reporting Centre Personnel</p> <p><i>[Signature]</i></p>
<p><b>Sketch Plan</b></p> <p>A = SKL 121 R B = FBA 254 E</p>		

Refer - to Police Report T/20210412/2067

We declare the foregoing particulars are true in every respect.

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre  
Personnel

























**SINGAPORE  
POLICE FORCE**



T/20210412/2067

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Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

Report No. T/20210412/2067

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/04/2021 15:01	Vide Report No.: E/20210411/0155	Station Diary No.: 39
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**Informant's Particulars**

Name of Informant: RICHARD TAN PICK LONG			Address: 550 HAVELOCK ROAD #09-03 SINGAPORE 169638	
ID Type / ID No.: NRIC NO / S1563040Z			Contact No.: Home/Office:	Mobile: 82882233
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 58	Date of Birth: 29/05/1962	Type of Informant: Driver	
Race: Chinese			Language: Chinese	Institution / School Name:
Occupation: Buisness Man			Driving Licence Information: Class: 3	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11/04/2021 00:00	Type of Location: Straight Road
Location:  HAVELOCK ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Light
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 Passenger
FBA254E	Motorcycle			Black		0
SKL121R	Car	BMW	740LI AUTO	Gold	Seriously Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKL121R	TOKIO MARINE INSURANCE SINGAPORE LTD.	MT101800	26/04/2018	26/04/2022



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Report No: T/20210412/2067

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
<b>Rider</b>			
Name	FARIS AQIL BIN AMURRUDIN	ID No.	S9630455B
Related Vehicle	FBA254E (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
<b>Driver</b>			
Name	RICHARD TAN PICK LONG	ID No.	S1563040Z
Related Vehicle	SKL121R (Car)	Contact No.	82882233
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 11/04/2021 at about 1530hrs, I was driving in my vehicle of reg: V1) SKL121R along Havelock Road towards Havelock Link near to unit no: 550. I made a left turn into my unit 550 Havelock Road. Suddenly one motorcycle of reg: V2) FBA254E who was travelling on my vehicle left rear collided into my vehicle. The front of V2 collided into the front left side of my vehicle. The rider then fell to the ground. I immediately stopped my vehicle and came out to assist the rider. The rider was observed to be bleeding on his right foot area however he was able to walk at that time. The ambulance and Traffic Police came. The rider of V2 was then conveyed to the hospital.

I wish to state that I was traveling on a low speed however I did not signal before I made the left turn.

There is In-cam installed in my vehicle and the footage was handed over to the Traffic Police Officer. I was given a case card and advised to lodge traffic accident report.

The Tie Rod End and Sway Bar in my vehicle was damaged. The left front tyre pressure sensor was also damaged.



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Report No. T/20210412/2067

CONTINUATION OF REPORT



# SINGAPORE POLICE FORCE



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659840  
Tel No: 1800-6659999

Report No. T/20210412/2067

## 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:

J /

Sgt 2 NIMROD GOH TIAN JIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt NG BEIFENG

Contact No.: 65476845

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

12/04/2021 15:01

Classification Of Case: