

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 25/06/2021 11:32 (SGT)
Date of Accident 24/06/2021 09:00 (SGT)
Exact Location of Accident Ghim Moh, Singapore
Additional Location Information BLK 19 GHIM MOH ROAD CARPARK CLGM2
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FBL3195P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TEO WEE SHIUM
NRIC No SXXXX058C
Email Address weeshium@hotmail.com
Mobile Phone No (Phone) +65-90485250
Alternative Phone No +65-90485250

VEHICLE PARTICULARS

Manufacturer Honda
Model CBF190WH
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
Transmission Auto
CC 190

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number MSD/VMS/20-416512-CA
Cover Note Number -

DRIVER

Name of Driver TEO WEE SHIUM
NRIC No SXXXX058C

Date Of Birth	15/11/1984
Occupation	Indoor
Date Of Driving Pass	17/12/2007
Driving experience	13 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90485250
Alt. Phone Number	+65-90485250
Email Address	weeshium@hotmail.com
Address	Blk 108 bedok north rd, #12-2212
Address complement	-
Postcode	S460108
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	SCM9801S
Insurance Company of Other Vehicle Owned by Driver	Sompo Insurance Singapore Pte. Ltd.

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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LAW LE TENG
Gender	Female

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

PLEASE REFER TO SKETCH PLAN.

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	YP8668R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods 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 TEO WEE SHIUM
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? FBL3195P
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? -

INJURED 2


Name of injured person LAW LE TENG
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? FBL3195P
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? -

Describe Circumstances of the Accident

On the 25th June 2021 at about 9am,
I entered an open Compact at B1K 19 Gt. in Mob Rd.
I was following behind a lorry (YP8668R) to
look for motorcycle lots. The lorry stopped to let
another car out from a parking lot so he could park
there. I also stopped behind the lorry. The lorry
suddenly start reversing, and hit into my motorcycle.
He did not stop ~~at~~ even after I sounded my horn
multiple times. He only stopped after I slap my
palm on his vehicle after I recovered myself
from falling off my motorcycle.
Me and my pillion suffered injury.


Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date &
Time 25 JUN 2021
1030am

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





Witnessed by Reporting Centre
Personnel

SKETCH PLAN

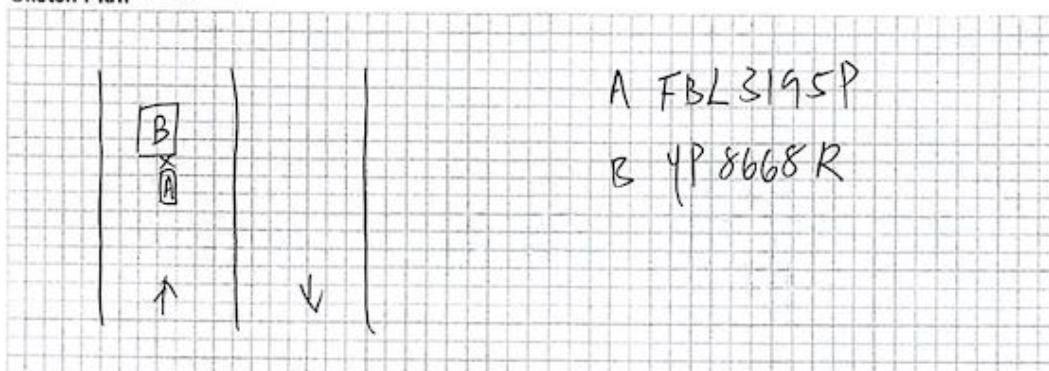
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or 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
25 JUN 2021
Sketch Plan 1030am

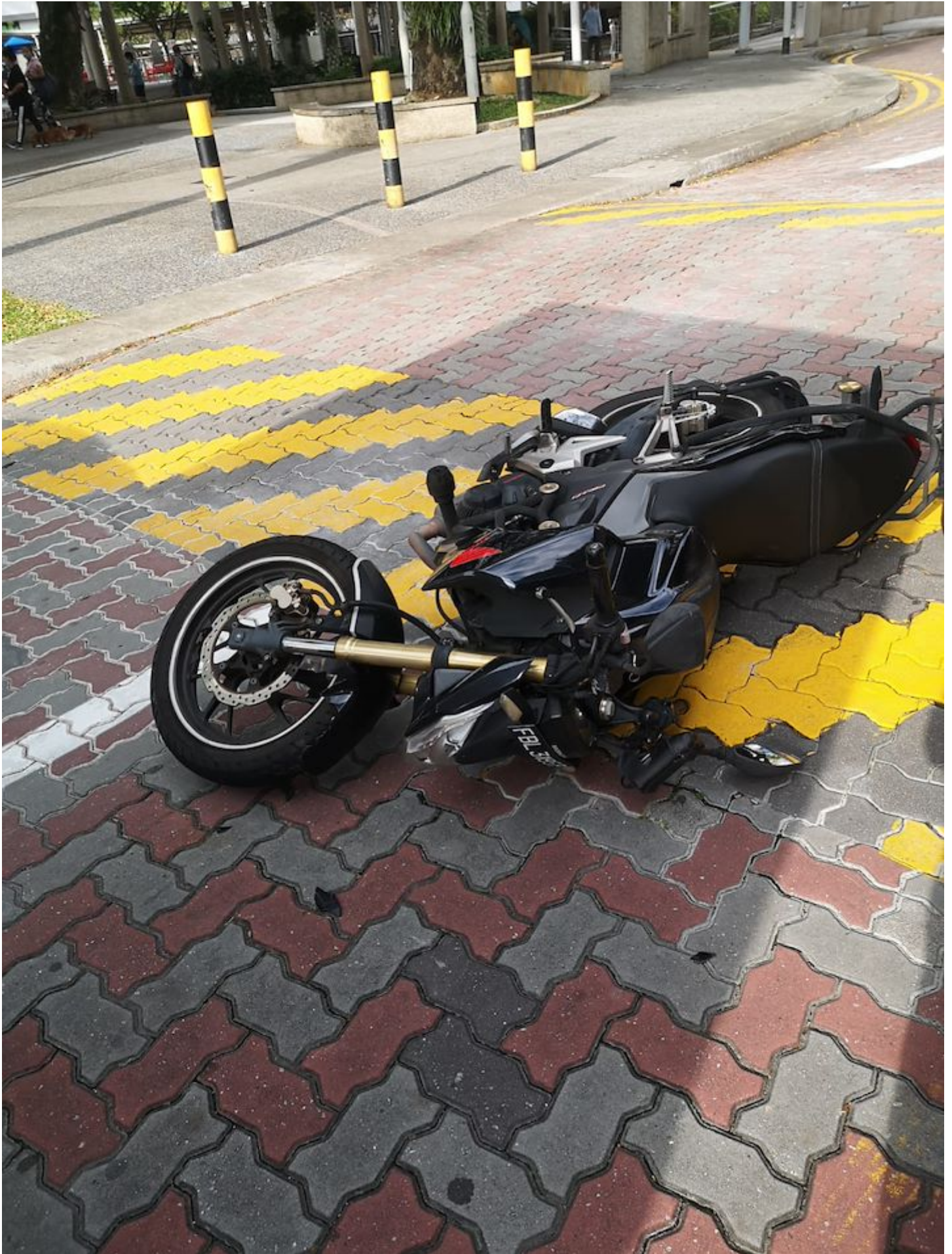
Driver's Signature (If driver is not the policyholder) / Date & Time

 
Witnessed by Reporting Centre Personnel










MSIG

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
msig.com.sg

MOTORCYCLE INSURANCE SCHEDULE

DATE OF ISSUE: 29/08/2020

AGENCY: A0074-001-10223
 COMMERCIAL AGENCY PTE LTD

POLICY NO: MSD/VMS/20-416512-CA

INSURED:

NAME: TEO WEE SHIUM
 ADDRESS: 108 BEDOK NORTH ROAD
 #12-2212
 SE 460108

NRIC NO: S8479058C
 DATE OF BIRTH: 15/11/1984 (35 yrs)
 DRIVING EXP: 17/12/2007 (12 yrs)
 CONTACT NO: 90485250

BUSINESS OR PROFESSION: TECHNICIAN

PERIOD OF INSURANCE FROM: 06/09/2020 TO 05/09/2021
 12:01AM

REGISTRATION NUMBER: FBL3195P

CUBIC CAPACITY: 184

MAKE OF VEHICLE: HONDA

YEAR OF REGISTRATION: 2016

INSURED ESTIMATE OF VALUE: PMV
 PREVAILING MARKET VALUE

SEATING CAPACITY: 2

AUTHORISED DRIVERS:

THE INSURED ONLY.

ENDORSEMENTS APPLICABLE: 2C 2K 3Q M23 97 - INSURED

PREMIUM: 159.60

EXCESS: \$300(FIRE&THEFT) \$600(ENDT 2K)

GST @ 7% 11.17

TOTAL: 170.77

NO CLAIM BONUS OF 20% IS ALLOWED
 GOOD DRIVER DISCOUNT OF 5% IS ALLOWED

NAME OF EMPLOYER AND/OR
 HIRE PURCHASE OWNER:

REPLACING POLICY NO: MSD/VMS/19-403191-CA

MSIG Insurance (Singapore) Pte. Ltd.

Sanction Limitation and Exclusion Clause

No Insurer shall be deemed to provide cover and no Insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that Insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.

Approved Insurers